

April 15, 2025

The Honorable Robert F. Kennedy Jr.  
Secretary  
U.S. Department of Health and Human Services  
200 Independence Avenue S.W.  
Washington, DC 20201

RE: Viral Hepatitis, Reductions in Force, and HHS Reorganization

As organizations committed to eliminating viral hepatitis as a public health threat in the United States, we express our grave concern over sudden and drastic changes to the Centers for Disease Control and Prevention (CDC) and other health agencies. We fear that the broad range of layoffs, coupled with a reorganization of the Department of Health and Human Services operating divisions, has been undertaken without sufficient consideration of their impact on our nation's capacity to address the broad health threats posed by viral hepatitis, will undermine progress towards reducing viral hepatitis incidence and mortality, and ultimately risk costing both money and lives by disrupting essential viral hepatitis prevention and control functions of our states and communities. With 3.3 million Americans estimated to be living with chronic viral hepatitis, it is essential that the CDC have the capacity to conduct surveillance, education, and connect individuals to care.

Over the past five years, CDC's Division of Viral Hepatitis (DVH), in collaboration with other CDC Divisions and Centers and through coordination with other HHS agencies, has achieved major milestones despite a comparatively small annual appropriation of \$43 million. CDC has disseminated updated guidance on hepatitis B and C screening, hepatitis B immunization, and identification of perinatal hepatitis C infection; produced national and state-level assessments of hepatitis C cure rates; supported states in development of viral hepatitis elimination plans; facilitated responses to widespread hepatitis A outbreaks; and supported the validation and implementation of novel viral hepatitis diagnostics.

These and other significant achievements have required a combination of rigorous evidence-based processes, scientific expertise and accumulated institutional knowledge, stakeholder engagement, and concerted efforts across the domains of science, programs, policy, and communications. These strengths of DVH are hallmarks of our nation's public health agency, cultivated by skilled and experienced leadership and fostered by dedicated public servants. Most remarkably, DVH has advanced progress towards viral hepatitis elimination despite an annual budget of only \$43 million in FY 2025 – the majority of which goes out to states and communities.

The combination of department-wide staffing reductions coupled with proposed reorganization of agencies has generated widespread alarm across our groups and communities which recognize DVH's critical leadership in viral hepatitis elimination. As a high-performing Division

within CDC with a small staff and budget, DVH's core functions and competencies have benefitted from its position within the National Center for HIV, Viral Hepatitis, STD, and Tuberculosis Prevention (NCHHSTP), facilitating strong collaboration for responses to communicable diseases with overlapping routes of transmission and epidemiological patterns. DVH's position within CDC also provides benefits from coordination with other CDC divisions tasked with overdose prevention, immunization, health pregnancies and births, and support for state, tribal, local, and territorial health departments.

We are particularly concerned by reports of proposed cuts in both staffing and funding to CDC's Division of HIV Prevention and to the Division of Overdose Prevention at CDC's Injury Center. Much of the scaffolding of key areas of viral hepatitis prevention and control rely on leveraging existing infrastructure and surveillance data. Given substantial overlap in risk factors, CDC-supported HIV and overdose prevention programs have been crucial partners for viral hepatitis prevention across states and communities. The disruption or dissolution of these partnerships would have harmful and far-reaching consequences for viral hepatitis prevention.

Additionally, we are alarmed that the Division of Viral Hepatitis Laboratory Branch has been eliminated as part of this reorganization. Providers have already received notice of its closure and that it will no longer be able to provide laboratory services to public health departments and other partners, including local Veterans Administration clinics. There is no other laboratory in the world that had this level of expertise in viral hepatitis. From 2020-2025, the CDC's viral hepatitis laboratory provided services to state and local public health authorities for over 52 different viral hepatitis outbreak investigations across the country at no cost. Until the day it was shuttered, the laboratory was providing response support for a hepatitis C outbreak associated with a pain clinic in Florida.

The closure of the laboratory branch is just one example of the adverse consequences that will result from this reorganization. We strongly believe that rapid changes of the magnitude currently underway risk severe unintended consequences that may ultimately cost our nation both money and lives by impeding progress towards crucial viral hepatitis elimination goals. We welcome a thoughtful review of our nation's viral hepatitis elimination capacity aimed at identifying obstacles to progress, including improved coordination, appropriate resource and staffing levels, available authorities, and processes and regulations that serve as bottlenecks or constraints on nimble and efficient public health responses. We believe that such a review should be undertaken in consultation with both Congress and key stakeholders and experts. In the absence of such a process, we fear the consequences of drastic changes will take decades to reverse.

We thank you for your consideration and would like to work with you to protect and strengthen the critical viral hepatitis programs at HHS. Should you have any questions, please contact Daniel Raymond at [daniel@nvhr.org](mailto:daniel@nvhr.org).

Sincerely,

Access Support Network  
African Life Center  
AIDS Alabama  
AIDS Foundation Chicago  
AIDS United  
Alameda County Health  
American Association for the Study of Liver Diseases  
Asian American Drug Abuse Program, Inc. (AADAP)  
Asian Health Coalition  
Asian Liver Center at Stanford University  
Asian Pacific Community in Action  
Association of Asian Pacific Community Health Orgs  
Association of Nurses in AIDS Care  
Association of Schools and Programs of Public Health  
AVAC  
Bedford Stuyvesant Family Health Center  
Berkeley NEED  
Bienestar Human Services  
BOOM!HEALTH  
Cares of Southwest Michigan  
Caring Ambassadors Program  
Center for Disease Analysis Foundation  
Charles B. Wang Community Health Center, Inc. (CBWCHC)  
Christie's Place  
Community Health Action of Staten Island  
Community HealthCare Network  
Community Liver Alliance  
Congolese United Foundation  
Empire Liver Foundation  
End Hep C SF  
Equality California  
Gastroenterology & Hepatology Advanced Practice Providers (GHAPP)  
Georgia Equality  
Glide Foundation  
Global Liver Institute  
Harm Reduction Ohio  
Hawai'i Learning Groups  
Hawai'i Health & Harm Reduction Center  
Health Betterment Initiative  
Health Brigade  
Health Services Agency  
Health Services Center, Inc.  
HealthHIV/HealthHCV  
Help-4-Hep

Hep B United  
Hep B United Philadelphia  
Hep Free Hawaii  
Hepatitis B Foundation  
Hepatitis C Association  
Hepatitis Education Project  
HHRC  
Hispanic Federation  
HIV Alliance  
HIV Medicine Association  
HIV+Hepatitis Policy Institute  
Housing Works  
iHealth, Inc.  
Illinois Public Health Association  
Immunize.org  
Korean Community Services  
LIVER HEALTH INITIATIVE  
MAUI AIDS FOUNDATION  
MCAVHN Care and Prevention Network  
MELWP  
Mid South Liver Alliance  
Montefiore Starfish Program  
NASTAD  
National Black Church Initiative  
National Consumers League  
National Harm Reduction Coalition  
National Task Force on Hepatitis B  
National Viral Hepatitis Roundtable (NVHR)  
National Working Positive Coalition  
NC AIDS Action Network  
Nebraska DHHS  
NJ Hepatitis Coalition  
North Central Public Health District  
Radiant Health Centers  
San Francisco AIDS Foundation  
SF Hep B Free - Bay Area  
Silver State Equality  
Somos Familia Valle  
Southwest Recovery Alliance  
State of Hawaii, Department of Health  
Texas Liver Foundation  
The AIDS Institute  
The Hepatitis C Mentor and Support Group-HCMSG  
The Task Force for Global Health

Times Pharmacy Hawaii  
Treatment Action Group  
UCSF  
Virginia Hepatitis Coalition  
Virginia Rural Health Association  
Vivent Health  
VOCAL-WA  
West Virginia Hepatitis Academic Mentoring Partnership

CC:

Acting Director, CDC

Chairs and Ranking Members of House & Senate Appropriations Committees, House Energy and Commerce Committee, and Senate Health Education, Labor and Pensions Committee