

April 23, 2025

The Honorable Bill Cassidy, MD  
Chair, Senate Committee on Health,  
Education, Labor, and Pensions  
428 Dirksen Senate Office Building  
Washington, DC 20510

The Honorable Brett Guthrie  
Chair, House Committee on Energy and  
Commerce  
2125 Rayburn House Office Building  
Washington, DC 20515

The Honorable Bernie Sanders  
Ranking Member, Senate Committee on  
Health, Education, Labor, and Pensions  
428 Dirksen Senate Office Building  
Washington, DC 20510

The Honorable Frank Pallone, Jr.  
Ranking Member, House Committee on  
Energy and Commerce  
2125 Rayburn House Office Building  
Washington, DC 20515

Dear Chair Cassidy, Ranking Member Sanders, Chair Guthrie, and Ranking Member Pallone:

On behalf of the Federal AIDS Policy Partnership (FAPP), we write to express significant concerns regarding the planned restructuring and program elimination at the U.S. Department of Health and Human Services (HHS), as reported in connection with the President's FY2026 Budget. FAPP is a national coalition of local, regional, and national organizations advocating for federal legislation and policy seeking to end the HIV epidemic in the United States.

The planned creation of the Administration for a Healthy America (AHA)—along with the elimination of the Centers for Disease Control and Prevention's (CDC) Division of HIV Prevention, Ending the HIV Epidemic Initiative, Minority AIDS Initiative, and the Ryan White HIV/AIDS Program Part F, with a corresponding reduction in HIV-related expenditures—poses substantial risks to our nation's coordinated, evidence-based response to HIV. The absence of stakeholder engagement and lack of clarity around how core HIV functions would be preserved under this proposal raises significant concerns. Taken together, these proposed actions strongly suggest a deprioritization of the federal HIV response precisely at a time when sustained federal leadership and resources remain critical.

The recent closure of CDC's Division of Viral Hepatitis and Division of STD Prevention laboratory branches, following a reduction-in-force, illustrates how current restructuring efforts are already diminishing critical public health capabilities. These laboratories provided essential support to state and local health departments, including testing validation and outbreak response. Scaling back this kind of federal infrastructure undermines states' ability to monitor disease trends and respond to shifting health needs



in real time. If states are expected to make measurable progress on HIV, viral hepatitis, and STI prevention, they need more support from federal partners, not less.

We urge your Committees to:

- **Reject the proposed restructuring and program eliminations**
- **Restore and protect core public health capacity at CDC**, ensuring states have access to the expertise and services necessary to track and respond to infectious diseases.
- **Preserve congressional programmatic authority and oversight** for the CDC's National Center for HIV, Viral Hepatitis, STD, and Tuberculosis Prevention (NCHHSTP), and the Health Resources and Services Administration's (HRSA) HIV/AIDS Bureau.
- **Hold a congressional hearing** to evaluate the implications of these changes for states and communities, and to ensure accountability if any reorganization occurs.

Additionally, we are concerned about the proposed use of block grants for certain programs within the CDC's National Center for HIV, Viral Hepatitis, STIs, and TB Prevention (NCHHSTP). While HIV funding has not been explicitly identified as part of the block grant proposal, shifting core public health programs to a block grant model raises serious concerns. Block grants make it harder to ensure accountability, track how funds are used, and target resources where they are most needed. Focused, categorical funding has been essential to supporting data-driven, locally tailored responses, particularly in jurisdictions with limited infrastructure or high burden.

The decisions your Committees make regarding these proposed changes will have lasting consequences on HIV, viral hepatitis, and STI prevention efforts nationwide. Congress has a critical role in ensuring federal investments and structural decisions enhance, rather than compromise, the public health infrastructure necessary to end the HIV epidemic.

We stand ready to assist the Committees as you consider these crucial matters and look forward to supporting efforts to maintain and strengthen our national response to HIV and related infectious diseases. Questions may be directed to FAPP co-chairs: John Meade ([john@AVAC.org](mailto:john@AVAC.org)), Kathie Hiers ([kathie@aidsalabama.org](mailto:kathie@aidsalabama.org)), or Mike Weir ([mweir@NASTAD.org](mailto:mweir@NASTAD.org)).

CC:

The Honorable Susan Collins  
The Honorable Patty Murray  
The Honorable Shelley Moore Capito  
The Honorable Tammy Baldwin  
The Honorable Tom Cole

The Honorable Robert Aderholt  
The Honorable Rosa DeLauro

