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April 4, 2025

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

Dear Secretary Kennedy:

Alarmed by reports our staff has received about potentially devastating cuts to the capacity of the National Institute for Occupational Safety and Health (NIOSH), we write to request immediate answers to the questions we posed in our letter to you dated February 19, 2025,¹ as well as additional questions we have in light of recent events.

Created by the *Occupational Safety and Health Act of 1970* (OSH Act)² and tasked with other responsibilities under the *Federal Mine Safety and Health Act of 1977* (Mine Act),³ *Energy Employees Occupational Illness Compensation Program Act of 2000* (EEOICPA),⁴ and other laws, NIOSH is the nation's preeminent scientific authority on occupational illness and injury. NIOSH's expertise is essential to the functioning of those laws. Among many other things, NIOSH recommends criteria for lifesaving workplace health and safety standards; investigates workplace outbreaks and safety crises at the request of employers and workers and provides recommendations and guidance for making workplaces safe and healthy; certifies experts qualified to analyze chest X-rays of black lung claimants against global standards for assessing the extent of lung damage; operates a periodic mobile black lung clinic to provide miners chest exams, free of charge; enables research into injuries and deaths of children engaged in farmwork; provides estimates of work-related exposures to radiation to enable the Department of Labor to assess the eligibility of workers in the nation's nuclear weapons program for EEOICPA compensation for their cancers and other diseases; incentivizes the development of new mine safety technologies and tests them in real-world mining environments; leads the nation's largest initiative to track and understand the incidence of

¹ Letter from Reps. Robert C. "Bobby" Scott & Ilhan Omar to the Hon. Robert F. Kennedy, Jr. (Feb. 19, 2025), https://democrats-edworkforce.house.gov/imo/media/doc/scott_omar_letter_to_niosh_regarding_staff_cuts.pdf [hereinafter February Letter].

² Pub. L. No. 91-596, § 22 (1970).

³ Pub. L. No. 91-173, §§ 411-426, 501, 503, 511(b) (1977).

⁴ Pub. L. No. 106-398, §§ 3625-3626, 3633, 3661

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cancer among the nation's firefighters; and, through its National Personal Protective Technology Laboratory (PPT Lab), advances the science and effective use of Personal Protective Equipment (PPE), such as respirators, footwear covers, and eye protection, on which 20 million workers (including one million firefighters) rely.⁵ Every person in America who goes to work for a living benefits from NIOSH's essential work.

Our previous letter requested information about staff terminations and spending rescissions, with a deadline of March 6, 2025.⁶ Well past that deadline and more than a month since the letter was sent to you, we still do not have answers to those questions.

In recent days, you have announced a major reorganization of the Department of Health and Human Services (HHS), including the relocation of NIOSH from the Centers for Disease Control and Prevention (CDC) to a newly established Administration for a Healthy America (AHA).⁷ Moving NIOSH from one bureaucratic box to another may not mean much, provided that NIOSH's staffing and resources remain sufficient to the tasks Congress has set before it. Absent answers to the questions we posed to you in February, however, we cannot assess that crucial predicate.

Now, we are also learning about possible elimination of entire programs and significant numbers of staff. According to communications from HHS to a union representing federal employees who would be affected, which we obtained and have been subsequently reported in the news,⁸ HHS is ordering the closure of the following areas of NIOSH's work:

- Two divisions (Spokane and Pittsburgh) in NIOSH's Mining Program;
- The Western States Division, which conducts research on a wide range of occupational safety and health matters, with a focus on those of particular relevance to workers in the West; and
- The complete elimination of the National Personal Protective Technology Laboratory.

We understand that just under 900 staff will be fired in a "reduction in force" as a result. The terminated NIOSH staff will account for close to 10 percent of the reported 10,000 HHS personnel slated for elimination in a secretive and apparently arbitrary process.⁹

Eliminating so much of NIOSH's mine safety capacity, especially as we near the fifteenth anniversary of the Upper Big Branch mine disaster, makes exactly zero sense. In our experience, the importance of NIOSH's mine safety and health research has long been recognized by labor and mining operators alike. As a result, Congress permanently established NIOSH's Office of Mine

⁵ SUSAN D. MOORE *ET AL.*, NAT'L INST. FOR OCC. SAFETY & HEALTH, DHHS (NIOSH) PUB. NO. 2024-104, NIOSH HEALTHCARE PERSONAL PROTECTIVE TECHNOLOGY TARGETS FOR 2020 TO 2030 (2004), <https://www.cdc.gov/niosh/docs/2024-107/pdfs/2024-107.pdf?id=10.26616/NIOSH PUB2024107>.

⁶ February Letter, *supra* note 1.

⁷ *HHS Announces Transformation to Make America Healthy Again*, U.S. DEP'T OF HEALTH & HUM. SVCS. (Mar. 27, 2025), <https://www.hhs.gov/about/news/hhs-restructuring-doge.html>.

⁸ Alexander Tin, *RFK Jr.'s Layoffs Expected to Gut Worker Safety Agency NIOSH, Officials Say*, CBS NEWS (Mar. 31, 2025), <https://www.cbsnews.com/news/rfk-jr-layoffs-hhs-niosh-worker-safety-agency/>.

⁹ Sophia Cai *et al.*, *Internal Fallout at HHS Delays 10,000 Firings*, POLITICO (Mar. 31, 2025), <https://www.politico.com/news/2025/03/31/doge-hhs-firings-delayed-00262115>.

Safety and Health in the aftermath of the deadly Sago Mine disaster.¹⁰ You lack the authority to eviscerate it by fiat, and any attempt to do so will waste decades of life-saving innovations.

For example, NIOSH research and investment spurred the development of the Coal Dust Explosibility Meter, a small, portable device that detects excessive coal dust accumulations in real time and enables operators to eliminate explosion hazards.¹¹ Other proven innovations include an equation that enables operators to optimize ventilation and air pressurization systems for effective dust control; a simple, lightweight, and inexpensive helmet-mounted video exposure monitoring tool and accompanying analytical software designed specifically for mining environments, which has been used not just in the U.S. but also internationally; and the dual-nozzle bagging system, which reduces dust exposure for baggers in fine mineral processing operations.¹²

Currently, NIOSH is nearing final development of technology that would prevent silicosis and other diseases in miners—and save costs for mine operators at the same time—by way of inexpensive on-site analysis of dust samples at the end of a miner’s shift.¹³ Portable instruments using Fourier transform infrared spectroscopy (FTIR) directly on dust sampler filters are now available on the market, thanks to NIOSH research.¹⁴ Having developed the method successfully for use in coal mines, NIOSH has more recently learned how to apply mine-specific correction factors to account for the “interferences” that had previously undermined the applicability of FTIR in “metal/nonmetal” (that is, non-coal) mines.¹⁵ Since the direct-on-filter analysis method is non-destructive, the filters can still be shipped to accredited labs for validation, allowing for both rapid end-of-shift data and reliable analysis suitable for enforcement purposes.¹⁶ Just on the horizon after years of investment and hard work, this innovation will be a game-changing tool for protecting miners across mining commodities from dangerous silica dust. This work would be thrown away by steep cuts to NIOSH’s Mining Program.

America’s miners power up this country and provide the bedrock of our infrastructure. Do not turn your back on them.

¹⁰ MINER Act, Pub. L. No. 109-236, § 6 (2006) (amending section 22 of the OSH Act).

¹¹ Nat’l Inst. for Occ. Safety & Health, *A Real-Time Monitor to Prevent Coal Dust Explosion Hazards in the Mining Industry*, CDC.GOV (Aug. 2011), <https://www.cdc.gov/niosh/docs/2011-205/default.html>.

¹² Andrew B. Cecala *et al.*, *Forty Years of NIOSH/USBM-Developed Control Technology*, MINING ENG’G, June 2020, at 732.

¹³ Jason D. Pampena *et al.*, *Use of the Field-Based Silica Monitoring Technique in a Coal Mine: A Case Study*, 37 MINING, METALL. & EXPL. 717 (2020); Emanuele Cauda *et al.*, *Promoting Early Exposure Monitoring for Respirable Crystalline Silica: Taking the Laboratory to the Mine Site*, 13 J. OCC. & ENVTL. HYGIENE D39 (2016); Jun Ojima, *Determining of Crystalline Silica in Respirable Dust Samples by Infrared Spectrophotometry in the Presence of Interferences*, 45 J. OCC. HEALTH 94 (2003).

¹⁴ Elizabeth L. Ashley *et al.*, *Performance Comparison of Four Portable FTIR Instruments for Direct-on-Filter Measurement of Respirable Crystalline Silica*, 64 ANNALS WORK EXPOS. & HEALTH 536 (2020).

¹⁵ Emanuele Cauda *et al.*, *Evaluating the Use of a Field-Based Silica Monitoring Approach with Dust from Copper Mines*, 15 J. OCC. & ENVTL. HYGIENE 732 (2018); Julie F. Hart *et al.*, *A Comparison of Respirable Crystalline Silica Concentration Measurements Using a Direct-On-Filter Fourier Transform Infrared (FT-IR) Transmission Method vs. a Traditional Laboratory X-Ray Diffraction Method*, 15 J. OCC. & ENVTL. HYGIENE 743 (2018).

¹⁶ Pampena *et al.*, *supra* note 13.

Even more mindboggling is the apparent decision to eliminate the PPT Lab. Ten miners survived the deadly 2006 fire in the Aracoma Alma Mine No. 1 thanks to respirators approved by NIOSH's PPT Lab.¹⁷ Although it is likely most widely known for its role in certifying respirators such as the N95 respirators that became ubiquitous in the early days of the COVID-19 pandemic, the PPT Lab also conducts important research related to PPE for firefighters, including assessing best use, handling, and cleaning practices in order to reduce the toxic chemical exposures¹⁸ that leave firefighters much more likely than the general population to develop cancers and many other diseases.¹⁹ NIOSH's certification label on respirators demonstrates that non-biased public authorities, free from the conflicts of interest that can plague private firms, affirm the quality and reliability of PPE that can be a life or death matter. Eliminating the PPT Lab will leave the public vulnerable to fraudulent certifications or else reliant on the competing technology certified by Chinese authorities. It will also leave many employers in the lurch, unable to comply with the Department of Labor regulations requiring employers to provide NIOSH-certified respirators in certain conditions.²⁰

The reports our staff is hearing paint an even darker picture still. Although the staff terminations of which we are aware target the PPT Lab, a large chunk of NIOSH's Mining Program, and some portion of NIOSH's OSH Act work, at least in the West, the rumors circulating are that NIOSH as a whole will be shutting down, save for the portion of its work implementing EEOICPA and the compensation program for first responders at the World Trade Center after the 9/11 terrorist attack. Whether your plan is to diminish support for workers or eliminate it entirely, we urge you to reconsider. The total cost of workplace illness and injury is greater than the total costs of all cancer, heart disease, diabetes, and stroke.²¹ Moreover, evidence grows every single day about the causative role of workplace conditions in many chronic diseases.²² You cannot make America healthy again if you ignore workers' health.

¹⁷ *Celebrating 100 Years of Ensuring Respiratory Protection for American Workers*, NAT'L SAFETY COUNCIL (Sept. 3, 2019), <https://www.nsc.org/safety-first-blog/celebrating-100-years-of-ensuring-respiratory-protection-for-american-workers>.

¹⁸ Les Boord, *The Role of NIOSH in Protecting On-the-Job Health of Fire Fighters*, NAT'L INST. OF STANDS. & TECH. (Sept. 30, 2009), https://www.nist.gov/system/files/documents/el/fire_research/1-Boord.pdf.

¹⁹ See generally H.R. REP. NO. 117-306 (2023) (committee report accompanying Federal Firefighters Fairness Act of 2022, H.R. 2499, 117th Cong. (2022)).

²⁰ See, e.g., 29 C.F.R. § 1910.134(d)(1)(ii); 30 *id.* §§ 56.5005, 56.610(a), 57.5005.

²¹ J. Paul Leigh, *Economic Burden of Occupational Injury and Illness in the United States*, 89 MILBANK Q. 728 (2011).

²² In recent months alone, the new evidence includes the following: Anne Kristin Møller Fell *et al.*, *Occupational Exposure and Chronic Bronchitis in a Sample of the General Population in Telemark, Norway: A Two-Phased Cross-Sectional Study*, OCC. & ENVTL. MED. (forthcoming 2025) (finding occupational exposure to vapors, gas, dust, and fumes is associated with chronic bronchitis); Jaclyn M. Goodrich *et al.*, *Epigenetic Modifications Associated With Wildland-Urban Interface (WUI) Firefighting*, 66 ENVTL. & MOLEC. MUTAGENESIS 22 (2025) (finding that firefighters working at the wildland/urban interface are at heightened risk of epigenetic changes that are precursors to development of cancers, Chronic Obstructive Pulmonary Disorder, Parkinson's disease, Alzheimer's, and neurodegeneration); Peter Bager *et al.*, *Association Between Biosecurity and Zoonotic Transmission of LA-MRSA CC398 from Industrial Pig Farms to Farm Workers and Their Household Members*, 82 OCC. & ENVTL. MED. 45 (2025) (finding that industrial pig farms that utilize strict biosecurity measures reduce the risk of transmission of zoonotic diseases from pigs to farm workers and their families); Yuan Shao *et al.*, *Drillers and Bulldozer Operators Have Experienced Exceptionally High Exposures to Respirable Crystalline Silica in US Surface Coal Mines*, 81 OCC. & ENVTL. MED. 622 (2024) (finding significantly high exposure to silica dust among certain groups of workers in surface mines, particularly drillers and bulldozer operators).

You will almost inevitably be required to produce answers and documents on these matters in the course of litigation. We encourage you to be forthcoming now, through the congressional oversight process, and let the American people know what is happening to the work in which they invested for more than 50 years and on which so many of them rely for their very lives. Make good on your promise of “radical transparency”²³ and produce, by April 11, 2025, the information we requested in our February 19 letter (a copy of which is attached for your convenience).

Additionally, please provide the following information and documents by April 15, 2025:

1. Provide “the master plan that outlines in granular detail where cuts will fall across HHS,” including all related “data files,” which reportedly are in the possession of Rachel Riley, the “top aide” to Brad Smith, HHS’s DOGE Team Lead.²⁴
2. Provide all documents and communications since January 20, 2025, regarding the hiring or detailing of Brad Smith and Rachel Riley.
3. With regard to Brad Smith and Rachel Riley:
 - a. Does HHS pay for the salary of Smith and Riley?
 - b. If the answer is *yes*, provide the salary for each.
4. Provide all documents and communications since January 20, 2025, regarding reductions in force or cuts in capacity (including eliminating or reducing programs or offices) at NIOSH.
5. Does HHS have any plan for ensuring that, after moving NIOSH from CDC to AHA, a NIOSH expert will be granted a seat in public health conversations, working groups, task forces, and other activities on public health matters led by CDC or other HHS agencies, including the current response to Highly Pathogenic Avian Influenza? If so, provide all documents and communications related to such plan.
6. Provide all documents and communications since January 20, 2025, regarding the establishment of AHA, any personnel matters related to AHA, and funding of AHA, including redirection of funds from other agencies to AHA.
7. Provide all documents and communications since January 20, 2025, regarding the termination of leases, sale of property, or value of leases or property, housing NIOSH programs, activities, staff, or equipment.
8. Provide all documents and communications since January 20, 2025, regarding privatization, outsourcing, or potential privatization or outsourcing, of any activity currently conducted by NIOSH.
9. Provide all documents and communications since January 20, 2025, regarding the delegation or transfer of any function or activity currently within the responsibility of NIOSH to any other program or agency.
10. With respect to NIOSH’s current Mining Program—
 - a. Does HHS intend to abandon NIOSH’s Mining Program (*yes/no*)?

²³ Ryan King, *RFK Jr. Calls for New Age of ‘Radical Transparency’ at HHS, Tells Critics They ‘Can Retire’*, N.Y. POST (Feb. 18, 2025), <https://nypost.com/2025/02/18/us-news/rfk-jr-calls-for-new-age-of-radical-transparency-at-hhs-tells-critics-they-can-retire/>.

²⁴ Cai *et al.*, *supra* note 9.

- b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
11. With respect to NIOSH's PPT Lab—
 - a. Does HHS intend to permanently close NIOSH's PPT Lab (*yes/no*)?
 - b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
12. With respect to NIOSH's current work of conducting workplace health hazard evaluations—
 - a. Does HHS intend to abandon NIOSH's work of conducting workplace health hazard evaluations (*yes/no*)?
 - b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
13. With respect to NIOSH's current work of supporting research on the incidence of illness, injury, and death among child laborers on American farms—
 - a. Does HHS intend to abandon NIOSH's child laborer illness and injury research work (*yes/no*)?
 - b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
14. With respect to NIOSH's current work of leading the National Firefighter Registry for Cancer—
 - a. Does HHS intend to abandon this program of work (*yes/no*)?
 - b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
15. With respect to NIOSH's current Authoritative Recommendations Program—
 - a. Does HHS intend to abandon this program of work (*yes/no*)?

- b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
16. With respect to NIOSH's current Exposure Assessment Program—
- a. Does HHS intend to abandon this program of work (*yes/no*)?
 - b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
17. With respect to NIOSH's current Occupational Health Equity Program—
- a. Does HHS intend to abandon this program of work (*yes/no*)?
 - b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
18. With respect to NIOSH's current Surveillance Program—
- a. Does HHS intend to abandon this program of work (*yes/no*)?
 - b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
19. With respect to NIOSH's current Center for Direct Reading and Sensor Technology—
- a. Does HHS intend to abandon this program of work (*yes/no*)?
 - b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
20. With respect to NIOSH's current Center for Occupational Robotics Research—
- a. Does HHS intend to abandon this program of work (*yes/no*)?
 - b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.

21. With respect to NIOSH's current Nanotechnology Research Center—
 - a. Does HHS intend to abandon this program of work (*yes/no*)?
 - b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
22. With respect to NIOSH's current Center for Work and Fatigue Research—
 - a. Does HHS intend to abandon this program of work (*yes/no*)?
 - b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
23. With respect to NIOSH's current Center for Workers' Compensation Studies—
 - a. Does HHS intend to abandon this program of work (*yes/no*)?
 - b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
24. With respect to NIOSH's current Center for Maritime Safety and Health Studies—
 - a. Does HHS intend to abandon this program of work (*yes/no*)?
 - b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
25. With respect to NIOSH's current Center for Motor Vehicle Safety—
 - a. Does HHS intend to abandon this program of work (*yes/no*)?
 - b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
26. With respect to NIOSH's current Emergency Preparedness and Response Program—
 - a. Does HHS intend to abandon this program of work (*yes/no*)?
 - b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.

- c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
27. With respect to NIOSH's current Engineering Controls Program—
 - a. Does HHS intend to abandon this program of work (*yes/no*)?
 - b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
28. With respect to NIOSH's current Small Business Assistance Program—
 - a. Does HHS intend to abandon this program of work (*yes/no*)?
 - b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
29. With respect to NIOSH's current Agriculture, Forestry, and Fishing Program—
 - a. Does HHS intend to abandon this program of work (*yes/no*)?
 - b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
30. With respect to NIOSH's current Construction Program—
 - a. Does HHS intend to abandon this program of work (*yes/no*)?
 - b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
31. With respect to NIOSH's current Healthcare and Social Assistance Program—
 - a. Does HHS intend to abandon this program of work (*yes/no*)?
 - b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
32. With respect to NIOSH's current Manufacturing Program—
 - a. Does HHS intend to abandon this program of work (*yes/no*)?

- b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
- 33. With respect to NIOSH's current Oil and Gas Extraction Program—
 - a. Does HHS intend to abandon this program of work (*yes/no*)?
 - b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
- 34. With respect to NIOSH's current Public Safety Program—
 - a. Does HHS intend to abandon this program of work (*yes/no*)?
 - b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
- 35. With respect to NIOSH's current Services Program—
 - a. Does HHS intend to abandon this program of work (*yes/no*)?
 - b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
- 36. With respect to NIOSH's current Transportation, Warehousing, and Utilities Program—
 - a. Does HHS intend to abandon this program of work (*yes/no*)?
 - b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
- 37. With respect to NIOSH's current Wholesale and Retail Trade Program—
 - a. Does HHS intend to abandon this program of work (*yes/no*)?
 - b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.

38. With respect to NIOSH's current Cancer, Reproductive, Cardiovascular, and Other Chronic Disease Prevention Program—
 - a. Does HHS intend to abandon this program of work (*yes/no*)?
 - b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
39. With respect to NIOSH's current Hearing Loss Prevention Program—
 - a. Does HHS intend to abandon this program of work (*yes/no*)?
 - b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
40. With respect to NIOSH's current Immune, Infectious, and Dermal Disease Prevention Program—
 - a. Does HHS intend to abandon this program of work (*yes/no*)?
 - b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
41. With respect to NIOSH's current Musculoskeletal Health Program—
 - a. Does HHS intend to abandon this program of work (*yes/no*)?
 - b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
42. With respect to NIOSH's current Respiratory Health Program—
 - a. Does HHS intend to abandon this program of work (*yes/no*)?
 - b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
43. With respect to NIOSH's current Traumatic Injury Prevention Program—
 - a. Does HHS intend to abandon this program of work (*yes/no*)?

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- b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.
44. With respect to NIOSH's current Healthy Work Design and Well-Being Program—
- a. Does HHS intend to abandon this program of work (*yes/no*)?
 - b. If the answer is *yes*, explain the rationale for the elimination of this work and provide all documents and communications since January 20, 2025, regarding the plan to eliminate this work.
 - c. If the answer is *no*, provide all documents and communications since January 20, 2025, regarding the plan to continue such work despite the new reduction in NIOSH capacity to carry out this work.

Please send all official correspondence and information related to these requests to the Committee's Democratic staff at by emailing Eleazar Padilla at Eleazar.Padilla@mail.house.gov. Should you have any questions about this request, please contact Bob Shull with the Democratic staff of the House Committee on Education and Workforce at Robert.Shull@mail.house.gov.

Sincerely,



ROBERT C. "BOBBY" SCOTT
Ranking Member



ILHAN OMAR
Ranking Member
Subcommittee on Workforce Protections