

ONE HUNDRED NINETEENTH CONGRESS
Congress of the United States
House of Representatives
COMMITTEE ON ENERGY AND COMMERCE
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January 23, 2026

The Honorable Robert F. Kennedy Jr.
Secretary
Department of Health and Human Services
200 Independence Avenue
Washington, D.C. 20021

Dear Secretary Kennedy:

We write to request additional information regarding the decision by the Department of Health and Human Services (HHS) to abruptly terminate 7 grant and subgrant awards through the Centers for Disease Control and Prevention (CDC) and Health Resources and Services Administration (HRSA), totaling nearly \$12 million dollars, awarded to the American Academy of Pediatrics (AAP). On December 16, 2025, HHS announced it was pulling all funding to AAP, including awards that fund nationwide research and services surrounding public health concerns. Funding was eliminated for research and services for birth defects in children, Fetal Alcohol Syndrome Disorders (FASD), newborn hearing screening programs, partnerships to address the health of pregnant and postpartum women as well as adolescents and young adults, and early autism screening. On January 11, 2026, the United States District Court for the District of Columbia issued a preliminary injunction ordering HHS to restore AAP's grant funding, stating that the terminations raised questions of "whether the federal government has exercised its power in a manner designed to chill public health policy by retaliating against a leading and generally trusted pediatrician-member professional organization focused on improving the health of children."¹ HHS' attempts to abuse the Department's resources to carry out a retaliatory agenda on the backs of American children is an appalling waste of taxpayer dollars. This destructive action is clearly retribution against the AAP for their vigorous criticism of the Trump Administration's vaccine policies that are putting children's lives at risk. The Administration's policies fail to reflect the scientific and medical consensus regarding the safety and efficacy of vaccines.²

¹ Memorandum Opinion Granting Preliminary Injunction, (Jan. 11, 2026), American Academy of Pediatrics v. U.S. Department of Health and Human Services, D.D.C. (No. 1:19 CV 03526).

² *HHS cuts millions in grants to the American Academy of Pediatrics*, NBC News (Dec. 17, 2025); *The divide between pro- and anti-vaccine states is widening*, Stat News (Jan. 12, 2026).

The AAP represents more than 67,000 pediatricians across the country and has been a trusted resource for science-based pediatric care, recommendations, research, and resources for nearly 95 years.³ In public rebuttal to criticism over your unilateral decisions to restrict access to proven and safe vaccines, you have accused AAP of “pay for play schemes,” which is a baseless attack on the integrity and independence of a widely-respected organization.⁴ The Department’s rationale for the decision to immediately terminate funding for targeted grants administered by the CDC and HRSA was that the awards are “no longer in alignment with the stated HHS and CDC priority areas.”⁵ This is a dubious justification by HHS and smacks of alarming political retribution at the expense of the health and wellness of our children.

The Department’s mission “to enhance the health and well-being of all Americans” is squarely aligned with ensuring these critical grant programs, remain funded.⁶ With the most recent data from 2022, the CDC estimated that approximately 3,500 infants die annually due to sudden unexpected infant death (SUID), with unsafe sleep environments being a key factor.⁷ AAP has published evidence-based guidelines with several recommendations to promote infant safe sleep environments. However, the grant termination decision under your leadership at HHS prevents AAP and community partners from continuing successful SUID public health intervention and education to save infants’ lives.

The Department’s decision to terminate grant funding to address prenatal alcohol, substance use, and FASD most certainly goes against HHS’s stated mission of “providing for effective health and human services” by building national collaborative networks to reduce prenatal alcohol and other substance use as well as improve support services, access to care of individuals with FASDs. FASD is a lifelong condition with no cure but is preventable through toolkits available to parents and providers through the AAP. According to the CDC, up to 1 in 20 U.S. school-aged children may have FASDs, estimating the lifetime cost of care for one individual to be \$2 million, and a cost to the United States economy of over \$4 billion annually.⁸

The Department’s decision to terminate grant funding related to the Early Hearing Detection and Intervention System also directly contradicts its mission of “providing for

³ American Academy of Pediatrics, *About the AAP* (<https://www.aap.org/en/about-the-aap/>) (accessed Jan. 7, 2026).

⁴ *American Academy of Pediatrics loses HHS funding after criticizing RFK Jr.*, The Washington Post (Dec. 17, 2025).

⁵ *American Academy of Pediatrics v. U.S. Department of Health and Human Services, et al.* (No. 1:25 CV 11916).

⁶ Department of Health and Human Services, *About HHS* (<https://www.hhs.gov/about/index.html>) (accessed Jan. 7, 2026).

⁷ Centers for Disease Control and Prevention, *Data and Statistics for SUID and SIDS* (https://www.cdc.gov/sudden-infant-death/data-research/data/?CDC_AAref_Val=https://www.cdc.gov/sids/data.htm) (accessed Jan. 7, 2026).

⁸ Department of Health and Human Services, *Data and Statistics on FASDs* (<https://www.cdc.gov/fasd/data/index.html>) (accessed Jan. 7, 2026).

effective health and human services.” Universal newborn hearing screening helps identify newborns who are likely to have hearing loss and who require further evaluation. Because of our ability to diagnose hearing loss early and tailor interventions, many babies with hearing loss are able to achieve normal or near-normal speech, language, and hearing milestones.⁹

The abrupt termination of grants that support vital public health programs in what appears to be retaliation for advocacy is deeply concerning and sets a dangerous precedent. For many of these programs, AAP was one of many awardees under a given program, but it was the only awardee to have its funding terminated. Most importantly, this act of political retaliation will have real consequences for the children, families, and providers who benefit from the terminated programs.

To better understand how HHS is making grant funding decisions, we request that HHS provide responses to the following questions by February 6, 2026:

1. Provide all documents and communications related to the decision to cancel nearly \$12 million in grants to the AAP.
2. Did CDC or HRSA receive guidance or communication from the Trump Administration, Secretary or others at HHS or the White House that directed, requested, or suggested that grants to AAP be reviewed or terminated?
3. Provide all analysis and documentation on HHS’s plan to reallocate the nearly \$12 million in rescinded grant funding awarded to AAP and for what programs or entities will be awarded funding.
4. What is HHS’s plan to fund projects and initiatives that will be funded to replace work that AAP was performing in relation to sudden infant deaths, adolescent health, newborn hearing screening, fetal alcohol syndrome prevention, and early autism detection?
5. Is the decision to terminate these grants, purportedly because they no longer align with HHS priorities, the result of a review of all grants in the CDC and HRSA portfolios? Were other grants funded under the same funding mechanisms also reviewed? If so, were grants to other awardees that focused on these same “non-priority” areas also identified for termination? Or were the only grants identified for termination those made to AAP?
6. Several of the terminated awards funded educational and technical assistance resources provided directly to patients and providers. Broadly, the purpose of these resources was to improve child health outcomes and patient care. Will HHS continue to provide these resources, either directly or via grants made to other organizations? If not, will any attempt be made to evaluate the consequences of eliminating these resources?

⁹ American Academy of Audiology, *Newborn Hearing Screening* (<https://www.audiology.org/consumers-and-patients/children-and-hearing-loss/newborn-hearing-screening/>) (accessed Jan. 21, 2026).

7. In the grant termination letters from HRSA, the agency stated that while HRSA “may suspend rather than immediately terminate an award to allow the recipient an opportunity to take appropriate corrective action before HRSA makes a termination decision, after review and consideration, no corrective action is possible here since no corrective action could align the award with current agency priorities.” Why and how was it determined that there is no corrective action that AAP could take to align the award with current agency priorities?
8. Please identify which of the conditions targeted by the terminated AAP grants will no longer be prioritized by the Department and provide a detailed explanation as to why these grants no longer align with the goals of the Department. If these conditions remain priorities for HHS, please explain how the HHS plans to continue advancing related initiatives in the absence of these grants.
9. Please provide the rationale for the timing as to when you terminated the grants.

If you have any questions about this request, please contact the Committee Democratic staff at (202) 225-2927.

Sincerely,



Frank Pallone, Jr.
Ranking Member



Diana DeGette
Ranking Member
Subcommittee on Health



Yvette D. Clarke
Ranking Member
Subcommittee on Oversight &
Investigations