



September 19, 2025

Secretary Robert F. Kennedy, Jr. Department of
Health and Human Services 200 Independence
Street SW
Washington, DC 20201

Sent electronically to: secretary@hhs.gov

**RE: Mitigating Institutional Knowledge and Expertise Loss from Terminated or
Departing Federal Employees**

Dear Secretary Kennedy:

On behalf of the undersigned members of the Coalition for Tribal Sovereignty (CTS),¹ we write to inform you about the negative impacts Tribal Nations are experiencing as a consequence of recent efforts by the Administration to consolidate functions within the Department of Health and Human Services (HHS) and to significantly decrease the size of the federal workforce. Indian Country is deeply concerned about how these actions will impact the United States' ability to fulfill its trust and treaty obligations to Tribal Nations, Tribal citizens, and Tribal communities, given that the Administration's actions have already resulted in a substantial loss of institutional knowledge and expertise at HHS with respect to Native issues.

To name a few impacts, the loss of experienced staff has already resulted in:

- abrupt endings to long-term relationships between staff and specific Tribal Nations;
- delays in responding to time-sensitive Tribal correspondences;
- delays in providing critical technical assistance, particularly with respect to grant administration, compliance, and reporting; and
- a shortage of personnel with the requisite clearances and expertise to review or approve federal funding drawdowns and expenditures by Tribal Nations and Tribal-serving organizations.

Indian Country is not opposed to reducing federal government waste and improving federal government efficiency. However, actions to achieve the Administration's goals *must not* interfere with the United States' fulfillment of its trust and treaty obligations. In response to the reduction in staff at HHS, CTS respectfully offers the following recommendations to mitigate the harms these actions are causing our Tribal Nations.

- 1. Formulate and release a plan—subject to *prior* Tribal consultation—detailing how HHS will fulfill its trust and treaty obligations in light of workforce reductions.** The United States has assumed ongoing trust and treaty obligations to Tribal Nations and Tribal citizens and communities that are political in nature and for which we prepaid with our lands and resources. Because Tribal Nations and Tribal organizations serving Tribal communities rely on HHS staff for assistance, which ultimately impacts Tribal governance and service delivery to our communities, it is critical HHS formulates and releases a plan for Tribal review on how HHS will continue to fulfill its legal obligations in spite of a reduced workforce.
- 2. Share detailed information with Tribal Nations about current and future vacant positions and what programs and services are or will be impacted by such vacancies.** Currently, HHS is not communicating clear information to Indian Country about which HHS positions are currently vacant; whether current vacancies will be filled in the future (and, if so, when they will be filled); and which

¹ A CTS briefing paper on the formation and messaging of CTS can be found [here](#), and more information about CTS can be found on our website [here](#).

positions are expected to become vacant in the future. Tribal Nations need this information for planning purposes and to assist in the process of anticipating where workforce changes will result in potentially negative outcomes.

3. **Defer employment end dates for federal employees serving Indian Country who are subject to future layoffs, employees utilizing the Deferred Resignation Program (DRP), and employees retiring under the Voluntary Early Retirement Authority (VERA).** Deferring employment end dates to enable departing employees ample time to take steps to preserve and transfer institutional knowledge and expertise to departmental colleagues will smooth the eventual transition for both federal agencies and Indian Country.
4. **Implement a policy requiring all staff serving Indian Country to keep regularly updated records detailing responsibilities and statuses of their ongoing projects, which can quickly be turned into exit memoranda if necessary.** Keeping updated memoranda ensures critical information related to Indian Country is captured in written form in the event that an employee ceases work with the federal government for any reason. This information can be used by future HHS employees, reducing the time needed to rebuild key components of institutional knowledge and expertise and to get up to speed on particular projects.
5. **Require departing federal agency Points of Contact (POC) for Indian Country to meet with Tribal Nations, and ensure HHS identifies replacements before the POC departs.** Many Tribal Nations have long-standing issues requiring long-standing relationships with individual federal POCs whom Tribal Nations rely on to engage in dialogue, negotiations, and technical assistance. Requiring POCs to meet with the Tribal Nations they serve *and* ensuring HHS identifies replacement POCs is *critical* to minimizing institutional knowledge and expertise losses and to avoiding harmful delays that occur when no new POC is identified for weeks, months, or even years.
6. **Require outgoing federal employees to identify when their absence will create gaps in Tribal Nations' ability to access payment systems.** Tribal Nations rely on several federal processing systems to access their federal funds so they can provide critical government services and carry out regular government business. If HHS's reduction in the federal workforce results in or exacerbates obstacles to readily accessing any of these systems, Indian Country must be made aware as early as possible, preferably with immediate steps taken to ensure that access and payments are not disrupted or delayed in the future.
7. **Engage in regular consultation with Tribal Nations about ongoing changes in the federal workforce, impacts on Indian Country, and opportunities for Tribal governments to exercise more control over impacted areas.** CTS recognizes HHS's efforts to engage in some government-to-government consultation with Tribal Nations. But CTS urges HHS to engage in regular Tribal consultation regarding the latest and pending changes to the federal workforce so that Tribal Nations can express how we are being impacted and can work with HHS to find opportunities to develop solutions *together*.

Thank you for your continued leadership and partnership on issues impacting Indian Country. If additional dialogue on any of these points is helpful, we welcome the opportunity to meet with you or your staff.

Sincerely,

American Indian Higher Education Consortium (AIHEC)
National American Indian Court Judges Association (NAICJA)
National Congress of American Indians (NCAI)
National Council of Urban Indian Health (NCUIH)
National Indian Head Start Directors Association (NIHSDA)
National Indigenous Women's Resource Center (NIWRC)
Northwest Portland Area Indian Health Board (NPAIHB)
Seattle Indian Health Board (SIHB)