

United States Senate

WASHINGTON, DC 20510

May 7, 2025

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

Dear Secretary Kennedy:

We write regarding reports that the U.S. Department of Health and Human Services (HHS) eliminated the team responsible for tracking assisted reproductive technology success rates, including in vitro fertilization (IVF), across the country. These firings impede HHS's ability to comply with the law and have devastating consequences for all people who are trying to become parents and rely on this information to thoughtfully and safely grow their families.

Infertility affects millions of Americans throughout their lifetimes, and can have a profound impact on a person, couple, and family. IVF and other assisted reproductive technologies can be a lifeline. As of 2021, almost 90,000 infants born were conceived through IVF, a significant increase over the 47,818 infants born in 2011, just ten years prior, who were conceived through IVF and other assisted reproductive technologies. Because IVF is a complicated and expensive process, the American people deserve access to the best information possible to inform their family building journey.

Unfortunately, hollowing out National Assisted Reproductive Technology (ART) Surveillance System capabilities and capacity is consistent with Donald Trump's deceitful and disingenuous rhetoric on IVF. Just last year, then-candidate Trump promised the American people that if elected, Donald Trump would make IVF free for every American, declaring, "[w]e are going to be, under the Trump administration, we are going to be paying for that treatment" and claiming, "[w]e're going to be mandating that the insurance company pay [for IVF]." These comments have proven to be bold-faced lies.

Roughly one month after being sworn in, Donald Trump issued an IVF Executive Order that did nothing to fulfill his promise to make IVF free for every American. The Trump administration is now moving beyond broken promises to purposely dismantling the very system that provides hopeful families with accountability and transparency regarding fertility clinic success rates.

The Fertility Clinic Success Rate and Certification Act of 1992 (FCSRCA), authored by Senator Ron Wyden, is the cornerstone of consumer protections as people seek to grow their families through IVF. It was passed in large part to assure transparency for patients seeking IVF care. The law requires all fertility clinics to report pregnancy success rates to the federal government in a standardized manner and for this information to be published publicly. These responsibilities are delegated to the Centers for Disease Control and Prevention (CDC). The CDC is also responsible

for establishing licensure and accreditation processes for IVF laboratories and delegating the oversight of these responsibilities to an approved organization. Since the passage of FCSRCA, the increase in IVF and other assisted reproductive technologies has been substantial and, consequently, the importance of the law's mandates has only grown.

The Assisted Reproductive Technology Surveillance and Research team (ARTS) was housed within the CDC's Division of Reproductive Health. This team of six carried-out the CDC's statutorily mandated responsibilities under the FCSRCA, including conducting IVF clinic data analysis related to success rates, yearly audits and site visits, and monitoring lab certification status. The team collects and maintains data on approximately 98 percent of all IVF and assisted reproductive technology cycles performed in the United States.

The team was composed of deeply qualified and trained scientists, including statisticians, doctors, and people with advanced degrees in epidemiology and public health. Across the team, there were combined decades of experience and deep expertise in the complex field of assisted reproductive technology. The ARTS team was also a careful steward for decades worth of highly sensitive, personally identifiable information (PII) related to IVF procedures, including the medical history of both hopeful parents undergoing IVF and their children, demographic information, and more.

The ARTS team was uniquely well-suited to carry-out the CDC's extensive responsibilities under FCSRCA, and its positive impact on the field and the lives of millions of Americans is impossible to quantify. The team's work increased the likelihood of healthy pregnancies and births conceived via IVF and other assisted reproductive technologies. No other resource or dataset exists that comprehensively tracks as many IVF and other assisted reproductive technology cycles across the country as the ARTS team did.

The ARTS team also played a major role in informing clinical guidelines and improving IVF safety and access. This team also built a patient-facing IVF success estimator to help people make informed, individualized decisions about where, when, and how to receive fertility care. The ARTS team was also passionate about being a source of unbiased information for fertility patients. Given the broad range of specialized knowledge required to carry-out these duties, it is hard to imagine that others at CDC, or any agency, would be able to step-in and fill these roles.

Your actions threaten hopeful parents and families' ability to access high-quality, safe, and effective fertility care. The American people deserve assurances that their rights under the FCSRCA will continue to be guaranteed, as Congress intended. In closing, we demand that you immediately rehire every civil servant formerly on the ARTS team. Further, please respond to the questions below by Friday, May 16:

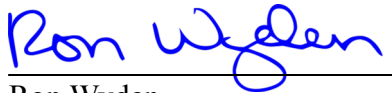
1. When will you reinstate the entirety of the ARTS team?
2. How many employees on the ARTS team, and any supporting contracts, have been fired since January 20, 2025? Please provide a complete breakdown by position, provide information on GS level and veteran status, and clearly state the justification for

termination. This accounting should include any employees who have since been reinstated or placed on administrative leave, noting that change in status.

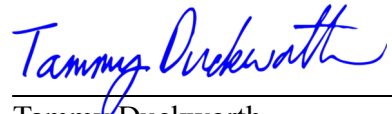
3. Which officials at HHS were involved in these staffing reduction decisions and what planning, if any, was undertaken prior to these reductions? Please describe the events that unfolded and name each office that was involved in the decision. Further, please name the official(s) who approved the staffing reductions as well as specifically indicate if any of the below individuals, or direct reports to these individuals, were involved in the decision-making. Name any such direct reports.
 - a. Elon Musk, Special Government Employee, DOGE.
 - b. Amy Gleason, Acting Administrator, DOGE.
 - c. Susan Monarez, Acting Director, First Assistant to the Director, Principal Deputy Director, CDC.
4. Without an ARTS team, how will the CDC continue to carry-out its statutorily-required responsibilities under FCSRCA? Please provide a detailed plan, including noting who has the expertise, skills, capacity, and resources to carry-out the responsibilities formerly carried-out by the ARTS team.
5. Have, or will, any of the CDC's responsibilities previously carried-out by the ARTS team been contracted out?
 - a. If so, what assurance will you give the American people that the data and analysis produced will be comprehensive, transparent, publicly-accessible and cover all IVF cycles annually, as the ARTS team did?
 - b. If so, please describe the cost of contracting out these services.
6. In some instances, the HHS's Reduction In Force (RIF) efforts have been characterized as final. Those same people have stated that, as per the nature of the layoffs, the roles and responsibilities previously carried out by fired staff cannot be refilled. Is this characterization of the RIF efforts correct?
 - a. If so, how can the CDC continue to carry-out its statutorily required responsibilities under FCSRCA?
7. What communication, if any, has been given to IVF clinics in connection with the ARTS layoffs and how to report data going forward? If any such communication was distributed, please produce it.
8. Does the CDC continue to collect data from IVF clinics across the country? If so, who is responsible for collecting that data and where is the data presently being stored?
9. People considering and undergoing IVF and other assisted reproductive technologies rely on up-to-date information to make informed medical decisions. Each year, CDC collects data from IVF clinics across the country and standardizes this information into a public-facing website and report.
 - a. As of the ARTS team's firings, the 2023 data had been fully collected. What is the anticipated release date for the 2023 IVF report? Has this timeline been impacted by the ARTS layoffs?

- b. Have any of the information categories published in previous years been removed or altered? If so, please describe the changes that have been made to information categories and provide a rationale for any changes.
10. The ARTS team was operational for over 30 years and the historical information it held related to ARTS is uniquely instructive to public health efforts and contains sensitive PII about hopeful parents undergoing IVF and their children. How will the CDC maintain patient confidentiality, protect PII, and sustain this critical database moving forward? Please provide a detailed plan.
- a. Further, who is presently in charge of the historical information previously held by the ARTS Team and where is this information held?
11. Was the decision to dismiss the ARTS team made in consultation with any non-governmental entities, including nonprofits, think tanks, advocacy organizations, research or educational institutions, or public policy research organizations.
- a. If so, please provide any written documents or correspondence that informed this decision and name all non-governmental entities involved in the decision to terminate the ARTS team.

Sincerely,



Ron Wyden
United States Senator



Tammy Duckworth
United States Senator



Patty Murray
United States Senator



Cory A. Booker
United States Senator



Charles E. Schumer
United States Senator



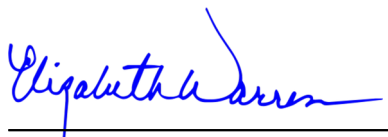
Amy Klobuchar
United States Senator



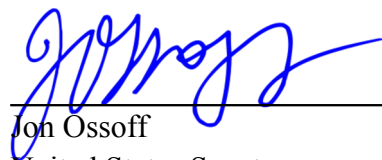
John Hickenlooper
United States Senator



Kirsten Gillibrand
United States Senator



Elizabeth Warren
United States Senator



Jon Ossoff
United States Senator



Richard Blumenthal
United States Senator



Raphael Warnock
United States Senator



Mazie K. Hirono
United States Senator