Deep Staff Cuts at a Little-Known Federal Agency Pose Trouble for Droves of Local Health Programs

HRSA manages thousands of projects that fund primary health providers, HIV/AIDS treatment and prevention, maternal and child care and more.

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A little-known federal agency that sends more than $12 billion annually to support community health centers, addiction treatment services, and workforce initiatives for America's neediest people has been hobbled by the Trump administration's staffing purges.

The cuts are "just a little astonishing," said Carole Johnson, who previously led the Health Resources and Services Administration [HRSA]. She left the agency in January with the administration change and has described the sweeping staff cuts as a "big threat" to the agency's ability to distribute billions of dollars in grants to hospitals, clinics, nonprofits, and other organizations nationwide.

Since February, about a quarter of workers at HRSA — including analysts, auditors, scientists, grant managers, and nursing consultants — have left, according to a KFF Health News analysis.

The agency, headquartered in a nondescript gray-and-glass office building tucked into side streets in Rockville, Maryland, employed about 2,700 staffers in early 2025. Employees worked behind the scenes to manage and monitor thousands of projects nationwide that fund primary health providers, HIV/AIDS treatment and prevention, maternal and child care programs, rural hospitals, and workforce training.

On the ground, HRSA's grants have helped create telehealth initiatives for mothers in rural New Mexico, funded workforce training for Indigenous nurses in South Dakota, and supported Healthy Start programs for expectant mothers and babies in places like rural Georgia.

Ryan Alcorn, a co-founder and the chief executive of GrantExec, a company that helps organizations match and apply for funding, said every American benefits from the programs HRSA's funding supports: "When the safety net fails, hospitals become overwhelmed, unpaid costs rise, and premiums go up for everyone."

Several former HRSA leaders, who have been in touch with employees, confirmed the magnitude of the cuts estimated by KFF Health News. Johnson said she believes the actual number of workers lost is larger.

More than 700 workers were fired or chose to leave from February through the end of June. The analysis is based on data from the HHS employee directory, which may not include workers who opted out of being listed, and may not be an exact count of the worker roster, which is in flux.

Johnson, who is now a senior fellow at the Century Foundation, and several other former employees interviewed by KFF Health News said they are concerned that specific programs will be eliminated, but also that reduced staffing could affect ongoing program oversight. The agency's workforce ethos, Johnson said, is one in which "if there were two people left at HRSA, they would work around the clock to try to get the money out."

For at least one program, revealed during a tense moment on Capitol Hill in July, money to help low-income and minority students has already stopped flowing to colleges and universities. The Scholarship for Disadvantaged Students program, established through congressional legislation, helped schools pay for students to train to become dentists, physician assistants, midwives, and nurses — all of whom are in short supply in rural and some urban areas. Candice Chen, acting associate administrator of HRSA's health workforce bureau, confirmed the agency "did have competitions that were canceled."

When U.S. Rep. Diana DeGette (D-Colo.) asked whether they were canceled by the Trump administration, Chen paused before speaking again: "Well, the funding decisions were made across the administration."

Asked about the canceled funding, officials from several schools declined to comment. Patrick Gonzales, a spokesperson for the University of Texas-Rio Grande Valley, said in an emailed statement that the school is "helping students navigate this transition with clarity and care."

U.S. Sen. Angela Alsobrooks (D-Md.) has called for Health and Human Services Secretary Robert F. Kennedy Jr.'s resignation or firing, "whichever one comes first," saying there was "no defensible answer" to eliminating thousands of workers across federal agencies.

In April, nearly a dozen Democratic senators sent a letter to Kennedy demanding answers about the mass firings, noting HRSA is the "primary agency tasked with improving access to health care for vulnerable populations."

HHS did not respond to the senators' letter. Kennedy and the Department of Health and Human Services "has refused to answer basic questions about why the administration conducted mass firings in this office," said Sen. Lisa Blunt Rochester (D-Del.).

President Donald Trump's proposed fiscal 2026 budget eliminates HRSA as well as some of its programs, including grants to rural hospitals, workforce training, Ryan White HIV/AIDS programs, and emergency medical services for children. HRSA spokesperson Andrea Takash said in an

emailed response that HHS is “undertaking organizational changes that support multiple goals while ensuring continuity of essential services.”

HRSA continues to process new funding announcements and awards for the health centers, workforce programs, child and maternal health initiatives, and “many more of our critical programs and services,” Takash said.

HRSA’s largest bureau supports thousands of community health centers that serve over 31 million people nationwide. Before the end of September, the agency’s grants are still scheduled to pay out billions more to health clinics and other organizations nationwide.

Cuts to health centers could come under more scrutiny because their funding has “a lot of bipartisan” support, said Celli Horstman, a senior research associate at the Commonwealth Fund, a health research nonprofit. HRSA’s funding, which includes Section 330 grants, goes to “keeping the doors open” at federally qualified health centers nationwide, Horstman said.

An additional 42% of health center funding comes from Medicaid, a federal and state insurance program that covers people with low incomes and those with disabilities, she said. Congress recently voted to reduce Medicaid funding.

Joe Stevens, spokesperson for the Virginia Community Healthcare Association, said health centers are rethinking “how they do business” because of the Medicaid cuts and the increased administrative challenges faced when processing their HRSA grants, which have been more challenging to obtain since February. Virginia’s health clinics treat about 400,000 people annually, Stevens said.

“It’s a system that’s been in place for 50-plus years, and this is the first time they’re having issues receiving their funds,” he said, noting that clinics now must also provide an itemized list of how the money is to be used after grants have been approved.

“Our health centers are understaffed, so having somebody to have to enter that information every two weeks is just more time,” Stevens said.

For months, HRSA staff across all departments have worked through changes to their technology systems and transitioned work to others as employees left their jobs. Workers have continued to process grants despite an executive order that froze federal funding and a March announcement that HHS would lay off 10,000 workers and shut down entire agencies — including HRSA.

One former employee said that, at this point, “all we’re doing now is keeping the lights on.”

Michael Warren, who left the agency in June, ran HRSA’s Maternal and Child Health Bureau. Warren described the bureau’s staffing cuts as “substantial.” The bureau awarded more than $628 million in grants between Oct. 1, 2024, and July 22, 2025, to programs that included providing block grants to states and funding home visiting programs, through which trained staffers work

with families with young children.

Warren, who is now the chief medical and health officer for the March of Dimes, said America faces a crisis as one of the “most dangerous places in the world to give birth among other high-income countries, and that shouldn’t be the case.”

With tears brimming, Warren said his former employees “wake up every morning, they work all day, and they go to sleep every night thinking about what they can do for mothers, children, and families.”

Methodology

For this article, KFF Health News calculated workforce reductions at the Health Resources and Services Administration using public information from the Department of Health and Human Services directory posted online. We compared the number and type of employees listed with HRSA in February to those in early July. Our employee totals exclude people listed as interns, fellows, student trainees, or volunteers. The directory is not an official count of HRSA employees, but it offers detailed snapshots of trends so far this year. Reporters also cross-checked the estimates with former employees.

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