

Congress of the United States

Washington, DC 20515

September 18, 2026

Captain Mahyar Mofidi, DMD, PhD
Deputy Assistant Secretary for Minority Health
Director, Office of Minority Health
U.S. Department of Health and Human Services

Dear Captain Mofidi:

We write to express our deep concern regarding the termination of 16 grants administered by the Office of Minority Health (OMH).¹ On August 25th, 2026, grantees — with services supporting advancing vital maternal and health outcomes, promoting health care access in rural communities, supporting treatment and prevention strategies for substance use disorder, and reducing food insecurity — received notice from OMH that federal awards were to be terminated, effective immediately, pursuant to 2 C.F.R. § 200.340(a)(4). Historically, grants under OMH have significantly reduced health disparities by targeting areas with an existing, but unmet need. The termination of these grants not only threatens the health outcomes of communities nationwide, but will destabilize the services that American families rely on today, at the intersection of rising costs and continued attacks on health care.

We are also deeply concerned about OMH stated intentions to redirect attention towards discretionary funding priorities. In a note to grantees, OMH noted that funding would now prioritize, “...(1) reducing overmedicalization in health care by addressing the root causes of infertility and reproductive health conditions, such as...low sperm count, low sperm mobility, low testosterone levels, and erectile dysfunction.” OMH was established to confront and eliminate health disparities nationwide, by elevating community partnerships and establishing programs to support health outcomes across U.S. minority populations. That mission remains urgent. It is alarming that, instead of addressing the continued need for services that make a life-and-death difference in American communities, your office will redirect this funding to prioritize only “addressing the root causes of infertility and reproductive health conditions and promoting physical activity.” This shift overlooks the continued, critical need for comprehensive health equity programs that directly support the communities OMH was created to serve.

This redirection of funding is a severe disservice to existing grants that have consistently delivered measurable results. If OMH’s priority is to support growing families, all while addressing existing health disparities, then your office must uphold the responsibility of

¹ <https://tags.hhs.gov/SearchAward>

continuing to fund the entities that implement strategies proven to narrow health disparities and improve outcomes across this country.

We ask that OMH immediately reinstate the grant funding for these 16 entities. We additionally request the answers to the following questions no later than October 2, 2026.

1. Please provide a detailed analysis of every grant that was terminated across the Office of Minority Health. Please include information regarding how this decision was made, include the names of any officials that played a role in termination decisions, and the total amount of unexpended funds for each grant.
2. Please provide a detailed description that outlines any known violations, underutilization metrics, or program failures, that would require OMH to redirect funds away from active and ongoing grants that facilitate programs with demonstrated outcomes.
3. Please provide detailed information regarding existing opportunities for grantees to submit an appeal. Please include:
 - a. OMH's deadline for appeal submissions;
 - b. Any supplementary materials that OMH directly requested;
 - c. How OMH will review the appeals, including any provided documentation; and
 - d. When corresponding decisions will be communicated to grantees.
4. Please provide any questions or feedback that OMH has received from any entity that received a termination notice. Please include detailed information regarding OMH's response and support they have offered these stakeholders.

OMH plays a critical role in providing national leadership, engaging community partners, and deploying resources to eliminate health disparities across this nation. This mission has historically supported a broad range of services that have filled critical care voids across our communities. The reprioritization of discretionary funding is not only incredibly concerning, but demonstrates a stark break from the comprehensive programs and services that these grants have previously supported. We urge OMH to reinstate this funding immediately to mitigate any severe consequences to the health of our communities. We appreciate your attention to this matter.

Sincerely,


Brittany Petersen
Member of Congress


Terri A. Sewell
Member of Congress

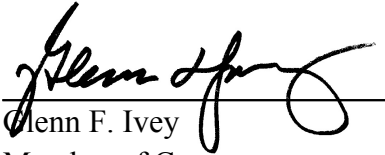

Lauren Underwood
Member of Congress



Adelita S. Grijalva
Member of Congress



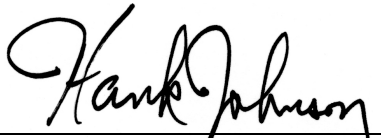
Eleanor Holmes Norton
Member of Congress



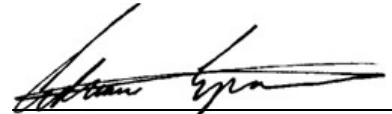
Glenn F. Ivey
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Robin L. Kelly
Member of Congress



Henry C. "Hank" Johnson, Jr.
Member of Congress



Adriano Espaillat
Member of Congress



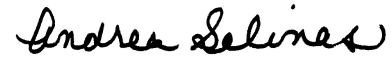
Doris Matsui
Member of Congress



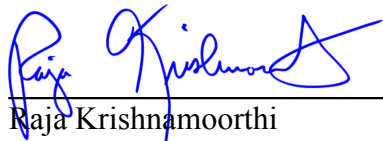
Wesley Bell
Member of Congress



Bonnie Watson Coleman
Member of Congress



Andrea Salinas
Member of Congress



Raja Krishnamoorthi
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Seth Moulton
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Rashida Tlaib
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Shri Thanedar
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Jasmine Crockett
Member of Congress



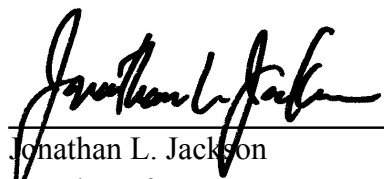
Troy A. Carter, Sr.
Member of Congress



Joyce Beatty
Member of Congress



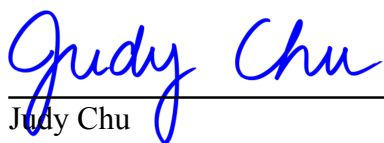
James P. McGovern
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Jonathan L. Jackson
Member of Congress



Nanette Diaz Barragán
Member of Congress



Judy Chu
Member of Congress



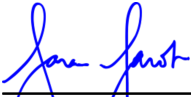
Shontel M. Brown
Member of Congress



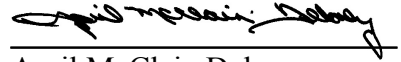
Summer L. Lee
Member of Congress



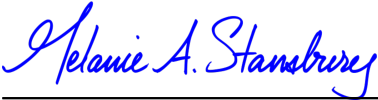
Steny H. Hoyer
Member of Congress



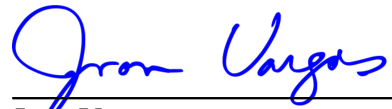
Sara Jacobs
Member of Congress



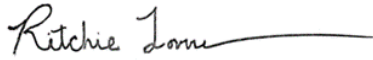
April McClain Delaney
Member of Congress



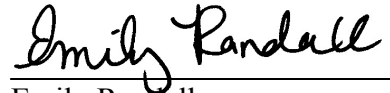
Melanie Stansbury
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Kristen McDonald Rivet
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