HHS agency responsible for health care quality research threatened with mass layoffs

AHRQ may be next DOGE target

By John Wilkerson
March 20, 2025
Washington Correspondent

WASHINGTON — A small government agency responsible for putting medical products and services to practical use and making health care safe is feared to be the latest target for mass layoffs by the Trump administration.

The Agency for Healthcare Research and Quality, part of the Department of Health and Human Services, has about 300 employees and a budget of $369 million, which is about 0.02% of what the government spends on health care. But AHRQ hasn't escaped the notice of the U.S. DOGE Service, which has been slashing agency payrolls and budgets across the government. Insiders say that DOGE aims to reduce AHRQ staff by 80% to 90%. That's based on what agency leaders were told by DOGE representatives at an in-person meeting on March 11, one current employee and one former employee said.

AHRQ does the kind of research that fits well with HHS Secretary Robert F. Kennedy Jr.'s plan to fight chronic disease, often by improving Americans' diets. During his confirmation hearing, Kennedy said he would be "working with AHRQ to hear their proposals on how they will make Americans healthy again."

The agency has funded nutrition studies, including research on how ultra-processed foods contribute to childhood obesity, and data collected by the agency have helped show that people who live in areas awash in unhealthy food options are hospitalized more often for causes related to diabetes than people with healthy options.

The agency also has been key in getting insurers to cover for free preventive services, such as mammograms.

The research that AHRQ funds is practical, and the goal is to put findings to use. It's urged the use of checklists for procedures, including the insertion and maintenance of intravenous lines to reduce infection rates.

An AHRQ-funded study led to a reduction in hospital-acquired infections, estimated to have saved $7.7 billion in health care costs and prevented 20,500 hospital deaths over three years.

AHRQ is the only federal agency focused on health care quality, outcomes, access and cost, according to Aaron Carroll, CEO of the health services research nonprofit AcademyHealth. Unlike studies of drugs and medical products, that kind of research cannot be monetized by the private sector, so if the government doesn't fund it, it doesn't get done.

"If you want a health care system that works better for patients and providers, that's AHRQ," Carroll said. "If you want a health care system that's more efficient and reduces costs, that's AHRQ."

But some of the research that AHRQ has done has caught the attention of DOGE.

Barriers to care are a big part of the agency's portfolio, and much of that work has come to be known as health equity research because barriers to care are not the same for everyone. That term puts AHRQ's research in DOGE's crosshairs.

The Trump administration identified research contracts having to do with health equity, a current employee and former employee said. Unlike larger agencies, AHRQ doesn't have a Trump appointee at the helm, which makes it difficult for agency staff to defend their research to HHS, they said.

Another former AHRQ employee said that if the public understood what health equity means, they would not take issue with it. "It's about making the health care system work for everyone," the former employee said.

Another DOGE target is research on long Covid, according to one of the former employees.

AHRQ established a program called the Long COVID Care Network that funds multidisciplinary long Covid clinics across the country. There are no drugs approved to treat long Covid. Tiffany Walker, an internal medicine doctor at Grady Hospital in Atlanta, said that by working in the AHRQ-sponsored network of hospitals, they've identified drugs, approved for other diseases, that treat long Covid, and they're disseminating that information to other doctors who are unsure about how to treat long Covid patients.

"These are things that are happening at long Covid clinics that are largely not happening in any other long Covid care outside of these specialty clinics," Walker said.

The agency is still funding that network, but the arm that was analyzing the research was terminated, and Walker worries that funding for the network is next. Walker said her clinic was started with funding from AHRQ, so it is almost entirely reliant on the funding.

The former AHRQ employee suspects the long Covid research was flagged because it involves both Covid-19 and aspects of equity research. The grant calls for improving care for people with long Covid, "particularly underserved, rural, vulnerable, or minority populations that are disproportionately impacted by the effects of Long COVID."

But all AHRQ-funded research is at risk if the agency is reduced to a skeleton staff. That's a threat that "absolutely feels real," Carroll said, based on discussions with current and former AHRQ employees and what has happened to other agencies, such as the U.S. Agency for International Development.

Lawmakers also are taking the threat seriously. Sen. Richard Blumenthal (D-Conn.), and Reps. Donald Beyer (D-Va.) and Jamie Raskin (D-Md.) fear the agency could be hollowed out by layoffs as part of an HHS reorganization, according to a letter they sent to Kennedy.

Many staff have already left. Two former employees said supervisors told staff that they were at risk of losing their jobs, either from layoffs or terminations, if they didn't accept offers of buyouts or early retirement. Not everyone qualified for either, and the Friday, March 14, deadline for accepting those offers has passed.

Even those who were eligible for those offers were making decisions with imperfect information. They weren't told they'd be laid off. Instead, the DOGE staff-reduction goal suggested that they were at serious risk of losing their jobs if they didn't go voluntarily.

It's not clear how many people have taken the buyout and retirement offers. Not everyone who applied will necessarily be found eligible, and employees can change their mind before the middle of the second week of April for buyouts or by April 16 for those who submitted applications for early retirement.

In response to questions about potential AHRQ layoffs, HHS spokesperson Andrew Nixon said the department "is following the Administration's guidance and taking action to support the President's broader efforts to restructure and streamline the federal government."