



Department of Health and Human Services  
Centers for Disease Control and Prevention  
Docket No. CDC-2025-0454  
September 18-19, 2025 ACIP Meeting Notice

[Federal Register :: Meeting of the Advisory Committee on Immunization Practices](#)

The Pennsylvania Department of Health, Pennsylvania Department of Human Services, and Pennsylvania Insurance Department (the Departments) – proudly serving the residents of the Commonwealth of Pennsylvania – appreciate the opportunity to submit public comment for the upcoming meeting of the Advisory Committee on Immunization Practices (ACIP), scheduled for September 18–19, 2025. At this meeting, ACIP members will consider a wide range of immunization topics, including discussions on COVID-19 vaccines; Hepatitis B vaccine; measles, mumps, rubella, varicella (MMRV) vaccine; and Respiratory Syncytial Virus (RSV). The agenda also may include recommendation votes for vaccines for COVID-19, Hepatitis B, MMRV, and RSV, as well as Vaccines for Children (VFC) program votes on vaccines for COVID-19, Hepatitis B, MMRV, and RSV.

The Departments urge ACIP to recommend these vaccines to all populations indicated in prior ACIP recommendations in order to facilitate timely insurance coverage, minimize consumer confusion, and ensure that individuals who wish to receive vaccines can do so without barriers. Clear, consistent recommendations help align payers, providers, and public health systems and result in widely available access to vaccinations. Further, the Departments strongly urge ACIP not to eliminate its recommendations for vaccines that have demonstrated irrefutable public health benefit, in some cases for generations.

ACIP's vaccine recommendations are an important piece of allowing families and individuals to remain in control of their health decisions. Importantly, ACIP's vaccine recommendations in no way impose a mandate or requirement for vaccination. However, if ACIP were to abandon its recommendations for safe and effective vaccines, it could become much harder for individuals who actively seek vaccinations to obtain them because the lack of a recommendation often translates into lack of insurance coverage, limited provider availability, and patient and provider confusion. In this way, ACIP withdrawing its recommendation would directly restrict choice.

Therefore, the Departments strongly urge ACIP to approve all vaccines on the agenda across all indicated populations so that health care coverage providers will have certainty as to legal requirements and consumers will be able to continue to receive vaccines at no cost. Without coverage of the vaccines as preventive services, consumers could have to pay out-of-pocket costs to receive a vaccine or may be subject to copays or prior authorization requirements. This uncertainty, in and of itself, may serve as a barrier preventing individuals from seeking out a vaccine. If ACIP does not clearly recommend vaccines, or issues recommendations at odds with long-standing, evidence-based decisions, ACIP could deprive individuals of affordable access to illness protection, such as the respiratory illness protection provided by the updated COVID-19 vaccine. Rather

than ACIP triggering unnecessary illness and financial burdens for consumers and insurers, the Departments urge ACIP to issue clear approvals of all evidence-based immunizations during its upcoming meeting.

Broad access to vaccines serves the public interest. Immunizations not only protect individuals but also strengthen community health by reducing the spread of disease, lowering health care costs, and safeguarding vulnerable populations. Ensuring that Pennsylvanians can get vaccines easily, if they choose, is one of the most effective tools available to support a healthy, resilient population.

Pennsylvania has seen both the effect on demand for vaccines and the harmful public health consequences when ready access to vaccines falters. For example, more than 3.34 million influenza doses were administered during the 2024–2025 season, yet this figure reflects a downward trend from prior years. The decline coincided with a surge of influenza cases—including a single-week peak of nearly 29,000—the highest in several years. Similarly, the rapid uptake of newly available RSV products demonstrates that when immunization products are recommended and accessible, families respond: nearly 600,000 RSV vaccine doses were administered to older adults, over 24,000 to pregnant women, and almost 100,000 monoclonal antibody doses to infants during the most recent season. These data show the critical importance of ensuring that immunization products remain part of the recommended schedule, enabling timely coverage and broad uptake. Hospitalization trends underscore the stakes: between 2000 to 2023 —prior to the availability of the RSV monoclonal antibody for infants—Pennsylvania recorded nearly 95,000 RSV-related hospitalizations, with the highest rates occurring among children under five years old.

Evidence from recent monitoring shows that products such as Nirsevimab (monoclonal antibody) reduces infant hospitalizations by up to 90%, further demonstrating the urgent need for sustained access through programs like VFC. We emphasized this evidence in a comment letter submitted ahead of the previous ACIP meeting, making clear that Pennsylvania’s experience offers a compelling case study for the nation. These findings are not abstract statistics—they represent the lives of children, parents, and older adults whose health depends on timely recommendations and access.

Immunization remains one of the most powerful and cost-effective tools for preventing serious illnesses, reducing hospitalizations, and protecting those most vulnerable to severe outcomes. Vaccines not only safeguard individuals but also strengthen the resilience of entire communities—keeping children in school, parents in the workforce, and health care systems from being overwhelmed during seasonal surges. Consistent and science-driven recommendations from ACIP are therefore essential to preserving both individual autonomy and collective well-being.

The Departments urge ACIP to take decisive action by issuing clear, comprehensive recommendations for the COVID-19, Hepatitis B, MMRV, and RSV vaccines across all indicated populations. These recommendations are not mandates; rather, they are the foundation that ensures families and individuals can exercise true choice in seeking immunization. Without them, access diminishes, confusion spreads, and the burden of preventable illness grows.

Pennsylvania's experience demonstrates that when vaccines are recommended, coverage is broad, access is equitable, and community health is strengthened. Conversely, weakened or absent recommendations lead to declines in vaccination rates, increased disease burden, and unnecessary costs for families and the health care system.

For more than six decades, ACIP has built trust by providing evidence-based, science-driven guidance. Pennsylvania has consistently reinforced this process by submitting comments, sharing state-level data, and advocating for policies grounded in sound science. We urge the Committee to continue this tradition by safeguarding access to vaccines that protect against some of the most consequential infectious diseases of our time. In doing so, ACIP will help ensure that Pennsylvanians retain the ability to protect themselves, their families, and their communities through safe, effective, and affordable immunization, while preserving the personal choice to make informed health decisions. Our continued engagement reflects both the urgency of protecting public health and the responsibility of states to support strong, evidence-driven vaccine guidance.



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