

Medical Groups Urge Congress to Probe Kennedy's Vax Schedule Changes

— Hundreds of medical organizations say overhaul bypassed scientific review, public process

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Hundreds of medical and public health organizations urged Congress to investigate the sweeping changes recently made to the U.S. childhood vaccination schedule by HHS Secretary Robert F. Kennedy Jr. and his administration.

In a [letter signed by more than 230 organizations](#) representing clinicians, scientists, public health professionals, and patient groups, the signatories called on lawmakers to "conduct swift and robust oversight" of an overhaul they described as abrupt and opaque. Going against advice from public health experts, Kennedy's CDC last week [slashed the number of universally recommended childhood vaccines](#) from 17 to 11.

The letter said the changes were not based on credible scientific evidence and were made without public input, stakeholder review, or discussion by the CDC's Advisory Committee on Immunization Practices. That committee, [drastically reshaped](#) last year by Kennedy, includes several members who have espoused anti-vaccine views.

"And yet even this newly constituted committee was not afforded the opportunity to publicly discuss this schedule before it was announced," the groups wrote. "We urge you to investigate why the schedule was changed, why credible scientific evidence was ignored, and why the committee charged with advising the HHS Secretary on immunizations did not discuss the schedule changes as a part of their public meeting process."

Under the new childhood vaccine framework, several immunizations that were previously recommended for everyone are now either limited to high-risk groups or placed under a shared clinical decision-making designation. Influenza, [rotavirus](#), COVID-19, [hepatitis A](#), [hepatitis B](#), some forms of [meningitis](#), and [respiratory syncytial virus](#) (RSV) were each downgraded from routine recommendation status to a shared clinical decision-making model. RSV, hepatitis A, hepatitis B, and meningococcal vaccines were also shifted into the category recommended for high-risk children.

The organizations warned that these changes could create confusion among clinicians and families, reduce vaccination rates, and lead to predictable increases in hospitalizations, outbreaks, and deaths from vaccine-preventable diseases.

They pointed to CDC estimates showing that routine childhood vaccinations between 1994 and 2023 prevented more than 500 million cases of illness, 32 million hospitalizations, and more than 1 million deaths in the U.S. Additionally, [CDC data](#) show that routine childhood immunization in the U.S. from 1994 to 2023 prevented 6 million hepatitis B cases, 30 million rotavirus cases, and 106 million varicella cases.

"Any changes to the recommended immunization schedule, particularly changes of such great magnitude, should be made through a transparent public process through which the scientific data underpinning any potential changes is made public and carefully reviewed by experts," the organizations wrote. "Critically, vaccine recommendations must be based upon the best available scientific data. The recent changes announced to the U.S. immunization schedule do not meet these standards, greatly failing any test for 'gold-standard science,' which is critical to protect public health and earn public trust."

The letter also raised concerns about insurance coverage under the new three-tiered schedule, noting that existing statutory and payer frameworks do not guarantee coverage for vaccines shifted to shared clinical decision-making. The groups warned that the changes could also undermine liability protections under the Vaccine Injury Compensation Program and lead to uncertainty about whether downgraded vaccines remain covered.

"HHS's decision to dismantle a credible childhood vaccine schedule will create even greater confusion for families and health care professionals, and leave more people unprotected against serious vaccine-preventable diseases," the groups wrote.

HHS spokesperson Emily Hilliard defended the changes, saying they bring the U.S. in line with international standards.

"Many peer nations achieve high vaccination rates without mandates by relying on trust, education, and strong doctor-patient relationships," Hilliard told *MedPage Today* in a statement, adding that HHS will partner with states and clinicians "to ensure families have clear, accurate information to make their own informed decisions."

In announcing the new policy, HHS said that all vaccines that were CDC-recommended as of Dec. 31, 2025, will [continue to be covered](#) by Affordable Care Act-regulated insurance plans and federal programs, including Medicaid, the Children's Health Insurance Program, and the Vaccines for Children program.



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