

Friday June 20, 2025

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Ms. Stephanie Thomas  
ACIP Meeting  
Centers for Disease Control and Prevention  
1600 Clifton Road NE, Mailstop H24-8  
Atlanta, Georgia 30329-4027  
Attn: Docket No. CDC-2025-0024

RE: Docket Number [CDC-2025-0024-0001](https://www.fda.gov/oc/ohrt/cdc-2025-0024-0001) (Meeting of the Advisory Committee on Immunization Practices)

To Whom It May Concern:

I have concerns about the recent activities related to the Advisory Committee on Immunization Practices and the agenda of this meeting.

I feel that the replacement of the entire Advisory Committee on Immunization Practices less than two weeks before this meeting removes continuity and creates uncertainty in the ability of the committee to accomplish its expressed agenda at this public meeting.

The docket specifies “*Matters To Be Considered*: The agenda will include discussions on anthrax vaccines, chikungunya vaccines, COVID-19 vaccines, cytomegalovirus (CMV) vaccine, Human papillomavirus (HPV) vaccine, influenza vaccines, Lyme disease vaccine, meningococcal vaccines, pneumococcal vaccines, Respiratory Syncytial Virus (RSV) vaccines for adults, and RSV vaccines for maternal and pediatric populations. Recommendation votes are scheduled for COVID-19 vaccines, HPV vaccine, influenza vaccines, meningococcal vaccine, RSV vaccines for adults, and RSV vaccine for maternal and pediatric populations. Vaccines for Children (VFC) votes are scheduled for COVID-19 vaccines, HPV vaccine, influenza vaccines, and RSV vaccines.”

However the draft published agenda at <https://www.cdc.gov/acip/downloads/agendas/draft-posted-2025-06-18.pdf> indicates the meeting will only be two days instead of the originally planned three days. It also suggests that discussions will only include: vaccines for COVID, influenza, RSV, MMRV, anthrax, and Chikungunya. It will only include recommendation votes for influenza and RSV (maternal/pediatric, and Vaccines for Children) vaccines. Meaning there will be no recommendation votes and Vaccines for Children votes for COVID. It appears that the discussion of CMV, Lyme disease, and pneumococcal vaccines have been entirely removed from the agenda. In addition, the discussion and recommendation votes for HPV and meningococcal vaccines and the Vaccines for Children vote for HPV vaccine were entirely removed from the agenda.

My concern is that by removing these important discussions and votes in a public meeting is side-stepping the standard process for review and denying the transparency owed to the U.S. people regarding vaccine data, discussions, and decisions. When will the removed vaccine discussions and votes take place? Particularly for those for which recommendation votes and Vaccines for Children votes were scheduled but will not be taking place: COVID, HPV, and meningococcal vaccines. There is no federal registrar notice about a scheduled meeting where these ignored vaccines will be discussed and voted upon.

Delaying these votes or, in the worst case, not having them at all will negatively impact vaccines access for minors and adults. It will put high uncertainty on vaccine availability in the U.S. such as recommended schedules, insurance coverage, free coverage for eligible children under Vaccines for Children (a program I have personally benefited from), and state vaccine recommendations. High uncertainty in these areas will create confusion and contribute to opaque scientific practices by the federal government. It removes the transparency in science that the current Secretary of Health & Human Services wants to reduce.

I worry that the delay, or skipping, of these important discussions and votes will create unintended limitations on vaccine access. Such limitations on vaccine access will directly result in an increase in people experiencing contagious illness, severe acute outcomes from contagious illness, and potentially long term health impacts of contagious illness. This will have a devastating impact on the public health of U.S. people. It will increase the burden on healthcare systems and hospitals due to increased illness and ultimately cost U.S. people more. The increase in the number of people dying and experiencing long term health impacts after contagious infection will reduce the number of people actively engaged in our economic systems. All things that will negatively impact our already struggling economy. Also potential unintended limitations on vaccine access will create unnecessary governmental barriers to freedom of medical choice.

Sincerely,

Madison Martin