



March 10, 2026

Advisory Committee on Immunization Practices
Centers for Disease Control and Prevention
1600 Clifton Road NE
Atlanta, Georgia 30329

Re: Docket No. CDC-2026-0199

Dear ACIP Voting and Liaison Members:

On behalf of Trust for America's Health (TFAH), I appreciate the opportunity to provide comments as part of the March 18-19, 2026 meeting of the Centers for Disease Control and Prevention (CDC) Advisory Committee on Immunization Practices (ACIP). TFAH is a nonpartisan, nonprofit public health policy, research, and advocacy organization dedicated to promoting optimal health for every person and community and making the prevention of illness and injury a national priority. For more than 20 years, our annual report, *Ready or Not: Protecting the Public's Health from Diseases, Disasters, and Bioterrorism*, has emphasized the role of routine vaccination in promoting the country's national, health, and economic security.¹ We urge the ACIP to ground its recommendations exclusively in evidence-based scientific research in order to protect children and adults' ability to live long and healthy lives.

Evidence-based immunization recommendations are critical for public trust. ACIP has adopted two frameworks to guide the assessment of evidence and develop empirical recommendations: Evidence to Recommendation (EtR) and Grading of Recommendations, Assessment, Development, and Evaluation (GRADE).² Together, these frameworks strengthen decision-making and support a transparent process, assuring the public that ACIP members have reviewed the quality of data available, benefits and harms of an intervention, values and preferences of those affected, and economic analyses. By following these frameworks, ACIP recommendations are consistent, grounded in science, and clearly justified. Following EtR and GRADE establishes clear documentation of how decisions are made and what evidence supports them. This documentation can help counter false claims, reinforce confidence in vaccine safety and effectiveness, and provide healthcare providers, communities, and the public with a trustworthy foundation for immunization decisions.

¹ McKillop, Matt, Farberman, Rhea K., Lieberman, Dara A. "Ready or Not: Protecting the Public's Health from Diseases, Disasters, and Bioterrorism." *Trust for America's Health*. <https://www.tfah.org/wp-content/uploads/2025/03/2025-ReadyOrNot-FINALr.pdf>. Accessed February 27, 2026.

² "Evidence-Based Recommendations for ACIP." *Centers for Disease Control and Prevention*. www.cdc.gov/acip/evidence-based-recommendations/index.html. Accessed March 2, 2026.

A transparent, science-based approach to vaccine recommendations is especially critical as the U.S. faces declining vaccination rates and a rise in outbreaks of vaccine preventable diseases.³ Outbreaks, such as the ongoing measles cases in South Carolina, overwhelm public health and healthcare systems, cause needless suffering, and keep children out of school. Safe and effective measles, mumps, and rubella (MMR) vaccines have enabled the United States to maintain measles elimination status since 2000, but this status is now threatened due to declining vaccination rates. As vaccination rates fall, the risk of sustained measles transmission increases. A recent study found that a sustained 1% annual decline in MMR coverage could lead to more than 17,000 measles cases a year and cost \$1.5 billion annually.⁴

Vaccines are safe, effective, and essential for public health, preventing millions of hospitalizations and deaths in the U.S. each year.⁵ They undergo rigorous pre-market testing and must meet strict standards before being approved for public use. Importantly, safety evaluation is ongoing after approval and during use to ensure safety.⁶ Federal vaccine monitoring systems identify potential safety signals quickly, allowing public health officials and researchers to act swiftly in response to rare adverse effects and take appropriate action.⁷ Extensive research has concluded that vaccines and their components are safe and do not increase the risk of chronic disease, autism, or death.⁸ On the contrary, vaccinations stop infectious diseases from spreading in communities and significantly reduce school absences, thus supporting children's healthy development and wellbeing.

Accessible vaccines promote optimal health throughout the lifespan and for every community. TFAH urges the ACIP to uphold evidence-based research and transparent processes when considering changes to the current immunization schedules.

Sincerely,



J. Nadine Gracia, MD, MSCE
President and CEO
Trust for America's Health

³ Felton, Kathleen. "As Measles Cases Climb, These 9 Diseases Threaten Comebacks." *The Washington Post*, February 24, 2026. <https://www.washingtonpost.com/wellness/2026/02/24/measles-vaccine-preventable-diseases/>

⁴ "More Illness, Greater Cost Spotlight Brief: Childhood Immunizations." *Common Health Coalition*. https://commonhealthcoalition.org/wp-content/uploads/2026/02/SpotlightBrief_ChildImms.pdf. Accessed March 3, 2026.

⁵ Zhou, Fangjun, Jatlaoui, Tara, Leidner, Andrew J., et al. "Health and Economic Benefits of Routine Childhood Immunizations in the Era of the Vaccines for Children Program — United States, 1994–2023." *Morbidity and Mortality Weekly Report*. <http://dx.doi.org/10.15585/mmwr.mm7331a2>. Accessed March 2, 2026.

⁶ "The Science of Vaccine Safety in the U.S." *Johns Hopkins Bloomberg School of Public Health*. <https://publichealth.jhu.edu/2025/how-the-us-ensures-vaccine-safety>. Accessed February 27, 2026.

⁷ Gidengil, Courtney, Goetz, Matthew Bidwell, Maglione, Margaret, et al. "Safety of vaccines used for routine immunization in the United States: An updated systematic review and meta-analysis." *Vaccine*. <https://doi.org/10.1016/j.vaccine.2021.03.079>. Accessed March 2, 2026.

⁸ "Vaccine safety references." *Children's Hospital of Philadelphia Vaccine Education Center*. <https://www.chop.edu/vaccine-education-center/vaccine-safety/vaccine-safety-references>. Accessed March 3, 2026.