

**Congress of the United States**  
**Washington, DC 20515**

July 17, 2025

Mr. Mike Tuffin  
President and Chief Executive Officer  
America's Health Insurance Plans  
601 Pennsylvania Avenue NW  
South Building, Suite 500  
Washington, DC 20004

Dear Mr. Tuffin:

We write with serious concerns regarding access to vaccines for Americans with private health insurance following Department of Health and Human Services (HHS) Secretary Robert F. Kennedy, Jr.'s actions undermining the Advisory Committee on Immunization Practices (ACIP). ACIP issues independent, science-based vaccine recommendations that impact whether health plans will cover vaccinations that keep families safe from preventable illness. Virtually all forms of health insurance and the Vaccines for Children (VFC) program are required to cover ACIP-recommended vaccines without cost-sharing.<sup>1</sup> Secretary Kennedy and the Trump Administration's reckless and conspiratorial disregard for safe and effective vaccinations threatens to prevent Americans from getting vaccines that provide protection against illnesses at no cost to them. Therefore, we request information regarding whether your members will continue to cover all routine immunizations without cost-sharing and have a plan in place to continue coverage of evidence-based vaccines if the newly constituted ACIP continues down the path of making unscientific or non-evidence-based decisions. It is critical that you maintain uninterrupted vaccine coverage from your members, and we want to ensure that your members have a process in place to do just that.

Recently, Secretary Kennedy and HHS have begun to circumvent ACIP's science-based vaccine recommendations, citing false information. In May 2025, Secretary Kennedy unilaterally removed COVID-19 vaccines from the Centers for Disease Control and Prevention's (CDC) recommended immunization schedule for children and pregnant women despite ACIP's existing recommendation and overwhelming evidence demonstrating that the vaccine is safe for these groups, a decision over which the American Academy of Pediatrics and other medical societies are now suing the Secretary.<sup>2</sup> Furthermore, in June, Secretary Kennedy took

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<sup>1</sup> CDC Morbidity and Mortality Weekly Report (MMWR), *Health and Economic Benefits of Routine Childhood Immunizations in the Era of the Vaccines for Children Program – United States, 1994-2023* (Aug. 8, 2024). The Vaccines for Children (VFC) program, which provides free vaccines to low-income children and their providers, automatically covers ACIP-recommended vaccines. Between 1994 and 2023, the VFC is estimated to have prevented approximately 508 million cases of illness, 32 million hospitalizations, and 1.1 million deaths, leading to direct taxpayer savings of \$540 billion, according to CDC data.

<sup>2</sup> *RFK Jr. ends Covid vaccine recommendations for healthy children, pregnant people*, STAT News (May 27, 2025); Silvia Fernandez-Garcia et al., *Effectiveness and safety of COVID-19 vaccines on maternal and perinatal outcomes: A systematic review and meta-analysis*, BMJ Global Health (Apr. 4, 2024); CDC Morbidity and Mortality

unprecedented and unliteral action to remove all 17 members of ACIP, replaced them with vaccine skeptics, people unqualified in public health, vaccines and vaccine-related illnesses, and people with significant financial interests in vaccine-related litigation against vaccine manufacturers.<sup>3</sup> Secretary Kennedy also failed to make public information on the vetting process or to disclose conflicts of interest.<sup>4</sup> His actions put the health and well-being of the American people—including pregnant women, children, people with disabilities, and vulnerable seniors—at extreme risk and threaten Americans' access to all vaccines. We are very concerned that his actions will result in disruptions in coverage, force consumers to pay out-of-pocket, and result in patients foregoing immunizations altogether.

ACIP recommendations have historically played an important role in the consumer protections included in the Affordable Care Act (ACA), which significantly improved access to preventive care, such as immunizations. Lowering cost-sharing for vaccines improves access to immunizations, preventing disease, saving lives, and significantly lowering health care spending for patients and taxpayers alike. For example:

- Under the ACA's historic consumer protections, most health plans and issuers cannot charge consumers copayments, coinsurance, or deductibles for four categories of preventive services, including immunizations that have a recommendation from ACIP. This includes coverage at zero cost-sharing for immunizations such as influenza, meningitis, tetanus, HPV, hepatitis A and B, measles, mumps, rubella, varicella, and COVID-19.<sup>5</sup> As a result of these protections, more than 150 million Americans with private coverage receive access to life-saving preventive services without out-of-pocket costs, including 37 million children.<sup>6</sup>
- The Inflation Reduction Act (IRA) requires Medicaid, the Children's Health Insurance Program (CHIP), and Medicare Part D to cover vaccines recommended by ACIP at no cost. In Medicare Part D, these changes are estimated to reduce annual out-of-pocket costs by \$234 million, or \$70 per enrollee who receives a vaccine.<sup>7</sup>

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Weekly Report (MMWR), *Safety monitoring of mRNA COVID-19 vaccine third doses among children ages 6 months-5 years* (June 9, 2023); *Medical Societies Sue Kennedy and H.H.S. Over Vaccine Advice*, The New York Times (June 7, 2025).

<sup>3</sup> *RFK Jr. Picks New Members of Influential Vaccine Committee After Purge*, The Washington Post (June 11, 2025); *New ACIP Members May Revisit Panel's Prior Recommendations In Just Two Weeks*, Inside Health Policy (June 13, 2025); *Member of RFK Jr.'s New Vaccine Panel Withdraws Over Conflict of Interest*, The Guardian (June 25, 2025).

<sup>4</sup> *HHS Backtracks on Pledge to Disclose New Vaccine Advisers' Conflicts of Interest*, STAT News (July 9, 2025).

<sup>5</sup> Kaiser Family Foundation, *Immunizations for Adults Covered by the ACA* (May 27, 2025) (<https://www.kff.org/immunizations-covered-by-the-aca/>).

<sup>6</sup> *Id.*

<sup>7</sup> Department of Health and Human Service, *Medicare Part D Savings from Elimination of Vaccine Cost-Sharing* (March 15, 2023) (<https://aspe.hhs.gov/reports/ira-elimination-vaccine-cost-sharing>).

Numerous studies have shown that reduced costs of high-value preventive services results in higher utilization of these services, and studies have shown that access to zero-cost preventive services has improved vaccination rates.<sup>8</sup> In one study, coverage of vaccines without cost-sharing was associated with a 4.3 percent increase in HPV vaccine completion, and in another study, there was a 5.8 percent increase in completion of the HPV vaccine series for individuals enrolled in plans with zero cost-sharing.<sup>9</sup> Similarly, elimination of cost-sharing resulted in an increased uptake of influenza vaccination among individuals with private health coverage.<sup>10</sup> Millions of Americans have benefitted from increased access to zero-cost immunizations, and families cannot afford to lose access to this critical consumer protection.

Secretary Kennedy's actions threaten the stability of our nation's immunization infrastructure, and threaten Americans' access to all vaccines. Secretary Kennedy has already recklessly sidestepped ACIP by removing COVID-19 vaccine recommendations for pregnant women and children and has made clear that he intends to examine all current ACIP recommended vaccines in the future, including all routine pediatric vaccines. Evidence shows that even modest cost-sharing deters patients from accessing care and exposure to cost-sharing reduces the use of preventive care.<sup>11</sup> Disruptions in coverage could roll back the significant health care gains that have been made under the ACA and put lifesaving vaccinations out-of-reach for millions of Americans.

It is critical that consumers continue to have access to immunizations without any cost-sharing. Therefore, we request your written response to the following no later than July 23, 2025:

1. In a June 24, 2025, statement, AHIP wrote that it is "committed to ongoing coverage of vaccines to ensure access and affordability for this respiratory virus season." Please notify us whether your members will continue to cover all vaccines recommended by ACIP as of October 2024 without cost-sharing.
2. Please notify us whether your members will continue to cover vaccines that ACIP subjects to shared clinical decision-making in the same manner as routine vaccinations. Please describe any differences in coverage and/or cost-sharing that beneficiaries may

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<sup>8</sup> Urban Institute, *Free Preventive Services Improve Access to Care* (July 2022); Xuesong Han et al., *Has Recommended Preventive Service Use Increased After Elimination of Cost-Sharing as Part of the Affordable Care Act in the United States?*, *Preventive Medicine* (Sept. 2015).

<sup>9</sup> Brandy Lipton and Sandra Decker, *ACA Provisions Associated with Increase in Percentage of Young Adult Women Initiating and Completing The HPV Vaccine*, *Health Affairs* (May 2015); Summer Sherburne Hawkins, et al., *Associations Between Insurance-Related Affordable Care Act Policy Changes with HPV Vaccine Completion*, *BMC Public Health* (Feb. 6, 2021).

<sup>10</sup> Xuesong Han et al., *Has Recommended Preventive Service Use Increased After Elimination of Cost-Sharing as Part of the Affordable Care Act in the United States?*, *Preventive Medicine*, (July 23, 2015); Young-Rock Hong et al., *Up-to-Date on Preventive Services Under Affordable Care Act*, *Medical Care Blog* (Aug. 2017).

experience if a vaccine is subject to shared clinical decision-making versus a routine recommendation from ACIP.

3. Please notify us whether your members will continue to cover COVID-19 vaccinations for children and pregnant women without cost-sharing.
4. What process will you follow to evaluate future decisions by ACIP to rescind recommendations for currently recommended vaccines, such as routine childhood vaccinations? What process will you follow to make coverage decisions if ACIP's decisions are out of step with the broad consensus of the scientific and medical community?
5. How will your company work with professional societies to ensure that vaccine coverage and cost-sharing is informed by scientific evidence, particularly in cases where ACIP weakens or rescinds current vaccine recommendations?

Disruptions in coverage could roll back the significant health care gains that have been made under the VFC, ACA, and IRA, and put lifesaving vaccinations out-of-reach for millions of Americans. We appreciate your commitment to ensuring that all Americans have access to high-quality, affordable health care.

Sincerely,



Frank Pallone, Jr.  
Ranking Member  
House Committee on Energy and  
Commerce



Ron Wyden  
Ranking Member  
Senate Committee on Finance



Robert C. "Bobby" Scott  
Ranking Member  
House Committee on Education and  
Workforce



Richard Neal  
Ranking Member  
House Committee on Ways and  
Means