

July 31, 2025

The Honorable Robert F. Kennedy, Jr.  
Secretary  
U.S. Department of Health and Human Services  
200 Independence Avenue SW  
Washington, DC 20201

Dear Secretary Kennedy,

On behalf of the American College of Rheumatology (ACR) and the undersigned organizations, we write to express our concerns about your recent decision to terminate the membership of the Advisory Committee on Immunization Practices (ACIP) at the Centers for Disease Control and Prevention (CDC). ACIP has served as a critical body in public health for over five decades, providing expert, evidence-based recommendations on immunization practices. We are deeply concerned that removing members of this independent panel undermines both the transparency and scientific integrity of the immunization process.

As specialists in rheumatology, we care for patients with autoimmune diseases and other chronic inflammatory conditions, many of whom are immunocompromised due to their disease or the immunosuppressive treatments they require. For these patients, vaccines play a pivotal role in preventing potentially life-threatening infections. Reliable, expert-driven immunization guidance is vital for maintaining both individual and public health, and we rely heavily on ACIP's work to guide the vaccination decisions we make for these vulnerable populations.

We believe that the decision to terminate ACIP members—who were selected for their extensive expertise in immunology, infectious disease, and clinical practice—compromises the scientific rigor and independence that has defined the committee for decades. The panel's recommendations, grounded in peer-reviewed evidence, are essential for ensuring safe, effective vaccination policies. The loss of these trusted experts raises serious concerns about the future of immunization guidelines and, by extension, the health of our patients.

As you know, we are already witnessing the resurgence of vaccine-preventable diseases, such as measles, which has led to outbreaks in multiple states. Such outbreaks have significant public health and clinical consequences, particularly for our patients, who may be at higher risk for severe complications from infections due to their underlying health conditions. Disrupting the expert-driven process that ACIP provides will undoubtedly contribute to confusion and mistrust, further exacerbating vaccine hesitancy and putting vulnerable patients at greater risk.

In addition to the clinical and public health concerns, we are also worried about the practical consequences for patients' access to vaccines. Health insurance plans commonly base their coverage on CDC recommendations, which include ACIP's vaccine schedules. Any changes to the ACIP process or its

recommendations could lead to gaps in vaccine coverage, especially for vaccines not included in the updated immunization schedules. For many patients, particularly those with chronic diseases such as rheumatoid arthritis or lupus, this could mean reduced access to essential immunizations, ultimately increasing the burden of preventable disease.

We urge you to immediately reinstate the previously terminated members of ACIP, allowing them to fulfill their commitments and continue the vital work they have been entrusted with. Their expertise and unbiased review of scientific evidence are critical to ensuring that vaccine recommendations remain accurate, timely, and based on the best available data. Furthermore, we strongly encourage you to follow the established, transparent procedures for selecting new ACIP members, ensuring that appointments are based on the expertise required to support the immunization needs of all Americans.

The ACR and the undersigned organizations stand ready to collaborate with you and your office in maintaining a public health system and putting forward public policy that will actually Make America Healthy Again. We look forward to working together to ensure that ACIP remains a strong, independent voice in guiding immunization practices for the benefit of all.

Sincerely,

The American College of Rheumatology and the Undersigned Organizations

Arizona United Rheumatology Alliance	Nebraska Rheumatology Society
California Rheumatology Alliance	New York State Rheumatology Society
Chicago Rheumatism Society	North Carolina Rheumatology Association
Connecticut Rheumatology Association	Ohio Association of Rheumatology
Georgia Society of Rheumatology	Rheumatism Society of the District of Columbia
Kentuckiana Rheumatology Alliance	Rheumatology Association of Iowa
Lupus and Allied Diseases Association	Rheumatology Society of New Mexico
Maryland Society for the Rheumatic Diseases	State of Texas Association of Rheumatologists
Midwest Rheumatology Association	Tennessee Rheumatology Society
Mississippi Arthritis and Rheumatism Society	Virginia Society of Rheumatology