

Congress of the United States

House of Representatives

COMMITTEE ON OVERSIGHT AND GOVERNMENT REFORM

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December 22, 2025

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

Dear Secretary Kennedy:

Vaccines save millions of lives every year. Despite decades of scientific evidence supporting this fact, the Trump Administration's Department of Health and Human Services (HHS) is undermining Americans' access to health care, politicizing public health and science, and promoting anti-vaccine misinformation. Most recently, the Centers for Disease Control and Prevention's (CDC) Advisory Committee on Immunization Practices (ACIP) voted to change the childhood vaccine schedule without any scientific basis, removing the recommendation that all infants receive a vaccine against hepatitis B at birth. Vaccinating all infants against hepatitis B at birth has been credited with saving the lives of more than 90,000 children. I write to investigate this outrageous and harmful decision, which will cost innocent lives. I request that you provide our committee with any data that was used to inform this disastrous vote, including the expected impacts of this decision on our country's children, as well as information on how anti-vaccine activists influenced the December ACIP meeting and continue to compromise our public health system.

Hepatitis B is a viral infection that can cause both acute and chronic disease, with chronic disease potentially leading to liver damage, liver failure, liver cancer, and even death. Newborns or children in the first year of life who are infected with hepatitis B have a 90% chance of developing chronic hepatitis B, and 25% of those who develop the chronic condition will die from it.¹ Beginning in 1991, ACIP stopped recommending newborn vaccination only to infants identified as high-risk, and instead recommended that all children should begin vaccination against hepatitis B at birth. This vaccine schedule in which all children receive the hepatitis B vaccine at birth is responsible for the near elimination of chronic hepatitis B infections in children, with the rate of acute hepatitis B infections among children and young adults falling 99% from 1990 to 2019.² The universal vaccine dose is estimated to have prevented over half a

¹ American Academy of Pediatrics, *Fact Checked: Hepatitis B Vaccine Given to Newborns Reduces Risk of Chronic Infection* (online at www.aap.org/en/news-room/fact-checked/fact-checked-hepatitis-b-vaccine-given-to-newborns-reduces-risk-of-chronic-infection) (accessed on Dec. 7, 2025).

² Public Health Reports, *Progress and Unfinished Business: Hepatitis B in the United States, 1980-2019* (June 9, 2023) (online at <https://journals.sagepub.com/doi/10.1177/00333549231175548>).

million childhood infections.³

ACIP has long served as a trusted, science-driven body guiding vaccine recommendations to protect the health of all Americans, but no more. Since Secretary Kennedy fired every member of ACIP in June and replaced them with lackeys who largely parrot his anti-vaccine views, ACIP has been a politicized entity largely made up of vaccine skeptics and misinformation peddlers.⁴ Despite the clear evidence that vaccinating all children against hepatitis B at birth is far more effective at preventing infection than a risk-based approach, ACIP voted to end this practice on December 5, 2025, after a contentious and chaotic two-day meeting.⁵

As a result of ACIP's decision, immunization at birth will only be recommended for newborns whose mother tested positive for the virus or whose hepatitis B status is unknown. Mothers who test negative for the virus are recommended to consult with their health care provider to decide whether their child should be vaccinated against hepatitis B, but according to ACIP, these children should not receive this vaccine before 2 months of age.⁶ ACIP also voted to recommend that parents request an antibody blood test after a child receives the first dose of the vaccine in order to decide whether to proceed with the second and third dose.⁷ This recommendation has no scientific basis, and is likely to have catastrophic consequences. There is no scientific consensus on what hepatitis B antibody levels correspond to long-term protection, and the hepatitis B vaccine has only been tested as a three-shot regimen—stopping at one or two shots would assume efficacy that has not been studied or supported by data.⁸

³ American Public Health Association, *Press Release: APHA Joins GW and Dozens of Public Health and Policy Experts Urging the CDC to Maintain Universal Newborn Hepatitis B Vaccination* (Dec. 2, 2025) (online at www.apha.org/news-and-media/news-releases/apha-news-releases/public-health-and-policy-experts-urge-the-cdc-to-maintain-universal-newborn-hepatitis-b-vaccination).

⁴ *RFK Announces New ACIP Members, Including Vaccine Critics*, CIDRAP (June 12, 2025) (online at www.cidrap.umn.edu/anti-science/rfk-announces-new-acip-members-including-vaccine-critics).

⁵ *CDC Advisers Drop Decades-old Universal Hepatitis B Birth Dose Recommendation, Suggest Blood Testing After 1 Dose*, CIDRAP (Dec. 5, 2025) (online at www.cidrap.umn.edu/anti-science/cdc-advisers-drop-decades-old-universal-hepatitis-b-birth-dose-recommendation-suggest); *During Chaotic Meeting, CDC Advisors Handpicked by RFK Jr. Postpone Vote on Changing Hepatitis B Vaccine Recommendations*, CIDRAP (Dec. 4, 2025) (online at www.cidrap.umn.edu/childhood-vaccines/during-chaotic-meeting-cdc-advisers-handpicked-rfk-jr-postpone-vote-changing); *Panel Votes to Stop Recommending Hepatitis B Shots at Birth for Most Newborns*, New York Times (Dec. 5, 2025) (online at www.nytimes.com/2025/12/05/health/kennedy-vaccine-committee-vote-hepatitisb.html).

⁶ *Panel Votes to Stop Recommending Hepatitis B Shots at Birth for Most Newborns*, New York Times (Dec. 5, 2025) (online at www.nytimes.com/2025/12/05/health/kennedy-vaccine-committee-vote-hepatitisb.html).

⁷ *ACIP Key Takeaways: What Really Happened and What It Means for You*, Your Local Epidemiologist (Dec. 5, 2025) (online at <https://yourlocalepidemiologist.substack.com/p/acip-key-takeaways-what-really-happened>).

⁸ *ACIP Key Takeaways: What Really Happened and What It Means for You*, Your Local Epidemiologist (Dec. 5, 2025) (online at <https://yourlocalepidemiologist.substack.com/p/acip-key-takeaways-what-really-happened>); *CDC Advisers Vote to Overturn Decades-Long Policy on Hepatitis B Vaccine for Infants*, NPR (Dec. 5, 2025) (online at www.npr.org/sections/shots-health-news/2025/12/05/nx-s1-5634004/cdc-hepatitis-b-vaccine-acip-meeting).

ACIP's vote to change the childhood vaccine schedule will almost certainly increase rates of liver damage, liver failure, liver cancer, and even death for newborns and young children.⁹ Although hepatitis B is a sexually transmitted disease, it can also be contracted without any sexual contact. Hepatitis B is highly contagious, can be spread by microscopic amounts of blood, and can live on surfaces for up to seven days. Thus, it can easily be spread by those who are not aware they are infected; approximately two million Americans are infected with hepatitis B, and as many as 70% of these individuals do not know they are infected.¹⁰ In addition, although all pregnant women are supposed to be screened for hepatitis B at their first prenatal appointment, more than 18% of pregnant women are not tested and only 35% of women who test positive receive all the recommended follow-up care.¹¹ Even if a mother tests negative for the virus in her first trimester, she could unknowingly contract the disease later in pregnancy. Ending universal vaccination for newborns puts all babies at risk, no matter the mother's hepatitis B status.

Even among the vaccine skeptics who make up the majority of ACIP members under Secretary Kennedy, the decision to no longer universally recommend the hepatitis B vaccine at birth was so extreme as to be controversial and appears to have been added to the ACIP agenda at the request of anti-vaccine activists. When asked at the December meeting about the decision to revisit the recommendation for universal hepatitis B vaccinations, ACIP member Dr. Vicky Pebsworth—who is also employed by one of the country's oldest anti-vaccine organizations—explained: “We were aware that there was pressure coming from stakeholder groups wanting the policy to be revisited.”¹² The vote, originally scheduled for ACIP's September meeting, was deferred because of concerns that there was insufficient data for committee members to make a decision, and then postponed again from Thursday, December 4 to Friday, December 5, when even some of the members of the newly politicized ACIP questioned whether a change was warranted at all.¹³ One ACIP member, pediatrician Dr. Cody Meissner, pushed back on the change during Friday's meeting, saying, “We know it's safe, and we know it's very effective.” He also said that if the proposal passed, “we will see more children and adolescents and adults

⁹ American Academy of Pediatrics, *Fact Checked: Hepatitis B Vaccine Given to Newborns Reduces Risk of Chronic Infection* (accessed Dec. 7, 2025) (online at www.aap.org/en/news-room/fact-checked/fact-checked-hepatitis-b-vaccine-given-to-newborns-reduces-risk-of-chronic-infection).

¹⁰ Centers for Disease Control and Prevention, *Clinical Overview of Hepatitis B* (Aug. 29, 2025) (online at www.cdc.gov/hepatitis-b/hcp/clinical-overview/index.html); *Panel Votes to Stop Recommending Hepatitis B Shots at Birth for Most Newborns*, New York Times (Dec. 5, 2025) (online at www.nytimes.com/2025/12/05/health/kennedy-vaccine-committee-vote-hepatitisb.html); *During Chaotic Meeting, CDC Advisors Handpicked by RFK JR. Postpone Vote on Changing Hepatitis B Vaccine Recommendations*, CIDRAP (Dec. 4, 2025) (online at www.cidrap.umn.edu/childhood-vaccines/during-chaotic-meeting-cdc-advisers-handpicked-rfk-jr-postpone-vote-changing).

¹¹ Vaccine Integrity Project and CIDRAP, *Universal Hepatitis B Vaccination at Birth: Safety Effectiveness, and Public Impact* (Dec. 2, 2025) (online at www.cidrap.umn.edu/sites/default/files/searchable-download/Universal%20Hepatitis%20B%20Vaccination%20at%20Birth%20Dec2025.pdf).

¹² *During Chaotic Meeting, CDC Advisors Handpicked by RFK JR. Postpone Vote on Changing Hepatitis B Vaccine Recommendations*, CIDRAP (Dec. 4, 2025) (online at www.cidrap.umn.edu/childhood-vaccines/during-chaotic-meeting-cdc-advisers-handpicked-rfk-jr-postpone-vote-changing).

¹³ *Panel Votes to Stop Recommending Hepatitis B Shots at Birth for Most Newborns*, New York Times (Dec. 5, 2025) (online at www.nytimes.com/2025/12/05/health/kennedy-vaccine-committee-vote-hepatitisb.html).

infected with hepatitis B.”¹⁴ Another ACIP member, Dr. Joseph Hibbeln, has spoken out against the changes and the lack of data supporting them, stating, “I repeatedly asked for it, and no data was presented.”¹⁵

Other anti-vaccine and extremist talking points promoted at the December ACIP meeting include the claim that well-studied vaccines have not been sufficiently tested and that immigrants might be to blame for the spread of vaccine-preventable illnesses.¹⁶ Although presentations at ACIP meetings have historically been led by scientific experts at the CDC, the December 4–5 meeting featured a presentation by a prominent anti-vaccine activist, Aaron Siri, who worked with Secretary Kennedy on anti-vaccine lawsuits for years before Kennedy became secretary and who recently filed a petition to withdraw or suspend the use of the polio vaccine.¹⁷ Mr. Siri’s lengthy presentation covered concerns regarding adverse events from routine vaccines and a supposed link between vaccines and autism.¹⁸ Senator Bill Cassidy, chair of the Senate Health, Education, Labor, and Pensions Committee, denounced Mr. Siri’s participation in the ACIP meeting, writing on X, “Aaron Siri is a trial attorney who makes his living suing vaccine manufacturers. He is presenting as if an expert on childhood vaccines. The ACIP is totally discredited. They are not protecting children.”¹⁹

ACIP’s choice to change the vaccine schedule without any scientific evidence is part of a concerted anti-vaccine push at HHS that is particularly alarming for children’s health. Earlier this month, Dr. Vinay Prasad, the director of the Food and Drug Administration’s (FDA) Center for Biologics Evaluation and Research, sent a memo to FDA staff claiming, without evidence, that at least 10 children had died as a result of the COVID vaccination and that there would be changes to vaccine regulation, including requiring new clinical trials and implementing a greater focus on potential harms from receiving multiple vaccinations at the same time. If implemented, these changes would add entirely unnecessary, burdensome requirements on top of already rigorous

¹⁴ *Id.*

¹⁵ *CDC Adviser: Newborn Vaccine Rollback “Wasn’t Based on Data,”* The Hill (Dec. 8, 2025) (online at <https://thehill.com/policy/healthcare/5639251-cdc-adviser-acip-drops-hepatitis-b-recommendation/>); *CDC Advisers Drop Decades-old Universal Hepatitis B Birth Dose Recommendation, Suggest Blood Testing After 1 Dose*, CIDRAP (Dec. 5, 2025) (online at www.cidrap.umn.edu/anti-science/cdc-advisers-drop-decades-old-universal-hepatitis-b-birth-dose-recommendation-suggest).

¹⁶ *Under RFK Jr., the CDC Provides a Megaphone to the Antivaccine Movement*, Washington Post (Dec. 6, 2025) (online at www.washingtonpost.com/health/2025/12/06/cdc-acip-anti-vaccine-rhetoric/).

¹⁷ *Kennedy’s New Advisors Rescind Recommendations for Some Vaccines*, New York Times (June 26, 2025) (online at www.nytimes.com/2025/06/26/health/rfk-jr-vaccines-acip-cdc.html); *Kennedy’s Ties to Ally Leading Vaccine Lawsuits Raise Ethical Concerns*, New York Times (Oct. 3, 2025) (online at www.nytimes.com/2025/10/03/health/kennedy-aaron-siri-vaccines-lawsuits.html); *Panel Votes to Stop Recommending Hepatitis B Shots at Birth for Most Newborns*, New York Times (Dec. 5, 2025) (online at www.nytimes.com/2025/12/05/health/kennedy-vaccine-committee-vote-hepatitisb.html).

¹⁸ *Lawyer With Ties to Kennedy Sparks Outcry Over Vaccine Misinformation at CDC Advisory Meeting*, NBC News (Dec. 5, 2025) (online at www.nbcnews.com/health/kids-health/lawyer-rfk-jr-vaccine-misinformation-cdc-panel-rcna247607).

¹⁹ *Relatively Calm Afternoon ACIP Session Still Cauldron of “Misinformation, Disinformation, and Information Taken Out of Context,”* CIDRAP (Dec. 5, 2025) (online at www.cidrap.umn.edu/childhood-vaccines/relatively-calm-afternoon-acip-session-still-cauldron-misinformation).

and effective safety testing, resulting in fewer vaccines making it to market and reaching children.²⁰ The only source that Dr. Prasad provided for the claims in his memo were reports from the Vaccine Adverse Event Reporting System (VAERS), a database of unverified, voluntary submissions from individuals who reportedly experienced *any* negative health event even years after receiving a vaccine. Dr. Prasad did not supply additional information as to how he came to believe that the deaths reported to VAERS had been substantiated and demonstrated to have been caused by the COVID vaccination.²¹

Removing the universal recommendation for the hepatitis B vaccine fuels vaccine skepticism by implying that receiving the vaccine may be dangerous for infants, when the truth is that the universal dose of the hepatitis B vaccine has saved tens of thousands of children's lives. In light of these deeply concerning changes and Secretary Kennedy's history of anti-vaccine activism, Committee Democrats have been conducting oversight of HHS and its operating divisions. To date, we have yet to receive a substantive response to any of the Committee's letters. I reiterate my request for timely and fulsome responses to our March 29, 2025; June 10, 2025; and July 10, 2025, letters.²² To assist in the Committee's investigation, I request that you produce all responsive information to the letters listed above and provide the following documents and information by January 5, 2026:

1. All communications and documents related to the December 4–5, 2025, ACIP meeting, including but not limited to decision memos and attachments, research used for decision-making (including any evidence that ACIP members considered the potential for increased suffering and death of Americans, including children, as a result of their positions), presentations and draft presentations, and discussion of the ACIP meeting agenda;
2. All communications between HHS or CDC employees and any individual who presented at the December 4–5, 2025, ACIP meeting;
3. All communications between HHS or CDC employees and the Children's Defense Fund, Aaron Siri, and any other individual or organization with whom HHS has consulted on vaccines;

²⁰ *'Never Seen Anything Like This': Alarm at Memo from Top US Vaccine Official*, The Guardian (Dec. 4, 2025) (online at www.theguardian.com/us-news/2025/dec/04/us-vaccines-vinay-prasad-memo).

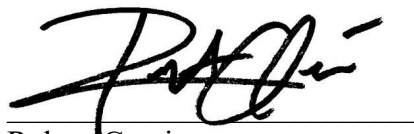
²¹ *Id.*; Johns Hopkins Bloomberg School of Public Health, *What VAERS Is (And Isn't)* (May 3, 2022) (online at <https://publichealth.jhu.edu/2022/what-vaers-is-and-isnt/>).

²² Letter from Ranking Member Gerald E. Connolly, Committee on Oversight and Government Reform, to Secretary Robert F. Kennedy, Jr., Department of Health and Human Services (Mar. 29, 2025) (online at <https://oversightdemocrats.house.gov/sites/evo-subsites/democrats-oversight.house.gov/files/evo-media-document/gec-to-hhs-re-vaccines.pdf>); Letters from Acting Ranking Member Stephen F. Lynch, Committee on Oversight and Government Reform, and Ranking Member Raja Krishnamoorthi, Subcommittee on Health Care and Financial Services, to Secretary Robert F. Kennedy, Jr., Department of Health and Human Services (June 10, 2025) (online at <https://oversightdemocrats.house.gov/sites/evo-subsites/democrats-oversight.house.gov/files/evo-media-document/2025-06-10-combined-letters-to-rfk-jr.pdf>); Letter from Ranking Member Robert Garcia, Committee on Oversight and Government Reform, to Chief of Staff Matthew Buzzelli, Centers for Disease Control and Prevention (July 10, 2025) (online at <https://oversightdemocrats.house.gov/sites/evo-subsites/democrats-oversight.house.gov/files/evo-media-document/2025-07-10.rg-rk-to-cdc-re-acip-and-vaccines.pdf>).

4. All communications and documents regarding any analysis or research done regarding the effects of changing the childhood vaccine schedule on health outcomes for children and adults, including risk of death;
5. All scientific data on which ACIP relied in determining that the universal hepatitis B vaccine was inappropriate or dangerous, as well as the determination that vaccination two or more months after birth would improve medical outcomes;
6. All communications, documents, drafts, and data related to the memo shared with FDA staff by Dr. Vinay Prasad on November 28, 2025;
7. All communications between any individual at HHS or CDC and any of the individuals serving on ACIP as of December 5, 2025, that occurred since January 20, 2025, including but not limited to emails, text messages, and instant messages on official and personal devices;
8. All communications and documents since January 20, 2025, related to the selection of ACIP members, including but not limited to the materials used to determine their eligibility and expertise, materials used to assess conflicts of interest, and materials and information related to potential ACIP members considered but not chosen; and
9. All conflicts of interest and financial documentation for all ACIP members appointed since July 10, 2025, and all external parties who presented or contributed to the ACIP meeting.

The Committee on Oversight and Government Reform is the principal oversight committee of the House of Representatives and has broad authority to investigate “any matter” at “any time” under House Rule X. If you have any questions about this request, please contact Committee Democratic staff at (202) 225-5051. Thank you for your prompt attention to this request.

Sincerely,

A handwritten signature in black ink, appearing to read 'R. Garcia', written over a horizontal line.

Robert Garcia
Ranking Member

cc: The Honorable James Comer, Chairman

The Honorable Jim O'Neill, Acting Director
Centers for Disease Control and Prevention