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UH Vaccine Law Expert Abramson Available to Comment on Executive Order Directing CDC to Overhaul Childhood Vaccine Schedule

Houston, June 3, 2026 – A new Executive Order calls for federal health agencies to “realign” United States childhood vaccine recommendations with practices in selected foreign countries. It is drawing scrutiny from legal scholars, physicians, and public health experts.

The May 29, 2026, Executive Order endorses a Department of Health and Human Services “scientific assessment” and directs the Centers for Disease Control and Prevention (“CDC”) and its Advisory Committee on Immunization Practices (“ACIP”) to review and potentially revise the childhood and adolescent immunization schedule. The initiative has been described as an effort to align U.S. vaccine policy with “best practices from peer, developed countries,” and to “restore trust in public health.”

The Order follows a series of changes to federal vaccine policymaking over the past year, including a restructuring of ACIP membership that was invalidated by a federal court after a judge found most members “distinctly unqualified” for their appointments, the narrowing of certain vaccine recommendations, and ongoing litigation concerning earlier actions affecting the vaccine schedule.

[Brian Dean Abramson](#), adjunct professor at the University of Houston Law Center and one of the nation’s leading scholars on vaccine law and policy, is available to provide legal analysis and commentary on the Executive Order and its implications.

Abramson, author of “Vaccine, Vaccination, and Immunization Law,” says:

“This Executive Order is not so much a new policy initiative as a second attempt to accomplish what a federal court has already blocked. In March 2026, a federal judge found that the administration violated federal administrative procedure in implementing earlier vaccine schedule changes drawn from the same HHS assessment this order now designates as an official guiding document for the federal government. By reaffirming that assessment and directing CDC to act on it, the administration is doubling down on the same legal theory a court has already rejected — and doing so while that ruling is still on appeal. That raises serious questions about whether any agency action taken pursuant to this order would survive judicial scrutiny.”

Abramson also notes the following concerns:

Although framed as a comparative scientific exercise, the Executive Order itself raises serious concerns regarding a frank absence of methodology, institutional process, and the future stability of federal vaccine policymaking. Vaccine schedules are developed in response to highly country-specific considerations, including disease prevalence, healthcare infrastructure, demographic realities, financing systems, and historical uptake patterns. Countries are not interchangeable policy models.

The Administration's repeated emphasis on the number of vaccines or doses recommended in different countries is also analytically problematic unless there is a clearly defined and standardized methodology for those comparisons. Depending on what is counted—individual injections, antigenic components, combination products, boosters, catch-up schedules, or risk-based recommendations, the numbers can vary substantially.

Equally significant is the institutional context in which these changes are occurring. Historically, ACIP recommendations have derived legitimacy from the perception that they are generated through a relatively stable, expert-driven, evidence-based process insulated from overt political influence. The restructuring of advisory processes, changes in committee membership, lack of transparency, and ongoing disputes regarding procedural regularity have raised broader questions regarding the long-term credibility and stability of the federal vaccine recommendation system.

The Executive Order also reflects an important philosophical shift in federal vaccine policy. Traditionally, routine immunization schedules have functioned as evidence-based clinical guidance intended to support physicians, parents, insurers, and public health systems. Reframing those recommendations primarily through the lens of 'flexibility' and 'choice' risks obscuring the actual role they play within healthcare delivery and disease prevention. All of these changes are arising against the backdrop of record increases in illnesses, injuries, and deaths experienced by persons who have not been vaccinated for vaccine-preventable diseases.

At the same time, the Executive Order attempts to preserve vaccine financing and access through Medicaid, CHIP, private insurance, and the Vaccines for Children Program, even while questioning the structure of the recommendation framework upon which those systems depend. Whether those goals can ultimately be reconciled remains uncertain.

Abramson can also address:

- The legal authority and practical limitations of the Executive Order.
- The administrative law requirements governing changes to CDC vaccine recommendations, including the role of notice-and-comment rulemaking and the Federal Advisory Committee Act
- The role of ACIP recommendations in insurance coverage, Medicaid, CHIP, Vaccines for Children, and school-entry vaccination systems.
- The constitutional and statutory limits on federal authority over childhood vaccination, given that school vaccine mandates are set at the state level
- Ongoing litigation involving earlier federal vaccine recommendation changes and possible future legal challenges.
- The significance of changes to ACIP membership and advisory procedures.
- Comparative international vaccine schedules and the methodological limitations of “peer country” comparisons.
- Whether the Executive Order's coverage and access provisions — directing that all vaccines on the ACIP schedule remain covered by Medicaid, CHIP, and private insurance — create legal protections or tensions if the underlying schedule is restructured
- The distinction between vaccine recommendations and vaccine mandates.
- Potential long-term implications for vaccine access, public trust, vaccine financing, and vaccine injury compensation systems.

You can read more about Abramson here:

<https://www.law.uh.edu/faculty/adjunct/main.asp?PID=8596>

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