

NAIIS Panel ACP Immunization Activities

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May 19, 2026



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Financial Disclosure

Has no relationships with any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients.

Acknowledgments

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ACP Clinical Policies: Rigorous Standards

CLINICAL GUIDELINE



Disclosure of Interests and Management of Conflicts of Interest in Clinical Guidelines and Guidance Statements: Methods From the Clinical Guidelines Committee of the American College of Physicians

Amir Qaseem, MD, PhD, MHA, and Timothy J. Witt, MD, MPH, for the Clinical Guidelines Committee of the American College of Physicians*



CLINICAL GUIDELINE

The Development of Clinical Guidelines and Guidance Statements by the Clinical Guidelines Committee of the American College of Physicians: Update of Methods

Amir Qaseem, MD, PhD, MHA; Devan Kanagaratna, MD, MCR; Jennifer S. Lin, MD, MCR; Reem A. Mustafa, MD, MPH, PhD; and Timothy J. Witt, MD, MPH, for the Clinical Guidelines Committee of the American College of Physicians*

CLINICAL GUIDELINE

Annals of Internal Medicine

The Development of Living, Rapid Practice Points: Summary of Methods From the Scientific Medical Policy Committee of the American College of Physicians

Amir Qaseem, MD, PhD, MHA; Jennifer Yost, RN, PhD; Mary Ann Fordas, MD; Janet A. Jokela, MD, MPH; Matthew C. Miller, MD; Adam Obley, MD; and Linda L. Humphrey, MD, MPH, for the Scientific Medical Policy Committee of the American College of Physicians*

In response to the COVID-19 pandemic, the Scientific Medical Policy Committee (SMPC) of the American College of Physicians (ACP) began developing "practice points" to provide clinical advice based on the best available evidence for the public, patients, clinicians, and public health professionals. As one of the first organizations in the United States to develop evidence-based clinical guidelines, ACP continues to lead and advance the science of evidence-based medicine by implementing new methods to rapidly publish practice points and maintain them as living advice that regularly assesses and incorporates new evidence. The overarching aim of practice points is to an-

public health topics beyond the COVID-19 pandemic. This article presents an overview of the SMPC's living, rapid practice points development process, which includes a rapid systematic review, use of the GRADE (Grading of Recommendations Assessment, Development and Evaluation) method, use of stringent policies on the disclosure of interests and management of conflicts of interest, incorporating a public (nonclinical) perspective, and maintenance of the documents as living through ongoing surveillance and synthesis of new evidence as it emerges.



NATIONAL ACADEMY OF MEDICINE



Guidelines International Network



Influenza Practice Point Development

- ACP explored new evidence and analyzed the comparative effectiveness and harms of influenza vaccines in adults aged ≥ 18 years who are not pregnant or immunocompromised.
- ACP's Practice Points are based on a rapid review of the best available evidence of the benefits and harms of trivalent (three different influenza viruses or viral proteins) and quadrivalent (four different influenza viruses or viral proteins) influenza vaccines in nonpregnant and nonimmunocompromised adults aged ≥ 18 years.
- The ACP Center for Evidence Reviews (ACP CER) team evaluated 42 studies, which had two comparators.
 - The most common comparator was the standard dose trivalent or quadrivalent egg-based influenza vaccine.
 - The other comparator was the high-dose trivalent or quadrivalent egg-based influenza vaccine.
- ACP considered evidence on benefits (influenza-associated pneumonia/lower respiratory tract disease, influenza-related mortality influenza-related hospitalization, and laboratory-confirmed influenza) and harms (fever, idiopathic thrombocytopenic purpura, and serious adverse events) of the influenza vaccines to develop the Practice Points.

7



2025-2026 Influenza Vaccine Practice Points (November 2025)

- Everyone ages 18 to 64 years, not pregnant or immunocompromised, should receive either a standard-dose trivalent or a standard-dose quadrivalent (cell-based, egg-based, MF59-adjuvanted, or recombinant) influenza vaccine.
- Those aged 65 years or older who are not immunocompromised should receive either a high-dose trivalent or a high-dose quadrivalent egg-based influenza vaccine.
- ACP did not examine evidence or make recommendations for pregnant women or immunocompromised adults.



8



COVID-19 Practice Point Development

- Studies in this review included patients at varying risk for severe COVID-19 and varying personal history of COVID-19 infection and vaccination status.
- Data demonstrated that adults aged 65 or older and those aged 18-64 at increased risk for severe COVID-19 are at highest risk for hospitalization and death. It also showed that incidence of myocarditis resulting from the mRNA-based COVID-19 vaccine is low, most commonly affecting males aged 12-24 years.
- Evidence from the rapid review and epidemiological data showed an association between adults aged 18 or over who received an Omicron adapted mRNA-based vaccine and a reduction in the risk for all-cause mortality and COVID-related hospitalizations compared with those who did not receive the vaccine.

9



2025-2026 COVID-19 Vaccine Practice Points (February 2026)

- Adults over age 65 and those aged 18-64 at increased risk for COVID-19 should receive the updated 2025-2026 mRNA-based COVID-19 vaccine.
- Adults 18-64 with comorbidities – such as asthma, cancer, cardiovascular disease, or lung diseases – and current or former smokers are at greater risk for severe COVID-19. ACP encourages these individuals at increased risk, which account for over 90% of COVID-related hospitalizations, to be vaccinated against COVID-19.
- ACP also suggests that those aged 18-64 who are **not at increased** risk for COVID-19 **may consider** receiving the vaccine.
- ACP did not examine evidence or make recommendations for pregnant women or immunocompromised adults.

10



RSV Vaccine Practice Points (March 2026)

The practice points apply to adults aged 60 years or older who are not immunocompromised.

Practice Point 1:

- Adults aged 75 years or older should receive a protein subunit RSV vaccine.

Practice Point 2:

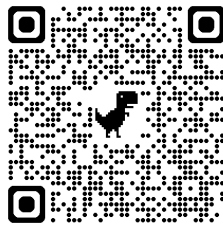
- Adults aged 60 to 74 years who are at increased risk for severe RSV may consider receiving a protein subunit RSV vaccine.

Methods:

- The ACP Population Health and Medical Science Committee developed the rapid practice points based on a rapid review by the ACP Center for Evidence Reviews at Cochrane Austria.



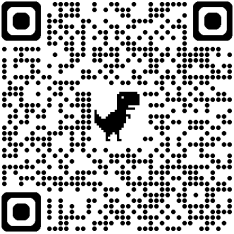
ACP Immunization Hub



The screenshot shows the ACP Immunization Hub website. At the top, there is a navigation bar with links for Membership, CME & WOC, Meetings & Courses, Clinical Information, Practice & Career, Advocacy, and Store. Below the navigation bar, the main heading is "Adult Immunization". A sub-heading reads "ACP works to improve adult immunization and patient outcomes by developing clinical guidance based on the best available evidence, publishing weekly scientific content, advocacy and making public statements, and offering resources for physicians and patients." Below this, there is a featured article titled "As Measles Cases Increase, ACP Can Help with Adult Immunization and Medical Misinformation Resources". The article text states: "ACP urges adults to get vaccinations recommended from trusted sources that develop clinical guidelines based on transparent, evidence-based methodologies and safeguards against conflicts of interest. ACP's Medical Misinformation and Disinformation page also has resources aimed at stopping and preventing the spread of disinformation and misinformation. Measles information specifically can be found below in the 'Other Resources' section under 'Clinical Updates.'" Below the featured article, there is a "Featured Updates" section with three items: "Respiratory Syncytial Virus Vaccines in Adults Who Are Not Pregnant or Immunocompromised", "COVID-19 Vaccines for 2025-2026 in Adults Who Are Not Pregnant or Immunocompromised", and "ACP Immunization-Related Efforts". At the bottom, there are three dropdown menus for "Clinical Updates", "Latest Advocacy", and "Resources to Increase Immunization Rates".



ACP Clinical Guidelines



Clinical Guidelines & Recommendations

ACP's goal is to provide clinicians with recommendations based on the best available evidence, to inform clinicians of when there is no evidence, and finally, to help clinicians deliver the best health care possible.

ACP develops several different types of clinical recommendations:

- Clinical Guidelines
- Clinical Guidance Statements
- Best Practice Advice
- Practice Points

Additional Information: [Development Process](#) | [Practice Statements](#) | [Future Topics](#) | [Disclosure of Interests](#)

▼ Appropriate Antibiotic Use

▼ Cannabis and Chronic Noncancer Pain

▼ Colorectal Cancer Screening

▼ Coronavirus Disease 2019 (COVID-19)

▼ Depression

▼ Diabetes

▼ Diverticulitis


▼ High Flow Nasal Oxygen for Acute Respiratory Failure

▼ Immunizations

▼ Migraine


▼ Osteoporosis

▼ Point-of-Care Ultrasound for Acute Dyspnea



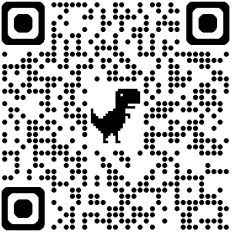
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13

Protecting Vaccine Access



Urge Congress to Pass S.2857/H.R.5448, the Protecting Free Vaccines Act


Please urge your members of Congress to support S.2857/H.R.5448, the Protecting Free Vaccines Act. This legislation would ensure that patients will continue to have health care coverage for lifesaving vaccines.

Background: There has been a significant increase in vaccine misinformation and hesitancy in recent years. At a time when we face one of the largest measles outbreaks in decades, we must ensure that patients have the most up-to-date information on immunizations backed by long-standing, evidence-based science. Further, we must ensure that patients will continue to have access to safe and effective vaccines to mitigate diseases that threaten public health.

Recent actions and changes to immunization policies at the Department of Health and Human Services (HHS) have led to confusion. These changes were implemented without transparency and were not backed by evidence-based science. ACP is very concerned that changes to the vaccine schedules will impact coverage of lifesaving vaccines because health insurers rely on the federal government's vaccine recommendations for coverage policies. The recent changes would significantly limit patients' choice and access to safe and effective vaccines.

ACP supports S.2857/H.R.5448, the Protecting Free Vaccines Act, which would ensure coverage of vaccines recommended by the Centers for Disease Control and Prevention (CDC) Advisory Committee on Immunization Practices (ACIP) as of October 2024, before the recent changes to the ACIP panel. The Protecting Free Vaccines Act would protect public health by guaranteeing that our patients will have access to well-established vaccines backed by rigorous scientific standards, without cost-sharing. This legislation was introduced in the Senate by Senators Ron Wyden (D-OR) and Bernie Sanders (I-VT) and in the House by Representatives Frank Pallone Jr. (D-NJ-06), Richard Neal (D-MA-01), and Bobby Scott (D-VA-03).

Action Requested: Please email your members of Congress to ask them to co-sponsor S.2857/H.R.5448, the Protecting Free Vaccines Act. A sample message has been provided for you that can be personalized. Please contact Shuan Tomlinson at stomlinson@acponline.org with any questions about this campaign. Thank you for your continued advocacy.



14

Compose Your Message

- US Senators
- US Representative

Please review the message below and consider customizing to include your hometown and medical specialty, as well as any personal stories on why this issue is important to you.

Subject
Pass S.2857/H.R.5448, the Protecting Free Vaccines Act

Message Body
As a primary care physician and your constituent, I am writing to ask you to co-sponsor S.2857/H.R.5448, the Protecting Free Vaccines Act, which would ensure coverage of vaccines recommended by the Centers for Disease Control and Prevention (CDC) Advisory Committee on Immunization Practices (ACIP) as of October 2024, before the recent changes to the ACIP panel. The Protecting Free Vaccines Act would protect public health by guaranteeing that our patients will have access to well-established vaccines backed by rigorous scientific standards, without cost-sharing. This legislation was introduced in the Senate by Senators Ron Wyden (D-OR) and Bernie Sanders (I-VT) and in the House by Representatives Frank Pallone Jr. (D-NJ-06), Richard Neal (D-MA-01), and Bobby Scott (D-VA-03).

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Your Information

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Yes, sign me up for email updates and action alerts from ACP. Uncheck this box to opt out of future updates.

Remember me

Send Message

HOME > ADVOCACY > STATE HEALTH POLICY > TOOLKIT: PROTECTING ACCESS TO VACCINES

Toolkit: Protecting Access to Vaccines

Published: 1/16/2026

Over the past 50 years, vaccines have saved an estimated 154 million lives worldwide—equivalent to nearly six lives every minute. Recognizing this extraordinary achievement, ACP continues to emphasize the vital role of immunizations in both health care and public health policy, particularly in the face of rising vaccine skepticism and spread of anti-vaccine misinformation. ACP remains steadfast in its commitment to advancing evidence-based immunization practices, equipping physicians to educate patients, and promoting policies that ensure equitable access to vaccines for all communities.



ACTION:

Access to vaccines is a rapidly evolving policy issue. In this landscape, ACP encourages chapters and members encountering proposals to change vaccine policy in their states to contact our team using the [Advocacy Assistance Request Form](#) for support. ACP can provide guidance on key talking points, support with engaging media through statements and op-eds, and help strategize about how to respond.

ACP members should be aware of ACP's own vaccine recommendations, which you can find on [ACP's Immunization hub](#) and which can be shared with policymakers. For immunizations not addressed by ACP's own recommendations, ACP has [endorsed](#) the October 2024 ACIP immunization schedule recommendations and supports continued access to and coverage of those vaccinations.

Members interested in advocating to protect vaccines can also consider taking one of the following actions:

- Write to your members of Congress using [ACP's grassroots alert](#) to ask that they support the Family Vaccine Protection Act, which would guarantee vaccine recommendations from ACIP and the CDC that more broadly follow an evidence-based framework.
- ACP is tracking state legislation related to immunizations. See [what legislation your state is considering](#).



15

Questions

16