



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Advisory Committee on Immunization Practices (ACIP); Notice of Charter

Re-Establishment

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: Committee management; Withdrawal of notice of committee charter renewal; Notice of committee charter re-establishment.

SUMMARY: Pursuant to the Public Health Service Act, as amended, and the Federal Advisory Committee Act, as amended, the Centers for Disease Control and Prevention (CDC) announces the re-establishment of the Advisory Committee on Immunization Practices (ACIP). A notice of committee charter renewal for the ACIP, which was published in the Federal Register on April 6, 2026, is hereby withdrawn. In this document, the CDC also announces the determination that the re-establishment of the ACIP is necessary and in the public interest in connection with the Department of Health and Human Services' (HHS) performance of its duties.

FOR FURTHER INFORMATION CONTACT: ACIP Secretariat, Advisory Committee on Immunization Practices, Centers for Disease Control and Prevention, 1600 Clifton Road NE, Mailstop H21-12, Atlanta, Georgia 30329-4027. Email: ACIP@cdc.gov.

SUPPLEMENTARY INFORMATION: In accordance with the Federal Advisory Committee Act, as amended (5 U.S.C. § 1001 et seq.), CDC is providing notice of the re-establishment of the charter of the ACIP, CDC, HHS. This charter is being re-established for a two-year period.

Withdrawal of previously published notice: The notice of charter renewal published on April 6, 2026 (91 FR 17279) is hereby withdrawn due to an administrative error in meeting the revised public notification timing requirements under the revised Federal Advisory Committee Act

regulations, as amended in December 2025 (41 CFR § 102–3.65). As a result, the charter lapsed and the committee must be re-established.

Public Interest Determination

Pursuant to 41 CFR § 102-3.60(a), to establish, renew, reestablish, or merge a discretionary (agency discretion) advisory committee, an agency must first consult with the General Services Administration’s Committee Management Secretariat (the Secretariat) and, as part of the consultation, provide a written public interest determination approved by the head of the agency to the Secretariat with a copy to the Office of Management and Budget. In addition, pursuant to 41 CFR § 102-3.35, an agency shall follow the same consultation process and document in writing the same determination of need before creating a subcommittee under a discretionary committee that is not made up entirely of members of a parent advisory committee.

Information on the following factors for the committee is provided to the Secretariat to demonstrate that re-establishing the committee is in the public interest:

1. Annual budget:

Estimated annual costs for operating the Committee, including (i) Federal personnel (3) and other Federal internal costs are \$1,080,340; (ii) proposed compensation and travel expense payments for up to 19 members is \$42,750; and (iii) reimbursable costs are \$83,106.

2. If applicable, the total dollar value of grants expected to be recommended during the fiscal year, \$0.

3. Criteria for selecting members to ensure the committee has the necessary expertise and fairly balanced membership: To identify nominees capable of maintaining fairly balanced membership who collectively represent a balanced range of scientific, clinical, and public health expertise relevant to the ACIP’s mission to advise and provide recommendations to the CDC Director on vaccines and immunizations, CDC conducts broad outreach using multiple channels. Outreach is designed to reach interested parties, as appropriate to the Committee's function, and stakeholders likely to possess the expertise and perspectives identified above. Outreach priorities

may change as vacancies arise and as the Committee's agenda evolves.

In conducting outreach and screening candidates, the Designated Federal Officer (DFO) as well as the ACIP Secretariat assess current and anticipated Committee needs based on the charter, the active work plan, upcoming vacancies, and any identified gaps in expertise or perspectives.

Consideration is given to geographic diversity, diversity of relevant work settings, and the need for balanced expertise across clinical medicine, immunization practice, immunology, infectious diseases, epidemiology, biostatistics and data analysis, vaccine safety and effectiveness evaluation, health economics, public health implementation, health systems and program operations, special populations, and consumer and community perspectives.

The DFO, in collaboration with the ACIP Secretariat, solicits candidate names through multiple channels, which may include:

- Publication of nomination notices in the Federal Register;
- Information and application procedures on the ACIP website at <https://www.cdc.gov/acip/apply-for-membership/index.html>, including a continuous nomination process throughout the year;
- Announcements and application information at ACIP meetings and webcasts;
- Outreach to professional associations, public health organizations, academic institutions, state, local, Tribal, and territorial partners, health systems, and consumer or community organizations, as appropriate to address identified expertise gaps or community perspectives;
- Recommendations from current or former Committee members, CDC subject matter experts, and other knowledgeable sources, as appropriate; and
- Targeted outreach, when needed, to identify nominees with expertise relevant to special populations, implementation in diverse settings, or other emerging needs reflected in the Committee's work.

Members, including the Chair and Vice Chair, shall be selected by the HHS Secretary and

shall be invited to serve for overlapping terms of up to four years, except that any member appointed to fill a vacancy for an unexpired term shall be appointed for the remainder of that term. A member may serve 180 days after the expiration of that member's term if a successor has not taken office.

4. List of all other Federal advisory committees of the agency:

- Advisory Board on Radiation and Worker Health
- Advisory Committee for the Elimination of Tuberculosis
- Advisory Committee on Breast Cancer in Young Women
- Advisory Committee to the Director, CDC
- Board of Scientific Counselors, National Center for Injury Prevention and Control
- Lead Exposure and Prevention Advisory Committee
- Mine Safety and Health Research Advisory Committee
- National Committee on Vital and Health Statistics
- World Trade Center Health Program Scientific/Technical Advisory Committee

5. Justification that the information or advice provided by the Federal advisory committee or subcommittee is not available from another Federal advisory committee, another Federal Government source, or any other more cost-effective and less burdensome source: The ACIP has been given statutory roles under subsections 1928(c)(2)(B)(i) and 1928(e) of the Social Security Act (42 U.S.C. § 1396s(c)(2)(B)(i) and 1396s(e)) and subsection 2713(a)(2) of the Public Health Service Act (42 U.S.C. § 300gg-13(a)(2)). In accordance with Section 1928 of the Social Security Act, the ACIP shall establish and periodically review and, as appropriate, revise the list of vaccines for administration to children and adolescents eligible to receive vaccines through the Vaccines for Children (VFC) Program, along with schedules regarding the appropriate dose and dosing interval, and contraindications to administration of the pediatric vaccines. The Secretary, and as delegated the CDC Director, shall use the list established by the ACIP for the purpose of the purchase, delivery, and administration of pediatric vaccines in the VFC Program.

Further, under provisions of the Affordable Care Act (Section 2713 of the Public Health Service Act, as amended), immunization recommendations of the Committee that have been adopted by the Director of the CDC must be covered by applicable health plans. Therefore, the advice provided by the ACIP is not available from another Federal advisory committee or Federal Government source, or any other more cost-effective and less burdensome source.

6. Explanation of why the committee/subcommittee is essential to the conduct of agency business: The Secretary, HHS, and by delegation the Director, CDC, are authorized under Section 311 and Section 317 of the Public Health Service Act, [42 U.S.C. §243 and 42 U.S.C. §247b], as amended, to assist states and their political subdivisions to assist in the prevention and control of communicable diseases and to support related public health activities. The ACIP provides advice and recommendations to the CDC Director on the use of vaccines and immunization program strategies to inform clinical practice and public health action. The Committee convenes scientific and medical experts to evaluate the best available evidence regarding vaccine safety, efficacy, effectiveness, and implementation. ACIP shall provide advice and guidance regarding the use of vaccines and related immunobiologic agents for the control of vaccine-preventable diseases in the United States, including identifying areas where additional data or evaluation would inform future recommendations. Recommendations made by ACIP are reviewed by the CDC Director and, if adopted, become official CDC and HHS recommendations and may be published in the *Morbidity and Mortality Weekly Report (MMWR)*.

In conclusion, this public interest determination documents that re-establishing the committee is in the public interest, essential to the conduct of agency business, and that the information to be obtained is not already available through another advisory committee or source within the Federal Government.

The Director, Office of Strategic Business Initiatives, Office of the Chief Operating Officer, Centers for Disease Control and Prevention, has been delegated the authority to sign *Federal Register* notices pertaining to announcements of meetings and other committee management

activities, for both the CDC and the Agency for Toxic Substances and Disease Registry.

Kalwant Smagh,

Director, Office of Strategic Business Initiatives,

Office of the Chief Operating Officer,

Centers for Disease Control and Prevention.

[FR Doc. 2026-10012 Filed: 5/18/2026 8:45 am; Publication Date: 5/19/2026]