August 14, 2026

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At a Glance

- President Trump issued a new executive order directing major changes to childhood vaccine policy.
- Medical and public health organizations issued statements strongly opposing President Trump's executive order.
- The FDA approved Moderna's mFlusiva, the first mRNA flu vaccine in the U.S., for adults ages 50 and older.
- AAP reaffirms the importance of annual flu vaccination for all children.

Detailed Brief

President Trump issued a new executive order directing major changes to childhood vaccine policy.

- President Donald Trump signed an executive order on Aug. 10 establishing new "Gold Standard Childhood Vaccine Recommendations," which recommends vaccines against 11 diseases for all children, compared to 17 diseases under the Centers for Disease Control and Prevention's (CDC's) July 2025 recommended childhood immunization schedule and 18 diseases recommended by the American Academy of Pediatrics (AAP).
  - Other vaccines, including those for respiratory syncytial virus (RSV), hepatitis A, hepatitis B, dengue, rotavirus, meningococcal disease, influenza (flu), and COVID-19, would be recommended only for certain high-risk groups or based on shared clinical decision-making (SCDM).
  - Despite the changes in recommendation categories, the order is not expected to immediately affect vaccine coverage. Childhood vaccines that remain on the CDC schedule, including those recommended through SCDM, are expected to continue to be covered without cost-sharing by private insurance and through the Vaccines for Children program.

- The order calls for the replacement of the combined measles, mumps, and rubella (MMR) vaccine with three separate vaccines. It also says childhood vaccines should, “to the maximum extent feasible,” be administered at separate medical visits.
    - Longstanding immunization guidance has emphasized coadministration of recommended vaccines because doing so increases the likelihood that children receive vaccines on time and reduces missed opportunities for protection.
    - Critically, separate measles, mumps, and rubella vaccines are not currently available in the U.S.
- The order also encourages states to reconsider school immunization requirements, directing the Department of Justice to support certain legal challenges involving parental authority, religious freedom, medical accommodations, and exemptions.
- In addition, the order directs the Department of Health and Human Services (HHS) Task Force on Safer Childhood Vaccines to develop plans within 90 days to reassess vaccine timing and sequencing, expand access to single-antigen vaccines beginning with MMR, study alternatives to aluminum-containing adjuvants, and expand vaccine safety monitoring and research.
- Typically, changes to the federal immunization schedule are recommended by the Advisory Committee on Immunization Practices and adopted by the CDC Director before becoming official HHS policy.

Medical and public health organizations issued statements strongly opposing President Trump’s executive order.

- President Trump’s Aug. 10 executive order drew immediate opposition from medical, infectious disease, and public health organizations, which largely argued that the changes are not supported by new evidence and could make vaccination more difficult.
- Major medical organizations—including the AAP, American Academy of Physician Associates, American College of Physicians, and American Medical Association—reaffirmed existing childhood vaccine recommendations and warned that separating combination vaccines and requiring additional visits could increase costs, confusion, and missed vaccinations.
- Public health and infectious disease organizations, including the Infectious Diseases Society of America, National Foundation for Infectious Diseases, and Vaccine Integrity Project, focused on the process behind the changes, arguing that immunization recommendations should be based on transparent expert review and the best available scientific evidence.

The FDA approved Moderna’s mFlusiva, the first mRNA flu vaccine in the U.S., for adults ages 50 and older.

- The Food and Drug Administration (FDA) approved Moderna’s mFlusiva on Aug. 5, making it the first seasonal flu vaccine in the U.S. to use mRNA technology. It is approved for adults ages 50 and older.
    - In a trial of approximately 40,000 adults ages 50–64, mFlusiva resulted in 27% fewer laboratory-confirmed flu cases than a standard-dose flu vaccine, supporting standard FDA approval for this age group.
    - For adults ages 65 and older, the FDA granted accelerated approval based on immune-response data comparing mFlusiva with a high-dose flu vaccine.
- mRNA vaccines can be manufactured more quickly than typical flu vaccines, potentially allowing vaccine strains to be selected closer to flu season and providing greater flexibility if circulating viruses change.
- Moderna expects the vaccine to be available for the 2026–2027 flu season.

AAP reaffirms the importance of annual flu vaccination for all children.

- AAP issued its recommendations for the 2026–2027 flu season, continuing to recommend annual flu vaccination for all children ages six months and older without medical contraindications.
    - Any licensed flu vaccine appropriate for a child’s age and health status may be administered, ideally by the end of October.

- AAP's recommendation follows another severe flu season for children; pediatric flu hospitalization rates during the 2025-2026 season were the second highest since 2009–2010, with infants under age one experiencing the highest rates.
    - Through July 18, 188 pediatric flu deaths had been reported; nearly half occurred in children without a high-risk medical condition, and about 85% of vaccine-eligible children who died and had known vaccination status were not fully vaccinated.
- The guidance reinforces the AAP's recommended childhood immunization schedule, which continues to include routine flu vaccination.
- AAP emphasized that vaccination remains an important tool for reducing flu-related illness, hospitalization, and death among children and helping protect the broader community.
