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“AMGA Immunizations Brief”—brought to you by the Rise to Immunize® (RIZE) campaign—delivers vaccine news and updates relevant to healthcare leaders. This brief provides concise, actionable information to help you stay informed and guide patient care in an evolving immunization landscape.

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At a Glance

- AHIP member health plans will continue covering all ACIP-recommended immunizations.
- An FDA analysis found no child deaths could be definitively linked to COVID-19 vaccination.
- An FDA committee met on May 26 to discuss 2026-2027 updates to COVID-19 vaccine composition.
- The Senate Appropriations subcommittee conducted a hearing focused on NIH budget cuts.

Detailed Brief

AHIP member health plans will continue covering all ACIP-recommended immunizations.

- AHIP (formerly America's Health Insurance Plans) has [announced](#) that member health plans will continue covering all Advisory Committee on Immunization Practices (ACIP)-recommended immunizations with no cost-sharing through the end of 2027.
- The trade association declared that “coverage decisions for immunizations are grounded in each plan’s ongoing, rigorous review of scientific and clinical evidence and continual evaluation of multiple sources of data” and that “the evidence-based approach to coverage of immunizations will remain consistent.”

An FDA analysis found no child deaths could be definitively linked to COVID-19 vaccination.

- A recently surfaced Food and Drug Administration (FDA) [analysis](#) appears to contradict unverified claims made late last year by former FDA Center for Biologics Evaluation and Research (CBER) Director Vinay Prasad, MD, MPH, that the agency had discovered that the deaths of [at least 10](#) children were caused by COVID-19 vaccines.

- The analysis—which was dated December 2025 but only made public on May 11—reviewed 96 “unique reports” of child deaths submitted to the agency’s Vaccine Adverse Event Reporting System (VAERS) as of Aug. 14, 2025.
- FDA investigators concluded that none of the cases could be definitively linked to COVID-19 vaccination.
 - Although five of the deaths were categorized as “possible” and two as “probable” cases—based on [criteria from the World Health Organization](#) (WHO)—the report emphasized that alternative explanations could not be ruled out.
 - Several of the cases reported involved myocarditis, a rare, known risk associated with mRNA COVID-19 vaccines that has been reflected in product labeling since 2021.
 - Experts note that myocarditis is more commonly [caused by viral infections](#) themselves, and evidence continues to show the [benefits of vaccination](#) far outweigh the risks in most populations.

An FDA committee met on May 26 to discuss 2026-2027 updates to COVID-19 vaccine composition.

- The FDA’s Vaccines and Related Biological Products Advisory Committee met on May 26 to discuss the composition of COVID-19 vaccines for the 2026-2027 season.
- The panel recommended that COVID-19 vaccines [should be updated](#) to target the dominant XFG variant, with eight out of nine members voting in favor and one member voting to abstain, citing concerns regarding data availability.

The Senate Appropriations subcommittee conducted a hearing focused on NIH budget cuts.

- On May 21, National Institutes of Health (NIH) Director Jay Bhattacharya MD, PhD, [testified](#) before a Senate Appropriations subcommittee on the Administration’s [FY2027 budget proposal](#), which would cut NIH funding by \$5 billion and reduce the number of institutes and centers from 27 to 22.
- The hearing underscored growing concerns about the [lack of permanent leadership](#) across NIH, particularly at the National Institute of Allergy and Infectious Diseases (NIAID)—the agency’s second-largest institute and a key driver of infectious disease, vaccine, and outbreak preparedness research.
 - NIAID’s Acting Director, Jeffery Taubenberger, MD, PhD, had been expected to appear alongside Bhattacharya and five institute directors. However, it was announced during the hearing that Taubenberger was [no longer serving](#) in the role.
 - As of May 20, the NIH lacked permanent directors at 15 of its institutes.

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