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DEPARTMENT OF HEALTH
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MIKIE SHERRILL
Governor

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DR. RAYNARD E. WASHINGTON
Commissioner

EXECUTIVE DIRECTIVE No. 26-003

WHEREAS, pursuant to N.J.S.A. 26:4-1 to -26, the New Jersey Department of Health is statutorily charged with preventing and controlling the spread of communicable diseases in the State; and

WHEREAS, to discharge its duties and responsibilities, the Department of Health's Vaccine Preventable Disease Program works to reduce and eliminate vaccine-preventable diseases affecting children, adolescents, and older adults by raising the immunization coverage rates of New Jerseyans; and

WHEREAS, the prevention of individual cases and outbreaks of vaccine-preventable diseases require high immunization levels, which, in turn, help individuals and communities avoid the physical sequelae, morbidities, and mortalities that these diseases can cause, and curtail the associated high social costs that otherwise would burden children, families, older adults, and the community at-large; and

WHEREAS, the Advisory Committee on Immunization Practices (ACIP) is an advisory panel that makes recommendations to the Centers for Disease Control and Prevention (CDC) within the U.S. Department of Health and Human Services (HHS) regarding the use of vaccines for the prevention and control of vaccine-preventable disease in the United States and its recommendations inform the CDC's annual immunization schedules of recommended vaccines; and

WHEREAS, healthcare providers and public health experts throughout the country have relied upon ACIP recommendations to inform evidence-based immunization policies; and

WHEREAS, in 2025, HHS Secretary Robert F. Kennedy Jr. began making detrimental changes at the CDC, including the termination of all members of ACIP and replacing them with individuals who not only lack the qualifications and experience necessary to sit on this panel, but who also support dangerous and unscientific views on vaccine policies; and

WHEREAS, the unprecedented changes at the CDC prompted every living former CDC director since 1977 to pen a letter expressing their concern and dismay over Secretary Kennedy's changes and the serious negative impacts that they will bring upon the health

of the country;[1] and

WHEREAS, on January 5, 2026, Jim O'Neill, Acting Director of the CDC, announced changes to the recommended childhood vaccine schedule, which removed the universal recommendations for children to receive vaccinations against flu, COVID-19, rotavirus, hepatitis A, hepatitis B, and meningococcal meningitis and, instead, recommends that the provision of these vaccines undergo shared clinical decision-making between parents and pediatricians; and

WHEREAS, historically, any major changes to federal vaccine recommendations were developed through an established, deliberative process that included internal government review with experts from the CDC and other agencies, as well as consideration and public debate via meetings of ACIP; and

WHEREAS, the January 5, 2026 vaccine schedule changes made under HHS Secretary Kennedy circumvented the established review process, and instead changes were announced without substantive internal or external consultation, and without prior public notice; and

WHEREAS, the new childhood vaccination schedule issued by the CDC resulted in confusion among healthcare providers, parents, and caregivers; and

WHEREAS, on January 16, 2025, Governor Murphy enacted legislation, P.L. 2025, c. 283, which amended the requirement that health insurers (health, hospital and medical service corporations; commercial individual and group health insurers; health maintenance organizations; health benefits plans issued pursuant to the New Jersey Individual Health Coverage and Small Employer Health Benefits Programs; the State Health Benefits Program; and the School Employees' Health Benefits Program) and the State Medicaid Program provide coverage for immunizations recommended by ACIP to instead require coverage for vaccinations recommended by the New Jersey Department of Health, with such recommendations considering ACIP recommendations and, as appropriate, the recommendations of the American Academy of Pediatrics, the American Academy of Family Physicians, the American College of Obstetricians and Gynecologists, and the American College of Physicians; and

WHEREAS, the vaccine recommendations issued by the federal government under the current administration continue to lack trustworthiness and can no longer be viewed as the standard for vaccination guidance; and

WHEREAS, as directed by P.L. 2025, c. 283, the Department of Health is issuing vaccination recommendations that are based in clear scientific and evidence-based data and information, as established by the American Academy of Pediatrics, the American

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[1] https://www.nytimes.com/2025/09/01/opinion/cdc-leaders-kennedy.html#:~:text=The%20men%20and%20women%20who,%2C%20too%2C%20does%20our%20country.&text=28%2C%202025-,Dr.,%2C%20Bluesky%2C%20WhatsApp%20and%20Threads.

Academy of Family Physicians, and the American College of Obstetricians and Gynecologists.

NOW, THEREFORE, I, Dr. Raynard E. Washington, Commissioner of the New Jersey Department of Health, hereby make the following vaccination schedule recommendations:

1. The 2026 Recommended Child and Adolescent Immunization Schedule for Ages 18 Years or Younger of the American Academy of Pediatrics (AAP) as supplemented and amended.[2]

   a. This schedule provides recommendations for the use of vaccines in children including: respiratory syncytial virus monoclonal antibody; COVID-19 vaccine; dengue vaccine; diphtheria, tetanus, and acellular pertussis (DTaP) vaccine; *Haemophilus influenzae* type b vaccine; hepatitis A vaccine; hepatitis B vaccine; human papillomavirus vaccine; influenza vaccine; measles, mumps, and rubella; meningococcal serogroups A, C, W, Y vaccine; meningococcal serogroup B vaccine; meningococcal serogroup A, B, C, W, Y vaccine; mpox vaccine; pneumococcal conjugate vaccine; pneumococcal polysaccharide vaccine; poliovirus vaccine (inactivated); respiratory syncytial virus vaccine; rotavirus vaccine; tetanus, diphtheria, and acellular pertussis vaccine (Tdap); tetanus and diphtheria (Td) vaccine; and varicella vaccine.

   b. This also includes the catch-up schedules recommended for children who have fallen behind on their vaccines and the list of contraindications and precautions stipulated by the AAP.

2. The 2026 Recommended Adult Immunization Schedule for persons 19 years of age and older of the American Academy of Family Physicians (AAFP) as supplemented and amended.[3]

   a. This schedule provides recommendations for the use of vaccines in adults including: COVID-19 vaccine; influenza vaccine (including the newly FDA-approved mRNA-1010 vaccine, mFLUSIVA); respiratory syncytial virus vaccine; tetanus, diphtheria, and pertussis vaccine (Tdap/Td); measles, mumps, and rubella; varicella vaccine; zoster recombinant vaccine; human papillomavirus vaccine; pneumococcal conjugate vaccine; pneumococcal polysaccharide vaccine; hepatitis A vaccine, hepatitis B vaccine; meningococcal A,C,W,Y vaccine; meningococcal B vaccine; *Haemophilus*

[2] https://downloads.aap.org/AAP/PDF/AAP-Immunization-Schedule.pdf

[3] https://www.aafp.org/family-physician/patient-care/prevention-wellness/immunizations-vaccines/immunization-schedules.html and https://www.aafp.org/media-center/press-releases/aafp-announces-fall-immunization-recommendations-to-protect-patients-and-communities

influenzae type b vaccine; mpox vaccine; and poliovirus vaccine (inactivated).

b. This also includes the catch-up schedules recommended for people who have fallen behind on their vaccines and the list of contraindications and precautions stipulated by the AAFP.

3. Vaccines recommended by the American College of Obstetricians and Gynecologists (ACOG) in 2026, as supplemented and amended, for pregnant persons to protect the health of the birthing parent and their child including the COVID-19 vaccine; the influenza vaccine; the respiratory syncytial virus vaccine; and the tetanus, diphtheria, and acellular pertussis (Tdap) vaccine.[4]

4. The use of combination vaccines instead of separate injections when appropriate as outlined in the AAP and AAFP schedules above.

5. This Executive Directive provides recommendations for adult and childhood vaccinations and does not replace, repeal, or amend the immunization requirements for attendance at childcare centers, schools, and institutions of higher education set out in the Department of Health's rules at N.J.A.C. 8:57, Communicable Diseases.

This Directive shall take effect immediately. The provisions of this Directive shall remain in force and effect until modified, supplemented, and/or rescinded.

Dr. Raynard E. Washington
Commissioner
Department of Health

September 28, 2026
Date

[4] https://www.acog.org/programs/immunization-infectious-disease-public-health