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The vaccine war escalates as AAP contradicts RFK Jr's recommendations

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From the Editor: The vaccine war escalates as AAP contradicts RFK Jr's recommendations. Employers cope with higher health insurance premiums, rural ERs go without doctors, and a pancreatic cancer vaccine shows promise in an early trial. Click the headline for the full article; subscribe to **TMR** for \$25/year [here](#).



[Leading pediatrician group recommends COVID vaccine for infants, toddlers in contrast with RFK Jr.](#), by Mary Kekatos and Youri Benadjaoud, ABC News, 8/19/25

TMR Topline – The American Academy of Pediatrics (AAP) issued its annual childhood immunization schedule, with guidance for Covid, flu and RSV vaccines for those aged 18 and younger. The AAP said that children ages 6 months to 23 months should receive a Covid-19 vaccine, in contrast to HHS's contention that it should be *"based on shared clinical decision-making."* The AAP also recommended Americans age 18 and under receive a Covid vaccine if they are at high risk of severe Covid, live in a long-term care facility or congregate setting, if they have never been vaccinated against Covid or if they live with someone at high risk for severe Covid. Dr. Susan J. Kressly, president of the AAP, stated *"The academy has been making pediatric immunization recommendations since the 1930s, that has not changed. But what has changed is that this year, we're doing it in the environment of misinformation, which makes it more important than ever that we provide clear and confident guidance, because the majority of American families really depend on us for this guidance."* HHS spokesman Andrew Nixon called on the AAP to *"strengthen conflict-of-interest safeguards and keep its publications free from financial influence,"* noting that *"By bypassing the CDC's advisory process and freelancing its own recommendations, while*

answering those who demand accountability, the AAP is putting commercial interests ahead of public health and politics above America's children."



[New study casts doubts on RFK Jr.'s reasons for gutting key vaccine panel](#), by Anna

Kim Constantino, Bertha Coombs, Ashley Capoot, CNBC 8/19/25

TMR Topline – HHS Secretary RFK Jr. recently [gutted a key government vaccine panel](#), saying it was needed to eliminate what he called *"persistent conflicts of interest"* on the Advisory Committee on Immunization Practices (ACIP). [New research](#) from the USC Schaeffer Center for Health Policy & Economics appears to challenge that argument. Conflicts on that CDC panel had been at *"historic lows for years"* before Kennedy restacked it with new members, some of whom are widely known vaccine critics, the researchers found. Conflicts of interest rates were also low on the FDA's Vaccines and Related Biological Products Advisory Committee (VRBPAC).

The USC researchers analyzed reported financial conflicts of interest among experts on the two vaccine panels between 2000 and 2024. Rates of reported conflicts among ACIP members fell to 5% by 2024, and stayed below 4% among VRBPAC members since 2010, including 10 years where there were no reported conflicts at all. Conflict of interest rates were significantly higher in the early 2000s, peaking at around 43% for ACIP in 2000 and 27% for VRBPAC in 2007. RFK Jr. had claimed that 97% of the CDC panel members had conflicts of interest.



[CDC union condemns vaccine misinformation after shooter blamed COVID vaccine for depression](#), by Susan Haigh, Associated Press, 8/12/25

TMR Topline – A Georgia man who wanted to send a message against Covid-19 vaccines [fired over 180 times with a long gun](#) at the CDC's Atlanta headquarters. A union representing CDC workers said the shooting was not random and demanded that HHS must provide a *"clear and unequivocal stance in condemning vaccine misinformation. Their leadership is*

critical in reinforcing public trust and ensuring that accurate, science-based information prevails.”

TMR's Take: Vaccine misinformation is proving deadly (see the [Texas measles outbreak](#)). TMR sides with the pediatricians. The chaos at HHS continues as [Vinay Prasad](#), a fierce critic of US [Covid-19](#) vaccine and mask mandates, returns as FDA's top vaccine regulator days after leaving the agency when far-right activist Laura Loomer called him a “progressive leftist saboteur.”



8/19/25

TMR Topline – The Business Group on Health surveyed 121 businesses covering 11.6 million people and found that large companies' median healthcare costs will grow by roughly 9% in 2026, the largest increase since at least 2017. With a 62% increase since 2017, employers are concerned about the new tax law's reductions to Obamacare exchanges, Medicaid and Medicare programs that will drive [hospitals to raise prices](#) for the commercially insured given the CBO [report](#) that the health sector will lose \$1.1 trillion over the next decade. Cost drivers include increasing utilization of healthcare services, a growing demand for GLP-1s, the use of mental health services and new cancer diagnoses. Nearly half plan to reduce or “strongly consider” cutting [coverage of GLP-1s](#) and 41% said they are changing pharmacy benefit managers or soliciting bids in response to the cost increase. 75% reported a [higher incidence of cancers](#) among workers and will consider additional screenings to increase the chances for early diagnosis.



[Experts Say Rural Emergency Rooms Are Increasingly Run Without Doctors](#), by Arielle Zions, KFF Health News, 8/12/25

TMR Topline – Emergency medicine researchers believe ERs in rural areas increasingly operate with few or no physicians amid a nationwide shortage of doctors. A [recent study](#) found that in 2022, at least 7.4% of ERs across the US did not have an attending physician on-site 24/7. More than 90% of them were in low-volume or small rural hospitals. The results come from 82% of hospitals that responded to a survey sent to all emergency departments in the country, except those operated by the

federal government. Placing ERs in the hands of non-doctors isn't without controversy. Some doctors and their professional associations say their extensive training leads to better care, and that some hospitals are just trying to save money by not employing them. Other health care providers and organizations say advanced-practice providers with the right experience and support are capable of overseeing ERs. And they say mandating that a physician be on-site could drive some rural hospitals to close.



[Trump tax law could cause Medicare cuts if Congress doesn't act, CBO says](#), by Stephen Groves, Associated Press, 8/15/25

TMR Topline – The federal budget deficits caused by President Trump's [tax and spending law](#) could trigger automatic cuts to Medicare as required by a 2010 law. The [CBO](#) estimates that Medicare could be cut by as much as \$491 billion from 2027 to 2034 if Congress does not act to mitigate the law's requirements. Trump and the Republicans pledged not to cut Medicare, but the estimated \$3.4 trillion that the law adds to the federal deficit means many Medicare programs could see cuts. Rep. Brendan F. Boyle, the top Democrat on the House Budget Committee said, “*Republicans knew their tax breaks for billionaires would force over half a trillion dollars in Medicare cuts — and they did it anyway.*” Rural hospitals are [already grappling](#) with cuts to Medicaid and cuts to Medicare could exacerbate their shortfalls.



[One-size-fits-all pancreatic cancer vaccine showed promise in early trial](#), by Kaitlin Sullivan, NBC News, 8/11/25

TMR Topline – “Jeopardy” fans who remember Alex Trebek's long battle with pancreatic cancer that raised awareness of and support for research into the disease will be happy to know that an early trial of a one-size-fits-all vaccine showed promise in preventing [hard-to-treat pancreatic cancers](#) from coming back. With a [five-year survival rate of about 13%](#), it's one of the deadliest forms of cancer. Published in *Nature Medicine*, the vaccine targets one of the most common genetic drivers of cancer: KRAS gene mutations. In the Phase 1 trial, pancreatic cancer patients survived for an average of 29 months and lived recurrence-free for more than 15 months post-vaccination.