

Illinois Immunization Advisory Committee (IAC)

Meeting Minutes

Date: September 22, 2025

Time: 1:03 p.m. – 3:42 p.m.

Location: WebEx Meeting

1. Call to Order

The meeting was called to order at 1:03 p.m. by Chair Dr. Marielle Fricchone. Agenda available on the IDPH website. Roll call conducted by Jessica Bounds.

2. Attendance

IAC Member Roll Call

- Marielle Fricchone, MD (Chair)
- Allison Bartlett, MD, MS
- Craig Batterman, MD, FAAP
- Paula Campbell
- Archana Chatterjee
- Denise Flores, BSN, RN
- Bessey Geevarghese, DO
- Patrick Harper, PharmD, MPH
- Janet Jokela
- Kiran Joshi
- Corinne Kohler
- Heather Kipta
- Paul Lucas
- Amanda Minor, MPH, LEHP
- Jennie Pinkwater
- Garth Reynolds, BSPHarm, RPh, MBA
- Vidya Sundareshan
- Teresa Wilburn, BSN, RN
- Michelle Wilcoxson
- Edward Linn, MD

Quorum: Achieved.

3. Approval of Previous Meeting Minutes

Motion to approve: Garth Reynolds, seconded by Allison Bartlett. Votes: 11 yes, 0 no, 9 abstain.

Motion carried.

4. Remarks from IDPH Director, Dr. Sameer Vohra

Dr. Vohra thanked the committee for their commitment and expertise, emphasizing the importance of science-based guidance during a time when national recommendations have become less reliable. He explained that Governor Pritzker's recent Executive Order created the Statewide Vaccine Access Initiative to ensure Illinoisans receive credible and transparent recommendations for the 2025–26 respiratory virus season. He reaffirmed IDPH's recognition of the child and adolescent immunization schedule issued August 7, 2025 (excluding COVID-19) and announced that IDPH will issue a standing order to support vaccine administration. He closed by stressing that

the IAC's deliberations will help Illinois provide trustworthy, evidence-based guidance to protect the health of residents.

5. Committee Chair Remarks

Dr. Fricchone thanked Director Vohra for his leadership and reaffirmation of the child and adolescent immunization schedule. She outlined the meeting plan, noting that members had reviewed data from ACIP meetings, professional society recommendations, FDA and HHS updates, and recent literature. She recognized the work of committee members who served as topic leads and explained that the session would include data presentations followed by discussion and votes on influenza, RSV, and COVID-19 recommendations.

6. Data Presentations & Votes

A. Influenza

Key data presented: 2024–25 flu season was severe; 2025–26 season predicted less severe. Pediatric deaths higher in 2024–25 than pre-pandemic baseline. Proposed vote: *Routine annual influenza vaccination for all persons aged 6 months and older without contraindications*. Motion to approve vote language by Patrick Harper, seconded by Allison Bartlett. Vote: 20 Yes, 0 No, 0 Abstain. Motion carried.

B. RSV – Infants & Maternal

Key data presented: 33.6% of IL infants <8 months received nirsevimab in 2024–25; disparities noted by race, insurance status, and hospital practices. Proposed vote: *Recommend maternal RSVpreF vaccination or infant receipt of long-acting monoclonal antibody (clesrovimab or nirsevimab)*. Motion to approve by Allison Bartlett, seconded by Paul Lucas. Vote: 19 Yes, 0 No, 0 Abstain. Motion carried.

C. RSV – Adults

Proposed vote: *Recommend a one-time dose of any FDA-licensed RSV vaccine for all adults ≥75 years and for adults 50–74 at increased risk*. Motion by Edward Linn, seconded by Denise Flores. Vote: 19 Yes, 0 No, 0 Abstain. Motion carried.

D. COVID-19 – Pediatrics

Key data presented: Infants <2 years had highest hospitalization rates in Illinois. Low vaccine coverage noted (16.5% in IL, 13% nationally).

Proposed vote:

1. Recommend age-appropriate vaccination for children 6–23 months.
2. Recommend a single dose for children/adolescents 2–17 years in risk categories (high risk, congregate living, unvaccinated, high-risk household contacts).
3. Follow AAP 2025 schedule for immunocompromised children.
4. Allow shared clinical decision-making for children/adolescents outside risk groups when parents desire protection.

Motion by Allison Bartlett, seconded by Corinne Kohler. Vote: 18 Yes, 0 No, 1 Abstain. Motion carried.

7. Public Comment began at 2:40pm

Kelly Hubbard (EverThrive) urged clear, science-based guidance and universal vaccine recommendations to ensure equity. Dr. Chris Crank (ICHP) recommended including vaccine safety data in communications for transparency. With no further requests to participate, public comment concluded at 2:47pm.

6. Data Presentations & Votes Continued

E. COVID-19 – Adults

Extensive discussion on universal vs. risk-based recommendation. Consensus in favor of universal vaccination for adults 18+. Agreement to postpone further discussion of additional risk-based recommendations until a later meeting. Proposed vote: *Recommend 2025–26 COVID-19 vaccination for all adults ≥18 years*. Motion to approve vote language by Kiran Joshi. Seconded by Janet Jokela. Vote: 18 Yes, 0 No, 0 Abstain. Motion carried.

F. COVID-19 – Pregnancy

Proposed vote: *Recommend 2025–26 COVID-19 vaccine for all individuals who are or will be pregnant, during any trimester, post-partum, or during lactation*. Motion to approve vote language by Edward Linn, seconded by Janet Jokela. Vote: 17 Yes, 0 No, 0 Abstain. Motion carried.

8. Adjournment

Motion to adjourn by Garth Reynolds, seconded by Bessey Geevarghese. Motion passed by unanimous voice vote.

Meeting adjourned by Chair Marielle Fricchione at 3:42 p.m.