STATE OF MICHIGAN
DEPARTMENT OF HEALTH AND HUMAN SERVICES
LANSING

GRETCHEN WHITMER
GOVERNOR

ELIZABETH HERTEL
DIRECTOR

Michigan Chief Medical Executive Standing Recommendation #2025-01:

COVID-19 Vaccines

In my role as chief medical executive for the State of Michigan, I, Natasha Bagdasarian, MD, MPH, FACP, FIDSA, issue the following standing recommendation:

Any person over the age of six months without contraindication who has not received a dose of a Food and Drug Administration (FDA)-approved or -authorized 2025-2026 COVID-19 vaccine may be considered to have an underlying condition that puts them at high risk for severe outcomes from COVID-19 and is thus eligible to receive an age-appropriate dose.

I make this recommendation based on the following authorities and evidence:

1. On September 17, 2025, Governor Gretchen Whitmer issued Executive Directive 2025-7, directing the Michigan Department of Health and Human Services and other state agencies to ensure broad access to COVID-19 vaccines by:
    a. Issuing clear, accessible guidance to providers, pharmacists, and the public regarding the safety and efficacy of COVID-19 vaccines for all appropriate populations;
    b. Issuing clear, accessible guidance to providers and pharmacists to encourage prescribing and administering of COVID-19 vaccines, where appropriate; [and]
    c. Identifying, reviewing, and removing barriers to vaccine access to ensure COVID-19 vaccines remain widely available in Michigan.
2. Michigan law establishes the role of Chief Medical Executive (CME) "to protect and promote public health in Michigan by advising the Governor and the Department on public health issues, assessing the state of public health in Michigan, and communicating health information to the public."[1] As CME, I am required to "disseminate public health information, including, but not limited to, advocating disease prevention and promoting the Department's public health initiatives," and "where appropriate, collaborate with public and private public health stakeholders in Michigan, including, but not limited to, institutions of higher learning, hospitals, and professional organizations."[2]

3. Vaccines are the best defense against severe outcomes from COVID-19 infection, including hospitalization and death. Reputable organizations and experts continue to recommend

[1] MCL 333.26369.
[2] *Id.*

routine COVID-19 vaccination. The American Academy of Pediatrics recently published a vaccination schedule recommending COVID-19 vaccination for children ages 2-18 years, with a single dose of age-appropriate 2025-2026 COVID-19 vaccine for those who are at high risk of severe COVID-19 or those whose parent or guardian desires protection;[3] the American College of Obstetricians and Gynecologists continues to recommend that all pregnant and lactating individuals receive an updated COVID-19 vaccine;[4] the American Academy of Family Physicians continue to recommend that recommends all adults 18 years and older should receive a COVID-19 vaccine;[5] and the Vaccine Integrity Project housed at the University of Minnesota released a new comprehensive evidence review endorsing the safety and efficacy of COVID-19 vaccines.[6]

Recent evidence shows that, while COVID-19 vaccination reduces the rate of severe outcomes, including hospitalization and death, these protective effects wane with time. One study showed that for immunocompetent adults who received a 2024-25 COVID-19 vaccine, the vaccine was 33% effective in reducing associated emergency department or urgent care visits and approximately 45% effective in reducing hospitalizations among immunocompetent adults aged ≥65 years, compared with not receiving a 2024–2025 vaccine dose.[7] Studies also show that additional doses of COVID-19 vaccine in children have a protective effect against negative outcomes including post-acute COVID-19 syndrome (also known as long COVID) and multisystem inflammatory syndrome, both of which can be debilitating.[8]

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[3] American Academy of Pediatrics, *AAP releases evidence-based immunization schedule; calls on payers to cover recommendations*, <https://publications.aap.org/aapnews/news/32835/AAP-releases-evidence-based-immunization-schedule?autologincheck=redirected>; American Academy of Pediatrics, *Recommended Child and Adolescent Immunization Schedule for Ages 18 Years or Younger, AAP-Immunization-Schedule.pdf;* American Academy of Pediatrics, *Pediatric COVID-19 Vaccine Dosing Quick Reference Guide,* <https://downloads.aap.org/AAP/PDF/COVID%20Vaccine%20Dosing_Quick%20Reference.pdf>.

[4] American College of Obstetricians and Gynecologists, <https://www.acog.org/clinical/clinical-guidance/practice-advisory/articles/2020/12/covid-19-vaccination-considerations-for-obstetric-gynecologic-care> (last visited September 18, 2025).

[5] American Academy of Family Physicians Statement, *AAFP Announces Fall Immunization Recommendations, Reaffirming Commitment to Vaccine Safety and Public Health (September 8, 2025)*, <https://www.aafp.org/news/media-center/statements/aafp-announces-fall-immunization-recommendations-reaffirming-commitment-to-vaccine-safety-and-public-health.html>

[6] See Vaccine Integrity Project, *From Data to Decisions: The Evidence Base for 2025 Fall/Winter Immunizations*, VIP Evidence Review Executive Summary - Final.pdf

[7] Centers for Disease Control and Prevention (CDC), Morbidity and Mortality Weekly Report (MMWR), *Interim Estimates of 2024–2025 COVID-19 Vaccine Effectiveness Among Adults Aged ≥18 Years — VISION and IVY Networks, September 2024–January 2025*, Ruth Link-Gelles, PhD et al. (February 27, 2025), available at <https://www.cdc.gov/mmwr/volumes/74/wr/mm7406a1.htm>.

[8] Hanieh Razzaghi et al., *Vaccine Effectiveness Against Long COVID in Children*, 153(4) PEDIATRICS (April 2024), available at *<https://pubmed.ncbi.nlm.nih.gov/38225804/>*; Laura D. Zambrano et al., *BNT162b2 mRNA Vaccination Against Coronavirus Disease 2019 is Associated With a Decreased Likelihood of Multisystem Inflammatory Syndrome in Children Aged 5-18 Years-United States, July 2021 - April 2022*, 76 CLIN INFECT DIS. e90-e100 (August 20, 2022), available at < https://academic.oup.com/cid/article/76/3/e90/6655523>.

Likewise, another recent study showed that vaccine effectiveness of a strain-adapted COVID-19 vaccine was 68% effective in preventing hospitalizations when compared to persons who did not receive an updated COVID-19 vaccine.[9]

4. The FDA granted approval of the 2025-2026 Formula of COVID-19 vaccines for the following populations:
   - Pfizer-Biontech/COMIRNATY: For use in individuals who are 65 years of age and older, or 12 years through 64 years of age with at least one underlying condition that puts them at high risk for severe outcomes from COVID-19.
   - Moderna/MNEXSPIKE: 65 years of age and older, or 12 years through 64 years of age with at least one underlying condition that puts them at high risk for severe outcomes from COVID-19.
   - Moderna/SPIKEVAX: 65 years of age and older, or 6 months through 64 years of age with at least one underlying condition that puts them at high risk for severe outcomes from COVID-19.
   - Novavax/NUVAXOVID: 65 years of age and older, or 12 years through 64 years of age with at least one underlying condition that puts them at high risk for severe outcomes from COVID-19.

5. The FDA does not define the list of underlying conditions that place a person at high risk for severe outcomes from COVID-19. In February 2025, the Centers for Disease Control and Prevention published an updated list of Underlying Conditions and the Higher Risk for Severe COVID-19.[10] That list includes conditions such as obesity and physical inactivity and is explicitly "not exhaustive" and "should not be used to exclude people with underlying conditions from recommended measures for prevention or treatment of COVID-19."[11]

This recommendation remains in effect until rescinded.

SIGNATURE:

Natasha Bagdasarian, MD, MPH, FIDSA, FACP
Chief Medical Executive

September 19, 2025
Date Signed/Effective Date

[9] Haley J. Appaneal et al., *Early effectiveness of the BNT162b2 KP.2 vaccine against COVID-19 in the US Veterans Affairs Healthcare System*, NAT COMMUN 16, 4033 (2025), available at <https://doi.org/10.1038/s41467-025-59344-7>.
[10] CDC, *Underlying Conditions and the Higher Risk for Severe COVID-19* (February 6, 2025), https://www.cdc.gov/covid/hcp/clinical-care/underlying-conditions.html.
[11] *Id*.