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For Release:
December 5, 2025

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Acting Health Commissioner Brown Issues Executive Directive Protecting Birth Dose of Hepatitis B Vaccine in New Jersey

NJ Department of Health Continues to Recommend Universal Vaccination Against Hepatitis B for All Infants

TRENTON, NJ – Today, Acting Health Commissioner Jeff Brown signed an Executive Directive protecting the birth dose of the hepatitis B vaccine. The action comes amid discussions at the Advisory Committee on Immunization Practices (ACIP) of the Centers for Disease Control and Prevention (CDC) meeting on December 4 - 5, 2025, about when to administer the first dose.

“Updated recommendations from the Advisory Committee on Immunization Practices would weaken our ability to protect public health and stop the transmission of preventable disease. We know unequivocally that vaccines save lives,” said **Governor Phil Murphy**. “Since 1991, millions of newborns have received the birth dose of the hepatitis B vaccine, which has proven to be one of the most effective childhood immunizations in preventing infections and deaths. In New Jersey, we are continuing to trust the science that has saved countless newborns from adverse health outcomes.”

“New Jersey continues to recommend hepatitis B vaccination for all newborns within 24 hours of birth. For over 30 years, this approach has nearly eliminated hepatitis B in American children, preventing a disease that can cause lifelong liver damage, cirrhosis, and cancer,” said **Acting Health Commissioner Brown**. “Through this Executive Directive, I reaffirm our commitment to protecting children and families in New Jersey with science-backed health guidance. We will continue to follow evidence-based recommendations that have kept our communities safe for decades.”

With the Executive Directive, the New Jersey Department of Health continues to recommend that newborns and children receive the hepatitis B vaccine based on clear, scientific, and evidence-based recommendations from trusted medical professionals, specifically the American Academy of Pediatrics (AAP), as well as consensus guidance by the Northeast Public Health Collaborative. The Department also recommends that health care providers in the state follow the dosing schedules for the administration of the hepatitis B vaccine to newborns and children as established by the AAP, which can be found at downloads.aap.org/AAP/PDF/AAP-Immunization-Schedule.pdf.

Vaccination Prevents Hepatitis B Transmission to Newborns

Since 1991, all infants and young children have been recommended to receive the hepatitis B vaccine. Before the universal hepatitis B infant vaccination recommendation in 1991, approximately 18,000 children in the US were infected each year before they reached the age of 10 years. Half of these infections were from mother to child during birth; the other half were from other exposures. This underscores the critical importance of vaccination at birth.

Starting the hepatitis B vaccine at birth provides the best protection when the child is the most vulnerable to chronic infection. Following implementation of the routine birth dose, the US saw a 95% decrease in infant infections. In fact, the hepatitis B vaccine has prevented 90,100 childhood deaths in the US since 1994, making it one of the most effective childhood immunizations for prevention of deaths.

For decades, the AAP, the American Academy of Family Physicians, the American College of Obstetricians and Gynecologists (ACOG), and other leading experts in medicine, immunology, and public health have recommended that the first dose of hepatitis B vaccine be administered prior to hospital discharge for every newborn in the United States. In addition, the birth dose coverage rate has been adopted as a measure of hospital quality.

Despite this strong history of the birth dose preventing disease transmission, today, ACIP voted to recommend shared clinical decision making for parents deciding when or if to give the hepatitis B vaccine, including the birth dose, for infants born to a pregnant person who tests negative for hepatitis B surface antigen. This means that continued administration of the vaccine to infants born to a birthing parent who is negative for hepatitis B should follow a discussion of risks and benefits with their health care provider. For those not receiving the birth dose, the Advisory Committee suggested the initial dose be administered no earlier than two months of age. ACIP reaffirmed the recommendation to administer the vaccine within 12 hours to babies born to a birthing parent known to be positive for hepatitis B surface antigen or of unknown status.

The committee also passed a procedural vote to adopt a resolution that aligns the Vaccines for Children program with its recommendations. Additionally, ACIP recommended administration of a blood test for infants after the first dose of hepatitis B vaccine to check if they've developed antibodies to the vaccine before proceeding with additional doses. However, there is no data to support serology testing to indicate successful prevention of future infections prior to the completion of the hepatitis B vaccine series.

At this time, the CDC has not yet adopted these recommendations.

"The hepatitis B vaccine has been safely given to millions of newborns, and delaying it unnecessarily puts children at risk from an entirely preventable disease," **added Acting Commissioner Jeff Brown.** "Vaccines remain our most effective defense against preventable illnesses. Early vaccination protects children from decades of health complications and gives families peace of mind."

About Hepatitis B and How It Spreads

Hepatitis B is a blood-borne viral infection of the liver that can lead to very serious liver complications and diseases, such as cirrhosis and liver cancer. Acute infection with hepatitis B results in an illness that causes fatigue, loss of appetite, nausea, vomiting, jaundice (yellowing of the skin and eyes), and pain in the muscles, joints, and stomach. Chronic infection with hepatitis B is a long-term illness that occurs when the hepatitis B virus remains in a person's body. Infected individuals often do not have symptoms but can go on to develop cirrhosis and liver cancer.

Because hepatitis B rarely has symptoms, it can be spread easily and unknowingly. In fact, the virus is up to 100 times more infectious than HIV and can survive on surfaces for up to a week. Up to 2.4 million Americans are living with hepatitis B – and more than 60% are unaware of their infection.

In infants, hepatitis B is most commonly spread from mother to child due to blood exchange during the birthing process. An exposure to even a microscopic amount of infected blood can result in a lifelong infection. Due to the highly infectious nature of the virus and how easily it can be transmitted, however, babies and young children can also be exposed to the virus during accidental household or community exposure. Precautions do not guarantee that a child will never be exposed to the virus.

An estimated 1,000 infants are infected each year in the U.S. Approximately 90% of babies who are exposed to the virus will develop chronic hepatitis B, placing them at an increased risk for liver cancer in their lifetime. Approximately 1 in 3 children who get infected before age 6 years will develop chronic hepatitis B infection, and 1 in 4 who develop chronic hepatitis B will die from the disease.

Given the significant risks posed by hepatitis B, New Jersey has longstanding policies to screen all pregnant persons and to offer the birth dose universally. Per hospital licensing regulations (N.J.A.C. § 8:43G-19.2), all New Jersey delivery hospitals are required to screen pregnant patients for hepatitis B infection upon admission for delivery if their hepatitis B status is unknown or undocumented. All hospitals are strongly encouraged to also institute policies and orders to ensure the administration of appropriate hepatitis B virus immunoprophylaxis including the birth dose to all infants prior to discharge. Additional information for prenatal providers and birthing hospitals is available at nj.gov/health/cd/topics/hepatitisb_perinatal.shtml.

Hepatitis B Vaccination for All Ages

Despite today's actions, the hepatitis B vaccine continues to be recommended in New Jersey for:

All infants. The first dose of hepatitis B vaccine is administered at birth, with the series usually completed at 6-18 months of age.

All pregnant adults who are not yet vaccinated.

Anyone under 60 years of age who has not yet received the vaccine.

Adults 60+ years at increased risk of exposure to hepatitis B who were not previously vaccinated. Adults 60+ who are not at increased risk and are not vaccinated may choose to get one if they want protection.

In New Jersey, the hepatitis B vaccination series is required for school entry into kindergarten/first grade.

Hepatitis B By the Numbers

In 2024, there were 130 cases of acute hepatitis B and 1,846 newly identified cases of chronic hepatitis B reported in New Jersey. In the US, in 2023, there were 2,214 new cases of acute hepatitis B reported, with 17,650 cases of newly reported chronic hepatitis B.

Worldwide, about 260 million people live with chronic hepatitis B, which means about 1 of every 32 people are living with a chronic hepatitis infection. In 2022, 1.2 million people died from hepatitis B worldwide. About 2,000 deaths from hepatitis B occur each year in the US.

More than one billion doses of the hepatitis B vaccine have been given worldwide since its introduction in 1986.

More than 8 of 10 infants born throughout the world receive three doses of hepatitis B vaccine. Numerous studies looking at the vaccine's safety have been conducted by the World Health Organization, the CDC, and many medical societies, and have found no evidence that hepatitis B vaccine causes sudden infant deaths, autism, multiple sclerosis, or other neurological disorders.

New Jersey's Actions to Ensure Broader Vaccine Access

New Jersey has taken other decisive steps to maintain access to vaccination when federal policies create barriers:

For COVID-19 vaccines: On September 9, 2025, NJDOH issued an executive directive and standing order that, together, allow anyone six months and older to receive updated COVID-19 vaccines, with pharmacists authorized to provide shots without prescriptions for those three years and older.

On September 11, 2025, the New Jersey Department of Banking and Insurance published a bulletin encouraging insurance companies to continue covering these vaccines at no cost to families.

NJDOH partnered with the Maternal and Infant Health Innovation Authority to remind patients and providers about the importance of COVID-19 and hepatitis B vaccination coverage during pregnancy.

NJDOH has also recently partnered with leading health systems and community partners across the state to enhance availability and access to COVID-19 and flu vaccines for those who want to receive them, especially for children.


For all vaccines: As part of the Murphy Administration's broader strategy and ongoing commitment to public health preparedness and affordable health care access, the Department of Health convened an Interagency Vaccine Workgroup in late August to minimize interruptions to vaccine availability and coverage. The workgroup brings together leaders from the Departments of Human Services, Children and Families, Education, Banking and Insurance, Law and Public Safety's Division of Consumer Affairs, and Treasury to enhance coordination.

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Last Reviewed: 12/5/2025