



December 1, 2025

SUBMITTED ELECTRONICALLY

The Honorable Douglas A. Collins
Secretary of Veterans Affairs
U.S. Department of Veterans Affairs
810 Vermont Avenue, NW
Washington, DC 20420

RE: Coalition to Preserve Rehabilitation Request to Reinstate CARF Accreditation and uSPEQ Surveys for Veterans Health Administration's Rehabilitation Programs

Dear Secretary Collins:

On behalf of the undersigned members of the Coalition to Preserve Rehabilitation ("CPR"), we respectfully urge the Department of Veterans Affairs ("VA") to reverse its decision to:

- Discontinue the use of CARF International ("CARF") accreditation for Veterans Health Administration ("VHA") rehabilitation programs; and
- Terminate the uSPEQ veteran experience survey within CARF-accredited VHA rehabilitation programs.

Since 1997, CARF has provided independent accreditation for VHA rehabilitation programs—including in behavioral health, medical rehabilitation, substance use treatment, employment and community services, and aging services—strengthening efficiency, accountability, and consistency across a nationwide system serving nearly two million veterans. CARF accredits VA programs that provide services to some of the most vulnerable veterans, including in the areas of suicide prevention, homelessness, PTSD, mental health, brain injury and spinal cord injury, as well limb amputation systems of care. CARF accreditation signals to veterans and their families that the program not only meets recognized standards but also places the needs and goals of the people it serves at the center of everything it does.

CPR is a coalition of more than 50 national consumer, clinician, and membership organizations that advocate for policies to ensure access to rehabilitative care so that individuals with injuries, illnesses, disabilities, and chronic conditions may regain and/or maintain the maximum level of health and independent function. CPR is comprised of organizations that represent patients—as well as the providers who serve them—who are frequently inappropriately denied access to rehabilitative care in a variety of settings.

As organizations representing and serving the rehabilitation community, we are deeply concerned that these decisions will compromise the quality, accountability, and veteran-centered focus of rehabilitation care across the VA system. ***Therefore, we urge you to reinstate CARF's standards across VA rehabilitation programs.***

For veterans navigating recovery from injury, illness, or disability, rehabilitation in a variety of forms is a path to restored independence, dignity, and quality of life. Veterans deserve care that meets the highest professional and performance standards. The removal of the need to maintain CARF accreditation and the elimination of direct veteran feedback on a wide range of programs intended to serve the veteran through the uSPEQ veteran survey instrument jeopardizes the effectiveness, efficiency, and quality of numerous VA programs.

While the VA uses both CARF and The Joint Commission to accredit VA programs and hospitals, respectively, there is very little duplication of effort between these two accreditors. Both are respected accrediting bodies, but they differ in focus and approach. The Joint Commission primarily accredits hospitals, medical centers, and broader healthcare systems, with a particular emphasis on patient safety, clinical care, and medical standards. CARF is more specialized in rehabilitation, behavioral health, and community-based services, focusing on person-centered outcomes, program goals, service delivery, and the quality of life. CARF's standards are developed through consensus by professionals in the various programs to which the standards apply. The standards are designed to meet the needs of *persons served* through a consultative model that has been demonstrated to improve quality through the accreditation process.

Similarly, since 2012, uSPEQ has provided the VA with a scientifically validated tool for collecting veteran-reported data on care experiences and satisfaction. Through uSPEQ, more than 384 VA programs have gathered actionable insights that drive ongoing quality improvement. uSPEQ's veteran experience data help ensure that veterans' voices are not only heard but are central to program evaluation and improvement.

Without CARF accreditation and uSPEQ surveys, consistency and comparability across VHA programs may decline, independent oversight and external validation of program quality will be lost, and veterans' direct feedback will no longer inform system improvements. Simply put, these decisions compromise the VA's ability to demonstrate that veterans are receiving the best possible care. For these reasons, CPR strongly urges the VA to immediately reinstate both CARF accreditation and the uSPEQ survey system. Restoring these accreditation services will reaffirm the VA's longstanding commitment to transparency, accountability, and continuous improvement in the care of our nation's heroes. Veterans deserve a rehabilitation system grounded in independent evaluation, evidence-based standards, and, above all, respect for the veteran's voice.

We appreciate your attention to this matter and for your ongoing commitment to serving those who have served our country. Should you have any further questions regarding this information,

please contact Peter Thomas or Michael Barnett, coordinators of the CPR, by e-mailing Peter.Thomas@PowersLaw.com or Michael.Barnett@PowersLaw.com, or by calling 202-466-6550.

Sincerely,

The Undersigned Members of the Coalition to Preserve Rehabilitation

ACCSES
ALS Association
American Academy of Physical Medicine & Rehabilitation
American Congress of Rehabilitation Medicine
American Dance Therapy Association
American Medical Rehabilitation Providers Association
American Music Therapy Association
American Spinal Injury Association
American Therapeutic Recreation Association
Association of Academic Physiatrists
Association of Rehabilitation Nurses
Brain Injury Association of America*
Center for Medicare Advocacy*
Christopher & Dana Reeve Foundation*
Disability Rights Education and Defense Fund (DREDF)
Falling Forward Foundation*
National Association for the Advancement of Orthotics and Prosthetics
National Association of Social Workers (NASW)
National Council for Mental Wellbeing
RESNA
United Cerebral Palsy
United Spinal Association*

****Indicates CPR Steering Committee Member***

Cc: Steven Lieberman, Acting Under Secretary for Health (Steven.Lieberman@VA.Gov)

Ann Doran, MHSM, MPA, CPHQ, CPHRM, Executive Director, Office of Patient Advocacy (Ann.Doran@VA.Gov)

Carolyn Clancy, MD, Assistant Under Secretary for Health for Discovery, Education and Affiliate Networks (Carolyn.Clancy@VA.Gov)

Anna Norcross, Contracting Officer (Anna.Norcross@VA.Gov)

Jacky Jean-Jacques, Contracting Officer (Jacky.Jean-Jacques@VA.Gov)