



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

Re: Petition for Rulemaking under 5 U.S.C. § 553(e) — 38 C.F.R. § 17.417 — Filed by the Institute for Veterans Health & Social Policy

Mr. Secretary:

Enclosed for the Department's consideration is a Petition for Rulemaking submitted by the Institute for Veterans Health & Social Policy (IVHSP) pursuant to 5 U.S.C. § 553(e). The Petition requests that the Department initiate notice-and-comment rulemaking under 5 U.S.C. § 553 to amend 38 C.F.R. § 17.417 by extending the existing federal licensure preemption framework — presently applicable to Department-employed clinicians — to mental health professionals delivering services to enrolled veterans through the Veterans Community Care Program (VCCP).

The Petition is supported by an IVHSP working paper, *Crossing Lines: Jurisdictional Barriers, Therapeutic Disruption*, and the *Case for Federal Preemption in Veteran Mental Health Care*, enclosed with this transmission and available through the Social Science Research Network and at www.ivhsp.org. A Congressional Policy Brief summarizing the request, transmitted this same date under separate cover to the leadership of the Senate and House Committees on Veterans' Affairs and to one additional Member of the Senate, is also enclosed for the Department's reference.

Filing channel. This Petition has been transmitted to the Department by electronic mail to OEIDMO@va.gov, the address designated under 38 C.F.R. § 5.20(a) for petitions concerning Departmental guidance documents, as the most appropriate available published electronic channel for petitions submitted to the Department. Petitioner respectfully notes that this filing is a petition for rulemaking under 5 U.S.C. § 553(e) seeking amendment of a legislative regulation rather than a § 5.20 petition concerning a guidance document, and respectfully requests that the Department route the filing to the Office of the Secretary and the Office of Regulation Policy and Management as appropriate. Parallel transmission by United States certified mail with return receipt requested is effected by this enclosure.

Statutory framework. The Petition rests on the structural divergence between the federal licensure preemption Congress enacted at 38 U.S.C. § 1730C for Department-employed clinicians and the same Department's

regulatory implementation at 38 C.F.R. § 17.417, which excludes contractor-employed clinicians delivering services to the same beneficiary population under the same federal program authority. Congress has twice enacted analogous preemption frameworks for Department of Defense-served populations — Section 581 of the FY 2024 NDAA and Section 714 of the FY 2025 NDAA, the latter codified at 10 U.S.C. § 1094(d)(4) — without retaining the contractor exclusion that 38 C.F.R. § 17.417 preserves. The Petition demonstrates that the Department's existing statutory authority is sufficient to remove the contractor exclusion by regulation, and that doing so is consistent with congressional intent as reflected in the enacted statutory record.

Requested action and timing. Petitioner respectfully requests that the Department initiate rulemaking within 180 days of this Petition pursuant to 5 U.S.C. § 555(b), and that the Department provide notice of its disposition under 5 U.S.C. § 555(e). The Petition is submitted in good faith, with full citation to the supporting statutory, regulatory, and empirical record, and is intended to assist the Department in addressing a documented continuity-of-care failure within a population the Department has already directed into community-based care because it cannot meet the access standard internally.

I am available at the contact information below to address any procedural question concerning this filing, and to provide any supplementary materials the Department or its Office of General Counsel may find useful in evaluating the Petition on its merits.

Respectfully submitted,



Matthew A. Williams, MPA

Founder & Chief Executive Officer

Institute for Veterans Health & Social Policy

100% Service-Disabled Veteran

Enclosures:

Petition for Rulemaking, 38 C.F.R. § 17.417, filed with the Department of Veterans Affairs (May 13, 2026)

IVHSP working paper, *Crossing Lines: Jurisdictional Barriers, Therapeutic Disruption, and the Case for Federal Preemption in Veteran Mental Health Care* (May 2026) available at <https://ssrn.com/abstract=6744578>.

Congressional Policy Brief, May 2026.

cc:

Members, Senate Committee on Veterans' Affairs

Members, House Committee on Veterans' Affairs

The Honorable John Cornyn, United States Senator