

March 30, 2026

General Services Administration
1800 F Street NW
Washington, DC 20405

Re: OMB Control No. 3090-0290; Docket ID GSA–2026–0001; Sequence No. 2, System for Award Management Registration Requirements for Financial Assistance Recipient (91 FR 3726)

To the Honorable Officials of the General Services Administration:

Thank you for the opportunity to respond to the proposed amendment to the Financial Assistance General Representations and Certifications. Social Current is writing to express our strong concern for the potential impact of the mandated certifications.

Social Current is the premier partner and solutions provider to a national network of nearly 1,600 human and social service organizations. We strengthen community-based organizations and public agencies through accreditation, advocacy, training, technical assistance, and consulting.

Social Current provides COA Accreditation, an independent, international accreditation established in 1977 for human service organizations across more than 45 service areas, including foster care, substance use treatment, mental health, services for the unhoused, and care for older adults. COA Accreditation's value and credibility are formally recognized in over 100 distinct instances across 44 states, the District of Columbia, and British Columbia, Canada.

I. Vague Language Introduces Untenable Legal and Operational Risk

The broad integration of COA Accreditation standards across the human services sector reflects their promotion of organizational excellence, capacity to strengthen service delivery, and ability to support improved outcomes for children, families, and communities. Those standards are developed through a rigorous consensus process with input from service providers, funders, experts, policymakers, and people with lived experience. Accredited organizations are bound by their accreditation agreement to implement these standards as a condition of achieving and maintaining accreditation. Many are simultaneously obligated under state licensing requirements, governmental contracts, and funding conditions that specifically mandate accreditation, such as COA Accreditation.

COA Accreditation standards are aligned with the HHS Office of Minority Health's National CLAS Standards, longstanding federal guidance on culturally and linguistically appropriate services, most recently revised in June 2025 and available on the federal government's Think Cultural Health platform. The CLAS Standards represent a broad federal consensus: SAMHSA's Office of Behavioral Health Equity explicitly requires grantees to adhere to them, and SAMHSA and HHS OMH jointly developed a Behavioral Health Implementation Guide for the National

CLAS Standards to support their adoption across the behavioral health sector. The proposed certifications would place COA-accredited organizations in direct conflict with this longstanding, multi-agency federal consensus that culturally competent practice is essential to quality care.

The implementation of accreditation standards has supported continuous growth across the human services sector, ensuring organizations retain access to the knowledge and skills needed to adopt evidence-based best practices. However, the vague language of the proposed agreements raises essential compliance concerns. The absence of a definition for discriminatory practices, including diversity, equity, inclusion, and accessibility programs, poses an immense risk to the sector.

Without clear definitions to guide compliance, organizations face an impossible choice: either proactively refuse federal funding to avoid the risk of noncompliance or abandon fundamental accreditation standards to safeguard that funding. Either path undermines the sector's ability to deliver quality, evidence-based care. Compounding this, accreditation requirements are woven with state-level legal obligations, meaning organizations cannot simply set aside those standards without triggering a separate set of legal and contractual consequences. The proposed certifications accordingly forge an untenable position that jeopardizes the health and sustainability of the human services sector.

Notably, the proposed certification in Section 6 identifies cultural competence requirements and related practices as potential violations of federal anti-discrimination law. These requirements directly and irreconcilably conflict with COA Accreditation standards. Relevant features of those standards that could conflict with the limitations established in the proposed certification include:

- Ensuring that the governing body represents the interests of the community it serves and functions as an ongoing link between the community and the organization;
- Considering the social factors that can impact health outcomes, including housing, food insecurity, and systems involvement, and incorporating those factors into assessments, treatment plans, and the ongoing delivery and monitoring of care;
- Leveraging quality improvement data to identify and address health disparities;
- Designing and adapting programs and services to accommodate the diverse abilities and spoken languages of people served;
- Training staff on cultural differences among the service population and how to provide culturally responsive services and create inclusive service environments; and
- Requiring that job descriptions include inclusive language and demonstrate the organization's commitment to fair hiring practices and equal opportunity.

The proposed rule's prohibition on the use of race, sex, or other protected characteristics as criteria for employment, program participation, or resource allocation further risks conflict with COA Accreditation standards that require organizations to collaborate with their communities to address unmet needs, advocate for improved access to services, and secure improved supports and accommodations for individuals with special needs and underserved populations.

The proposed rule also creates particular risk for organizations that employ peer support workers; a workforce model widely recognized as essential to effective, recovery-oriented behavioral health care. These roles inherently rely on shared lived experiences, identity-informed trust, and mutuality. The proposed certification could limit how lived experience, targeted recruitment strategies, or notions of representation inform the hiring of peer support

workers, discouraging the continued use of this widely adopted model, which is recognized as critical to effective care.

The guidance fails to offer an exact definition of diversity, equity, inclusion, and accessibility initiatives, raising concerns about whether working with individuals with disabilities, soliciting community feedback, or frameworks like the Person-Centered Logic Model could constitute such initiatives. The uncertainty poses an immense risk, prompting nearly 1,600 human services organizations to consider rejecting all potential initiatives to safeguard federal funding at the cost of failing to adhere to proven accreditation standards.

The liability human services organizations face is especially dangerous because of the possibility of noncompliance resulting in criminal prosecution or civil liability. Inadvertent violations would introduce irreversible damage to an organization's reputation and credibility among donors and federal agencies alike. Additionally, the time required to ensure compliance and address claims risks diverts a nonprofit's limited funds from the critical services it provides in its communities.

The certifications also introduce significant concerns for organizations that offer legal services, humanitarian assistance, or emergency shelter to immigrants. The seventh clause similarly fails to define the meaning of transporting, concealing, harboring, or shielding immigrants without legal authorization. The grave implications of criminal penalties and civil liability similarly introduce immense risk to organizations that serve migrant communities.

Social Current urges the General Services Administration to issue clear, specific guidance to define diversity, equity, inclusion, and accessibility initiatives. Additionally, we request that GSA remove the threat of criminal and civil penalties, which can discourage service providers from seeking the federal funding needed to offer essential community services.

II. Harm to the Human Services Sector and the Communities It Serves

The challenges our communities face directly and gravely affect societal health and well-being. Difficulty accessing stable, sufficient nutrition, housing, health care, child care, and similar essential services has fostered incredible stress and uncertainty. The human services sector has remained a bulwark of trust in our communities, providing vital care to all individuals, regardless of financial status.

Social Current's network of human services organizations delivers essential services to some of the most vulnerable populations in the country, including children in foster care, individuals experiencing homelessness, individuals with behavioral health needs, older adults, and families in crisis. A significant portion of these organizations relies on federal financial assistance as a primary funding stream.

Federal research demonstrates that culturally competent service delivery is essential to achieving positive outcomes for these populations. SAMHSA has identified culturally responsive clinical skills as "vital to the effectiveness of behavioral health services." (Improving Cultural Competence, Treatment Improvement Protocol Series No. 59, HHS Publication No. SMA 14-4849, 2014.) Certification requirements that conflict with established cultural competency standards would directly compromise service quality for the very people these federal programs are designed to serve.

However, many organizations cannot afford the risk of entering into agreements without comprehensive guidance to support compliance. The certifications are expected to create a chilling effect, leading organizations to forgo federal funding to mitigate their liability. Consequently, fewer qualified service providers will apply for federal grants across all program areas, potentially fostering critical service gaps, particularly in rural areas already facing severe workforce shortages. The loss of trusted community partners will have devastating effects, including the loss of profound institutional knowledge and trust. Smaller and mid-sized community-based organizations are likely to be disproportionately affected, as few hold the legal and administrative capacity needed to navigate complex, ambiguous certification requirements.

III. Conclusion & Requested Action

Social Current respectfully asks that GSA withdraw the proposed certification changes in their entirety. Each additional certification is legally unsupported, introduces significant risk and liability, and is deeply harmful to the human services sector and the communities it serves.

If GSA declines to withdraw the proposal, Social Current requests a substantially extended comment period to allow the full breadth of affected organizations, legal experts, and state and local government stakeholders to provide their specialized insight and expertise regarding the proposal's complexity and consequences.

Social Current further requests that GSA convene formal stakeholder consultations with human services organizations, accrediting bodies, and state agencies before finalizing any changes to further address our stated concerns and promote administrative transparency.

Thank you for your time and the opportunity to submit comments. The strength of America's human services infrastructure depends on a stable, accessible, and fairly administered federal funding system. Social Current looks forward to continuing its partnership and collaborative efforts to support the safety and well-being of our communities.



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