

**Congressman Stephen Lynch, MA-8**  
**House Veterans Affairs Committee Member Day Testimony**  
**December 4, 2025**

Chairman Bost, Ranking Member Takano, and Members of the Committee, thank you for the opportunity to testify before you today about a program that is vital to our nation's ability to house and provide services to our veterans experiencing homelessness.

The VA Grant and Per Diem (GPD) Program provides critical assistance to community-based organizations that serve our veterans and support them in attaining and retaining permanent housing. The reimbursements provided under the GPD program are particularly essential for service providers that operate in high-cost housing areas of the country, such as my district of Boston, Massachusetts and the surrounding areas.

As you know, the Senator Elizabeth Dole 21st Century Veterans Healthcare and Benefits Improvement Act of 2025 was signed into law on January 2 of this year, after having passed both the House and Senate with overwhelming bipartisan support. An important provision of this law authorizes the VA to pay community-based Veteran service providers a Grant and Per Diem Program Reimbursement Rate of up to 200% of the State Home Domiciliary Rate for up to 50% of grant recipients.

Earlier this year, after the Dole Act's initial passage, the VA cited concerns about exceeding the GPD Program authorization of appropriations (AoA) if the Act's authorized rates were fully implemented. In response, Congress added language to H.R. 1815, the VA Home Loan Program Reform Act, increasing the AoA for the GPD Program to \$344,000,000 for Fiscal Years 2025 and 2026. H.R. 1815 was signed into law on July 30 of this year.

Unfortunately, after 11 months and Congress having increased the authorization to address the VA's concerns, reimbursements are still not being paid out at this higher authorized rate. While the Department did increase its reimbursement rate from 115% to 133% of the State Domiciliary Rate in September, this still falls far short of Congressional intent laid out in the Dole Act. This failure to implement the Act's requirements has placed community-based, Veteran GPD providers who operate in high-cost regions under considerable financial stress, as they continue to operate and deliver an essential service for Veterans with inadequate reimbursement, well short of actual cost. This rate is unsustainable and could force providers to shut down, leaving already vulnerable veterans literally out in the cold. We cannot allow that to happen. Our veterans deserve better.

I urge the Committee to press the VA to fully implement the full scope of the Dole Act as Congress intended and ensure that Veteran service providers that deliver this critical program can continue to do so without significant financial risk.

Thank you very much again for the time.