



WIOA Needs-Related Payments

Policy Number: 2041

Effective Date: April 1, 2024

A. BACKGROUND

The Workforce Innovation and Opportunity Act (WIOA) provides program guidelines for supportive services for adults, out of school youth (18-24) and dislocated workers defined in WIOA Sections 3(59) and 134(d)(2) and (3). These include services such as transportation, child care, dependent care, housing, and needs related payments needed to enable individuals to participate in WIOA Title I activities. Supportive services may only be provided to individuals who are:

- a) Participating in career or training services as defined in WIOA secs. 134(c)(2) and (3); and
- b) Unable to obtain supportive services through other programs providing such services.

Supportive services only may be provided when they are necessary to enable individuals to participate in career service or training activities (please see [Workforce Snohomish Policy 2040](#) Personal Training Accounts including Support Services for more details). All WIOA-enrolled adults, out of school youth, and dislocated workers are eligible for supportive services as defined in WIOA Section 3(59). The exception is Needs-Related Payment, which are a form of supportive service available only to adults, out of school youth (18-24) and dislocated workers who are enrolled in training.

B. PURPOSE:

To ensure the appropriate use of Needs-Related Payments as an allowable supportive service for WIOA out of school youth, adult and dislocated Worker program participants by Workforce Snohomish and its subrecipients. Per **WIOA regulation § 680.930 § 681.570**, Needs-Related Payments provide financial assistance to participants for the purpose of enabling them to participate in training and are a supportive service authorized by WIOA sec. 134(d)(3). Unlike other supportive services, in order to qualify for Needs-Related Payments, a **participant must be enrolled in training.**

C. ELIGIBILITY REQUIREMENTS

Priority of service applies to the provision of Supportive Services funded with WIOA Title I resources. While any enrolled job seeker may receive Supportive Services, job seekers who meet the priority of services guidelines described in the Workforce Snohomish [Eligibility, Registration and Enrollment policy](#) have priority for these resources over other job seekers.

- a) Adults and OSY ages 18-24 must:
 - a. Be unemployed;
 - b. Not qualify for (or have ceased to qualify for) UI; and
 - c. Be enrolled in a program of training services under WIOA Section 134 (c)(3) for adults and WIOA Section 129(c)(2) for OSY ages 18-24.
- b) Dislocated Workers must:
 - a. Be unemployed;
 - b. Have ceased to qualify for unemployment insurance or Trade Readjustment Allowances (TRA) under TAA;

- c. Be enrolled in a program of training services under WIOA Section 134(c)(3), by the end of the 13th week after the most recent layoff that resulted in a determination of the worker's eligibility as a dislocated worker; or, if later, by the end of the 8th week after the worker is informed that a short-term layoff will exceed six months; or
- d. Be unemployed and not qualified for unemployment insurance compensation or TRA.

If these eligibility requirements are met, individuals may be awarded Needs-Related Payments prior to the start date of training classes for the purpose of enabling them to participate in programs of employment and training services that begin within 30 calendar days (request for NRP prior to training must be approved by subrecipient lead and workforce Snohomish designee).

D. LEVEL OF PAYMENT DETERMINATION

Needs-Related Payments should be provided when it is determined that ongoing resources and income from all other sources are insufficient to support participants. The maximum limit for Needs-Related Payments per WIOA participant per period of participation or 12 months, whichever is greater, is **\$6,000.00**. The maximum bi-weekly (every two weeks) amount is set at **\$600.00**. Needs-related payments will be paid every two weeks upon verification of backup documentation by subrecipients.

If a participant enrolled in training and receiving Needs-Related Payments earns income during a period, that income will be deducted from the NRP amount for the pay period.

- a) For WIOA Adult, Dislocated Workers, and Out of School (OSY) Youth payments must not exceed the greater of either of the following levels:
 - a. The applicable weekly level of the unemployment compensation benefit, for participants who were eligible for unemployment compensation as a result of the qualifying dislocation or;
 - b. If the worker did not qualify for unemployment insurance, the weekly payment may not exceed the Lower Living Standard Income Level (LLSIL) for a participant's family size (<https://www.dol.gov/agencies/eta/llsil>) for an equivalent period. The weekly payment level must be adjusted to reflect changes in total family income, as determined by workforce Snohomish Procedure Number: 2020 C - Low-Income and Self-Sufficiency Guidelines.
 - c. The weekly amount a dislocated worker receives will be calculated using the same process as unemployment benefits in Washington State up to the \$600 bi-weekly maximum. Please follow this link for calculation details: <https://esd.wa.gov/unemployment/calculate-your-benefit>

Any participant successfully enrolled in a WIOA funded training, with the exclusion of OJTs and transitional jobs, may be eligible for Needs-Related Payments. NRP recipients must participate in 20 or more hours per week (unless a written administrative waiver has been granted) of classroom or other occupational or educational skill training components that have a predetermined content, e.g., customized training, Vocational Exploration Program; and

NRP recipients must not have or be a member of a family that provides ongoing income and resources at or above the Needs-Based Payments level.

Weekly payment levels must be adjusted to reflect changes in total family income. Limits may be placed on Needs-Related Payments subject to availability of funds. The above adult, out of school youth and dislocated workers NRP levels will be used after determining need.

No Needs-Related Payments shall be made to participants that fail to meet the minimal amount of 20 hours of training per week. A week may include any combination of training, sick time, vacation or holiday(s) but the minimum 20 hours of training must be met by the participant for the Needs-Related Payment to be generated for that week.

Note: Needs-Related Payments are classified as non-taxable income by the I.R.S.

E. REQUEST AND PAYMENT

All potential sources of income must be included in order to establish financial eligibility for Needs-Based Payments. A review must include both current and prospective family monthly income sources and other current and potential funding resources, including supportive services from another program/partner, e.g., TANF, Pell Grants, etc., and match these to the applicants' need.

Requests for Needs-Related Payments must include:

- Attachment A: Needs-Related Payment Request
- Attachment B: Needs Related Payments Determination Form
- Attachment C: Personal Resource Worksheet

Sub-recipient Lead Responsibilities

- Review all eligibility and assessment documents, and, for those who qualify, forward materials to Workforce Snohomish designated program staff with a recommendation for approval;
- Review and approve all Needs-Related Payments, assure that priority of services is provided, as appropriate;
- Maintain a mechanism for obligating and re-obligating funds;
- Track all Needs-Related Payments expenditures by job seeker;
- Ensure all records of eligibility and associated documents are maintained in case notes, the state's MIS, and the participant file if applicable; and
- Provide any and all Federal, State, County, and Workforce Snohomish monitors and auditors with access to such records given reasonable notice.

Workforce Snohomish Responsibilities

- Workforce Snohomish will ensure that internal controls regarding the issuance of Needs-Related Payments are maintained in accordance with this procedure and the Workforce Snohomish Internal Controls policy;
- Workforce Snohomish designated program staff will approve successful Needs-Related Payments applicants upon verification of eligibility, and availability of funds;
- Once Needs-Related Payments are approved, the documents are forwarded to the service delivery sub-recipient lead to proceed with its fiscal department that handles payments and accounting.

F. DOCUMENTATION REQUIREMENTS

workforce Snohomish's subrecipients must verify and document eligibility for Needs-Related Payments; Workforce Snohomish designated staff overseeing the WIOA Title 1 programs must approve each Needs Related Payment (Needs-Related Payments) application. Documentation must be maintained in the customer files and in the state MIS system. Required documentation include:

- A copy of any UI entitlement decision or confirmation of UI benefits being exhausted will be maintained in each customer file. Or attestation form signed with above information.
- A copy of the requests for training classes for each period of training (quarter, semester, block, class, etc.) will be maintained in each customer file. (A copy of the customers Individual Training Account (ITA) will be used as documentation).
- Verification of enrollment/registration, participation, and completion of training classes (confirmation from training office or course instructor) will be maintained in each customer file. A copy of class schedule will be maintained in each customer files and will be used documentation. Verifications of attendance and training progress will be reviewed before each payment if applicable.
- Each customer determined eligible and receiving Needs Related Payments (Needs-Related Payments) will have signed a copy of to his/her understanding of the requirements and instruction.
- All eligibility will be documented and maintained in the Participant file and in the MIS.

G. FRAUD PREVENTION

To prevent fraudulent payment activity, Workforce Snohomish subrecipients must:

1. Perform a cross check with Trade Act and UI to ensure that participants are not receiving UI, Training Benefits, TRA, and Needs-Related Payments at the same time. Participants cannot receive UI, TB, TRA and Needs-Related Payments at the same time; however, participants may receive them sequentially if they qualify based on needs;
2. Verify training participation before payments are authorized; and, Report fraud to Workforce Snohomish when discovered to begin the collection process from appropriate sources.

3. To verify an individual has exhausted Unemployment Insurance (UI), a copy of the UI entitlement decision or confirmation of UI benefits being exhausted should be obtained. A printout of the current unemployment benefits webpage's screen for the participant will also verify UI is exhausted.

In the event of the discovery of fraudulent activity, all payments to the fraudulent party will cease and all funds paid will be recovered. All cases of fraud or suspected fraud will be forwarded to the appropriate legal authorities for prosecution per WIOA Policy Letter No. 06-PL-28.

Any alleged and suspected fraudulent activity identified by Workforce Snohomish or its subrecipients while monitoring will be reported immediately to the DOL Office of the Inspector General as provided in proposed 20 CFR 683.620.

References:

- [State WIOA Policy 5602 Rev. 5: Supportive Services and Needs-Related Payments](#)
- 20 CFR § 680.950 DW
- 20 CFR § 680.970
- TEGL 19-16 – Guidance on Services Provided Through Adult and Dislocated Worker Programs
- TEGL 21-16 – WIOA Youth Program Guidance

Supersedes:

- Workforce Snohomish Policy 2040: [Personal Training Account \(Including Individual Training Accounts, Supportive Services, Needs Based Payments, Self-Employment Training, And Work Based Learning\)](#)
- Workforce Snohomish Procedure 2040 c: [Procedure for Providing Supportive Services Using a PTA](#)

Attachments:

- Attachment A: Needs-Related Payments Request
- Attachment B: Needs Related Payments Determination Form
- Attachment C: Personal Resource Worksheet
- Attachment D: Attendance Verification Needs-Related Payments

Attachment A - Needs-Related Payments Request

Virtual version: <https://www.cognitofrms.com/WorkforceSnohomish1/NeedsBasedPaymentRequest>

Participant Legal Name:	Participant ETO #:
WIOA Program:	Subrecipient:
Training Start Date	Needs-Related Payments Start Date:
Training Program:	Training Provider:

The maximum limit for Needs-Related Payments per WIOA participant per period of participation or 12 months, whichever is greater, is \$6,000.00. The maximum bi-weekly (every two weeks) amount is set at \$600.00.

Statement of Need:

Subrecipient Lead Name:

Subrecipient Lead Signature

Date

Workforce Snohomish Approver's Name

Workforce Snohomish Approver's
Signature

Date

Needs-Related Payments Requests and Payments

All potential sources of income must be included in order to establish financial eligibility for Needs-Based Payments. A review must include both current and prospective family monthly income sources and other current and potential funding resources, including supportive services from another program/partner, e.g., TANF, Pell Grants, etc., and match these to the applicants' need.

Requests for Needs-Related Payments must include:

- Attachment A: Needs-Related Payments Request
- Attachment B: Needs-Related Payments Determination Form
- Attachment C: Training Support Analysis Form
- Attachment D: Personal Resource Worksheet

Participants approved for Needs-Related Payments are to be paid biweekly upon verification of the following form:

- Attendance Verification Needs-Related Payments

Attachment B - Training Support Analysis Form

Virtual version:

<https://www.cognitofrms.com/WorkforceSnohomish1/NRPAttachmentBTrainingSupportAnalysis>

1. Are you unemployed or have you received notification of layoff?
Yes No
2. Do you currently qualify for UI benefits?
Yes No
3. Do you currently qualify for additional state or extended UI benefits (e.g., Training Benefits)?
Yes No
4. Do you currently qualify for Trade Readjustment Allowances (TRA)?
Yes No
5. Are you receiving any other federal or state income support? *Examples: TANF, Training Completion Aid?*
Yes No
6. Have you considered all other resources available that will help you successfully participate in your full-time training program? *Examples of other resources include, but are not limited to, Pell grants, severance pay, other family income (e.g. spouse's income).*
Yes No
7. Do you need income support beyond these other resources in order to participate in training full-time?
Yes No

Needs-Related Payments are not intended to provide the entire amount of income support you need to complete your training. If you are awarded an NRP, it will be based on this support analysis and the weekly NRP level will be determined by the LWDB. These payments are made to help you while making satisfactory progress while attending school. Needs-Related Payments are subject to your eligibility for the program and total funds available.

All answers and statements are true and complete to the best of my knowledge. I understand that providing untruthful or misleading answers are cause for denial of Needs-Related Payments. Any overpayments or fraud based on my false or misleading answers could result in my repayment of any Needs-Related Payments provided.

Signature: _____ Date: _____

Attachment C - Personal Resource Worksheet Desk Aid

Virtual version:

<https://www.cognitofrms.com/WorkforceSnohomish1/NRPAttachmentCPersonalResourceWorksheetDeskAid>

Monthly Income		Monthly Expenses	
Personal		Rent/Mortgage	
Spouse/Partner		Electricity	
Other Family Members		Heating	
Child Support		Water/Garbage/Sewage	
Social Security		Telephone	
Maintenance/Alimony		Monthly Auto Payments	
Retirement		Day Care	
Workers Compensation		Medical	
Financial Aid		Monthly Credit Card Pymt.	
Unemployment Insurance		Monthly Loan Payment	
TANF		Food	
Food Stamps		Clothing	
Other (explain)		Fuel	
		Public Transportation	
		Various Insurances (explain)	
		Other (explain)	
Total Monthly Income		Total Monthly Expenses	
Participant's Net Income (Income Minus Expenses):			
Participant's Financial Contribution:			

I certify that the above is true and accurate to the best of my knowledge. I further understand that any receipt of support services is contingent upon the availability of funds.

Participant Signature

Date

Case Manager Signature

Date

Attachment D - Attendance Verification Needs-Related Payments

Virtual version:

<https://www.cognitofirms.com/WorkforceSnohomish1/attendanceverificationneedsbasedpayments>

Participant Legal Name:	Shaded Area for Staff Use	
Address:	Training Period Start Date:	
City:	Training Period End Date:	
Participant Phone Number:	Payment Amount:	
Training Provider	Subrecipient Lead:	
Training Provider Phone Number:	Participant Cumulative Total:	

Check if address has changed.

Write in the **number of authorized hours** spent in class.

	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday
Date							
Hours							
Date							
Hours							

1. In the above two weeks, did you attend all of your scheduled classes? Yes No

2. Did you make satisfactory progress in all classes? (As defined in your signed Classroom Responsibilities) Yes No

3. If you were on a scheduled break from training, provide dates of the break:

4. During the above two weeks, did you work? Yes No
 If Yes, number of hours worked: _____ Gross earnings: \$ _____

5. During the above two weeks, will you claim any Unemployment Insurance Benefits? Yes No

6. Are you receiving income from any sources that were not available at the time of your application? Yes No
 If Yes, amount: \$ _____ Source of income: _____

Please use this space to explain "No" answers to questions 1 and 2

I certify the above answers are correct to the best of my knowledge. I understand that penalties are provided for willful misrepresentation made to obtain financial assistance for which I am not eligible.

Signature of Student: _____ Date: _____

Training Facility Certification

Information provided by the student in the above section regarding attendance and satisfactory progress appear complete and correct to the best of my knowledge.

Authorized Signature: _____ Date: _____