



# Workforce Issuance

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**100 DCS 06.104**

☒ Policy ☐ Information

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**To:** MassHire Workforce Board Chairs  
MassHire Workforce Board Directors  
MassHire Career Center Directors  
MassHire Fiscal Officers  
MDCS Operations Managers

**cc:** WIOA State Partners

**From:** Diane Hurley, Acting Director  
MassHire Department of Career Services

**Date:** February 4, 2025

**Subject:** **Disaster Recovery - Dislocated Worker Grants to Address the Opioid Crisis**

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**Purpose:** To provide guidance to the MassHire Workforce Boards, MassHire Career Center Operators and other local workforce partners who are operating projects awarded through the Department of Labor (DOL) Employment and Training Administration (ETA) Training and Employment Guidance Letter (TEGL) No. 4-18, *National Health Emergency Phase Two: Disaster Recovery National Dislocated Worker Grants to Address the Opioid Crisis*.

The ETA applies the statutory and regulatory requirements of the National Dislocated Worker Grant Program disaster grants (Disaster Recovery DWGs) to the unique challenges of the opioid crisis. This guidance is applicable to project operators who have obtained Disaster Recovery DWGs to create disaster-relief employment as well as employment and training activities, including supportive services, to address economic and workforce impacts related to widespread opioid use, addiction, and overdose.

**Background:** The United States faces an ongoing health crisis due to widespread abuse of and addiction to prescription opioid painkillers, as well as illicit opioids. According to the Centers for Disease Control and Prevention, deaths from drug overdoses in the US more than tripled from 1999 to 2015, with this increase driven by dependency and addiction to opioid painkillers. For some, addiction to prescription opioids has led to abuse of heroin, an illegal opioid that in some circumstances can be cheaper and easier to obtain.

Under WIOA, DOL has discretion to award Disaster Recovery DWGs, which are grants aimed at reducing the workforce impacts of federally declared disasters through employment and training activities for dislocated workers and temporary employment opportunities assisting disaster-relief efforts. Disaster Recovery DWGs will create temporary employment opportunities aimed at alleviating humanitarian and other needs created by the opioid crisis. Grantees also may use these funds to provide services to reintegrate into the workforce eligible participants affected by the crisis and train individuals to work in mental health treatment, addiction treatment, and pain management.

Successful Opioid Disaster Recovery DWG projects will:

- Facilitate community partnerships that are central to dealing with this complex public health crisis;
- Provide training that builds the skilled workforce in professions that could impact the causes and treatment of the opioid crisis: addiction treatment, mental health, and pain management;
- Ensure the timely delivery of appropriate, necessary career, training, and support activities to dislocated workers (including displaced homemakers), individuals temporarily or permanently laid off due to the opioid crisis, long-term unemployed individuals, and self-employed individuals who are unemployed or significantly underemployed as a result of the opioid public health emergency—including individuals in these populations who have been impacted by opioid use, to promote successful reemployment; and
- Create temporary disaster-relief employment that addresses the unique impacts of the opioid crisis in affected communities.

Coordination strategies among Local Workforce Development Boards and American Job Centers (MassHire Workforce Boards and MassHire Career Centers) with DWGs operating in their communities may include:

- Co-enrollment of DWG participants into Dislocated Worker program for ongoing career and training services, if needed upon completion of DWG services. Local areas **must** also coordinate dislocated worker service strategies with their DWG to ensure alignment of supportive service policies.

- Referral to and co-enrollment of Disaster DWG participants into Adult and Dislocated Worker programs for services such as assessments, career and training services where these services are not part of the DWG project.
- Coordination with Trade Adjustment Assistance (TAA) where DWG participants are also TAA certified or awaiting TAA certification. Specific information about the allowable activities in coordination with TAA was previously outlined in [TEGL No. 2-15](#).
- Coordination between the American Job Center and Veterans' programs for DWGs serving military service members. Additional information about this type of DWG was previously outlined in TEGl No. 2-15.

**Policy:**

*National Health Emergency Phase Two: Disaster Recovery National Dislocated Worker Grants to Address the Opioid Crisis* is another means to address the opioid crisis creating temporary employment opportunities aimed at alleviating humanitarian and other needs created by the opioid crisis. Funds may be used to provide services to reintegrate into the workforce eligible participants affected by the crisis and train individuals to work in mental health treatment, addiction treatment, and pain management.

**Eligible Participants:** participants must meet the following WIOA eligibility criteria as well as one of the Disaster Recovery DWG criteria:

Under WIOA –

1. A citizen or national of the United States, lawfully admitted permanent resident alien, refugee, asylee, parolee, or other immigrant authorized by the Attorney General to work in the United States.
2. In compliance with the Military Selective Service Act (WIOA Sec. 189(h)). This applies to males 18 or older who were born on or after January 1, 1960.
3. The Jobs for Veterans Act (JVA), Public Law 107-288 Title 38, U.S.C S4215 requires all recipients and sub-recipients of DOL funds to provide Priority of Services to Veterans and eligible spouses.

Individuals eligible to receive services through a **Disaster Recovery DWG** must also be one of the following:

1. A dislocated worker;
2. An individual temporarily or permanently laid off as a consequence of the disaster or emergency;
3. A long-term unemployed/not employed individual (defined for this Disaster DWG as 27 weeks in aggregate during the prior 24 months); or
4. A self-employed individual who became unemployed or significantly underemployed as a result of the emergency or disaster.

Eligible participants for opioid-crisis Disaster Recovery DWGs are not required to have a history of opioid abuse or otherwise be personally affected by the opioid crisis to participate in grant-funded employment, activities, and services. However, to the extent that eligible participants are impacted by the opioid crisis, grantees must not reject or otherwise negatively treat participants who do have a history of opioid abuse or are otherwise personally affected (Section 14 of TEGL 4-18).

Participants' disclosure of impact by the crisis must be voluntary. Operators may ask participants if they have been affected by the crisis as part of the process of determining what supportive services and other needs the participant may have, but these inquiries must comply with the requirements described in Section 14 of TEGL 4-18. Operators cannot require participants to disclose whether they have been impacted by the opioid crisis as a condition of their participation in grant-funded employment, activities, and services. **In all cases, participant information regarding voluntary disclosure of impact by the opioid crisis is to be kept confidential, MOSES notes must be entered as confidential and all precautions taken to ensure they are NOT exposed for review.**

Medical information must be kept confidential even if the individual volunteers the medical information without being asked. Information regarding an individual's disability is included in information that must be kept confidential, but any medical information obtained must be kept confidential (whether or not the individual has a disability).

### **Grant Activities:**

#### Disaster-Relief Employment

Operators must provide disaster-relief employment aimed at alleviating the issues caused by the opioid crisis in affected communities. Participants in these employment opportunities also may be co-enrolled in employment and training activities and receive supportive services. Individual enrollment in temporary employment is limited to 12 months (or 2,040 hours) unless the grantee requests an extension of up to an additional 12 months through a grant modification, and the Secretary of Labor grants such an extension. Requirements for disaster-relief employment activities responding to the opioid crisis are described below.

#### Employment and Training Activities

In addition to creating disaster-relief employment, operators may provide employment and training activities to participants, both those who are and those who are not enrolled in disaster-relief employment. Participants may be enrolled in:

- Disaster-relief employment only;
- Employment and training activities only; or
- Both disaster-relief employment and employment and training activities. These may occur concurrently, or one may occur prior to the other.

Operators must assess and determine the specific needs of each individual participant and enroll them in disaster-relief employment, employment and training services, or both, in a manner that is most likely to result in successful outcomes. As a general goal, employment and training activities should be aimed at allowing participants to obtain unsubsidized, sustainable employment following the conclusion of grant-supported activities.

One or both of the following approaches are allowable under this grant:

- Reintegration of eligible participants who volunteer that they have been impacted by the opioid crisis according to the procedures of Section 14 (TEGL 4-18). Reintegration activities include career, training, and supportive services.
- Providing career, training, and supportive services to eligible participants aimed at boosting the number of qualified professionals in fields that can have an impact on the crisis. The Department has determined that the following are fields that can have an impact on the opioid crisis: addiction treatment, mental health treatment focused on conditions that can lead to or exacerbate opioid addiction, and pain management services and practices that the applicant demonstrates could help reduce or avoid prescription painkiller addiction. Allowable activities can include the training of eligible participants in medical and public health professions on services and techniques within the fields of addiction treatment, mental health treatment, and pain management, with the ultimate goal of preparing medical and public health professionals to help impact the causes of the opioid crisis. Operators may provide career and training services for other professions including, but not limited to, medical and health professions not encompassed in the three categories above, but only if they listed in the DWG application the additional in-demand professions for which training is planned and demonstrated that those professions and that training in these professions will mitigate the underlying circumstances of the opioid crisis in the affected communities. Individuals personally affected by the opioid crisis can participate in these career and training activities.

Operators may provide the following services so long as they comply with the requirements set out for these services in WIOA, the relevant WIOA regulations, and [TEGL 19-16](#):

**Career Services** – Career services include training and job placement assistance to aid participants in finding and filling jobs in identified emerging or high-

demand sectors. Allowable career services are described in detail in TEGL No. 19-16. Some examples of allowable career services include:

- Soft skills such as punctuality, personal maintenance skills, and professional conduct;
- In-depth interviewing and evaluation to identify employment barriers and development of individual employment plans; and
- Career planning (that includes a career pathway approach), job coaching, and job matching services.

**Training Services and Work-Based Training Models** – Allowable activities include but are not limited to:

- Traditional classroom training funded through Individual Training Accounts (ITAs), including apprenticeship programs on the state's Eligible Training Provider List; or
- Connecting businesses and eligible participants to on-the-job or customized training programs and apprenticeships to help facilitate reemployment.

**Supportive Services** – Supportive services are a broad range of services that help ensure individuals can participate in employment and training activities or temporary disaster-relief employment. Supportive service delivery must comply with any state and local supportive service policies. These services may include but are not limited to:

- Purchase and provision of items necessary for participants to perform disaster-relief employment;
- Healthcare, mental health treatment, addiction treatment, or other forms of outpatient treatment that may impact opioid addiction and related, underlying, or complicating conditions;
- Additional services needed to facilitate post-training employment of participants impacted by the opioid crisis;
- Linkages to community services, including services offered by partner organizations designed to support grant participants;
- Assistance with childcare and dependent care; and
- Payments and fees for employment and training-related applications, tests, and certifications.

MassHire Workforce Boards, in consultation with local chief elected officials, must establish operating policies and procedures consistent with the guidance provided herein.

The Massachusetts Opioid National Health Emergency Dislocated Worker Grant Project includes the following elements:

**Worksite Agreement and Addendum**– Each approved worksite will enter into a worksite agreement with the designated Employer of Record for this project. The Primary Operator will be the conduit to the Worksite Agreement process and will orchestrate signatures (Attachment B and C).

**Single Point of Contact Designation** – Each MassHire local area must designate a primary and a backup single point of contact (SPoC) responsible for activities undertaken in conjunction with this project for the local area. MassHire local areas must also designate a SPoC responsible for the ITA/OJT component of the project. The MassHire SPoCs will recruit, assess for eligibility, vet and refer candidates, ensure appropriate MOSES registration and worksite monitoring.

**Eligible Participant(s)** - Guidance for determining grant eligible participants is included in Attachment A.

**Master Agreement** – The fiscal agent for the local area participating in this project must enter into a Master Agreement with Primary Operator.

**Worksite Agreement Addendum** – A worksite agreement addendum (Attachment C) will be completed for each eligible individual matched with a worksite and hired for this project. The MassHire SPoC will be the conduit to the addendum process and will orchestrate signatures and confirm eligibility. The Primary Operator will verify eligibility, ensure the Worksite Agreement and Addendum(s) are fully executed and track MassHire customers that have been hired.

**Monitoring** – Each worksite and temporary worker (grant participant) will be subject to at least one monitoring visit (in-person or virtual) by the MassHire Career Center (Attachment D)

**Support Services** - For the MA Opioid NHE DWG, supportive services are allowable for participants to participate in temporary employment and/or career and training services. Support services and job-related items may be provided on a case-by-case determination.

Any other Support Services that may be necessary for the completion of a work assignment or participation in career and training services may be available to eligible participants based on funding availability and in accordance with the pertinent local area's Support Services Policy.

These Support Services will be paid “up front” by the local area either to the individual directly or to a third-party provider in a manner consistent with the area's local policy. The local area shall subsequently invoice the appropriate

MassHire Workforce Board for support services reimbursement. Please refer to Attachment H for the invoice template.

Local areas may provide the following services so long as they comply with the requirements for these services as described in WIOA, the relevant WIOA regulations, and [TEGL 19-16](#):

**Training Services and Work-Based Training Models** – Allowable activities include but are not limited to:

- **ITA:** traditional classroom training funded through Individual Training Accounts (ITAs), including apprenticeship programs on the state’s Eligible Training Provider List; or
- **OJT:** connecting businesses and eligible participants to on-the-job training programs and apprenticeships to help facilitate reemployment.

*Please refer to OJT Policy 100 DCS 07.101.1, located here:*

<https://www.mass.gov/doc/on-the-job-training-ojt-0/download>

*Note: Local Boards that elect to increase the wage reimbursement levels above 50% or up to 75% must document the factors used and the process to determine the reimbursement rate in local policy.*

See Master Agreement (Attachment G) Addendums A-C for detailed description of the Project elements associated with each training model.

### **Tracking Participants in MOSES**

MCC staff must enter participant data in MOSES for individuals enrolled in the grant.

In accordance with the Stevens Amendment, the following needs to be on all products developed in whole or in part with grant funds:

*“This workforce product was funded by a grant awarded by the U.S. Department of Labor’s Employment and Training Administration. The product was created by the recipient and does not necessarily reflect the official position of the U.S. Department of Labor. The Department of Labor makes no guarantees, warranties, or assurances of any kind, express or implied, with respect to such information, including any information on linked sites and including, but not limited to, accuracy of the information or its completeness, timeliness, usefulness, adequacy, continued availability, or ownership. This product is copyrighted by the institution that created it.”*



This policy guidance is subject to revision by MDCS and as additional guidance is issued from the U.S. Department of Labor.

**Action**

**Required:** Please assure all MassHire Career Center Operators, Staff and Partners are notified of this policy and take necessary steps to ensure compliance with its content.

**Effective:** September 14, 2018

**Inquiries:** Please forward any inquiries to [PolicyQA@mass.gov](mailto:PolicyQA@mass.gov).

**Attachment:**

- A. Project Eligibility Template
- B. Worksite Agreement
- C. Worksite Addendum
- D. Worksite Review / Monitoring Visit
- E. Disaster Recovery DWG Overview
- F. Interest in Temporary Recovery Jobs Form
- G. Master Agreement
- H. Support Services Cash Request Form
- I. Temporary Employment Cash Request Form
- J. Eligibility Documentation Verification Methods

**References:** [TEGL 4-18](#), National Health Emergency Phase Two: Disaster Recovery National Dislocated Worker Grants to Address the Opioid Crisis, September 14, 2018 (Rescinded)  
[TEGL 16-16](#), One-Stop Operation Guidance for the American Job Center Network Workforce Innovation and Opportunity Act (WIOA) Sec. 170 – *National Dislocated Worker Grants*  
20 CFR - Federal Register / Rules and Regulations Part 687  
[TEGL 12-19](#), National Dislocated Worker Grants Program Guidance (Rescinded)  
[TEGL 19-16](#), Operating Guidance for the Workforce Innovation and Opportunity Act