



Navigating Changes in Refugee Support Services (RSS)

Guidance for RSS Program Administrators

Refugee Support Services (RSS) administrators must operate RSS programs in accordance with [ORR requirements](#) and [federal guidelines](#) while tailoring programming to meet the distinct needs of their communities. This includes making decisions about operating models, subrecipient awards and reimbursement, and allowable services for each program. To maintain compliance and ensure continuity of care in Fiscal Year 2027 (FY27), RSS administrators will need to implement key operational and programmatic changes outlined in this guide.

What is RSS?

Refugee Support Services (RSS) is an employment-focused program funded by the Office of Refugee Resettlement (ORR). RSS programs help [ORR-eligible populations](#) achieve economic self-sufficiency. A newcomer is considered [self-sufficient](#) when their income allows them to meet their basic needs without relying on cash assistance. To support this goal, RSS programs provide employability support and services that address barriers to employment such as English language instruction and social adjustment support.

RSS Operating Models

States determine who implements RSS programming using one of two operating models:

- **State Agency Direct Administration** where the state retains full oversight over program design and resource allocation.
- **State Agency Administration in Partnership with a Nonprofit** Organization Public-Private Partnership that allows the state to maintain oversight but pass funding through to a private nonprofit organization (such as the former RD) to implement the program.

Partnering with Nonprofit Organizations

Beginning in 2008, when individual states withdrew from administering all or part of the refugee resettlement program, ORR appointed nonprofit Replacement Designees (RDs) to assume responsibility. These nonprofits took over the administration of RSS formula funding and other essential refugee services for the withdrawing states.

In FY26, ORR stopped granting RSS funds to RDs. Former RDs still operate RSS in some states using funds from FY25, which must be spent by the end of FY27, or are administering RSS in partnership with the state.

If a state government declines to administer the refugee program, ORR can no longer redirect RSS formula funding to a non-state entity. In those states, similar employment-related support will be provided through the [Wilson-Fish Bridge to Employment Program \(WF B2E\)](#). Under WF B2E, recipients of Refugee Cash Assistance will receive some required services previously available under RSS, including employment training, job placement, and job retention support.

Subrecipient and Reimbursement Models

States also decide how subrecipients are selected to deliver RSS services. States may use:

- **State-Established Formula Suballocation**, where funding is distributed based on the total number of newcomers arrived and served over a set period.
- **Competitive Award Process**, which occurs when the state publishes issues a Request for Proposal (RFP) and providers submit plans on how they intend to deliver high-quality, cost-efficient services.
- **Noncompetitive, Single-Source Award**, which funds specific organizations to address specialized service needs or deliver emergency programming.

States also choose how RSS providers are reimbursed:

- **Fee-for-Service model**: providers are reimbursed at a set rate for each specific service provided.
- **Cost-Reimbursement model**: providers are reimbursed all actual and reasonable program operating costs.
- **Performance-Based model**: providers are reimbursed for meeting specific outcomes.



New York: A Hybrid Reimbursement Model

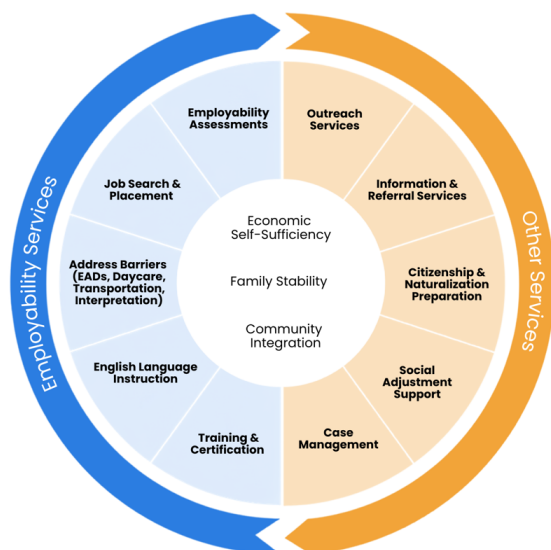
The Bureau of Refugee and Immigrant Assistance (BRIA) in the New York State Office of Temporary and Disability Assistance (OTDA) operates a state-administered, competitive procurement process and a blended cost-reimbursement and performance-based model.

At least 40% (up to 100%) of each sub-grantee award is reimbursed based on achieving performance outcomes, while up to 60% may be reimbursed on an expenditure basis. This blended approach helps address fluctuations in refugee arrivals and program enrollment while allowing subgrantees to maintain the capacity needed to serve newcomers during periods of lower enrollment.

- **Hybrid Reimbursement Model**: states blend different reimbursement models.

Allowable RSS Services

ORR divides allowable RSS services into “**Employability Services**” and “**Other Services**.” States are required to follow [federal definitions of allowable services](#) when choosing which services to provide. The diagram below shows how RSS programming advances its overall goals through employability services and other supportive services:



Historically, ORR provided two sources of funding for RSS programming: **base funds** and **set-aside funds**. Base funds are distributed to states through a RSS formula allocation to support general employment and self-sufficiency services, while set-aside funds were designated for specific populations and programs (e.g., Refugee Health Promotion, Refugee School Impact, Youth Mentoring, and Services for Older Refugees) before being discontinued by ORR in FY27.



State Spotlight

North Dakota: A Cost Reimbursement Model

The Office of Refugee Services within North Dakota Health and Human Services administers the state's refugee resettlement program through a competitive procurement and cost-reimbursement model. This approach allows the state to strategically allocate resources based on program priorities, service needs, and identified gaps. North Dakota has shifted from primarily funding traditional case management toward investing in specialized services and providers with expertise in specific areas of refugee integration. As part of this transition, case management is now delivered virtually, and employment services are provided through the state's workforce centers. Since this transition, North Dakota has experienced over 50% increase in employment rates, expanded the employer pool, and increased access to career advancement opportunities through apprenticeships, On-the-Job Training, and other workforce development opportunities supported through the Workforce Innovation and Opportunity Act (WIOA)

The transition to virtual case management has also allowed North Dakota to direct resources toward emerging and unmet needs within refugee communities. This includes investment in transportation assistance and stronger partnerships across state and community-based systems. These partnerships have expanded access to health education and other support services while helping address barriers that may affect successful integration.

RSS Base Funds

To determine funding levels for RSS base programs, ORR applies a formula based on the number of ORR-

eligible individuals served over the previous two fiscal years. RSS base funding can be used to provide:

- **Employability services** covering allowable supports that help clients prepare for employment, secure a job, remain employed, and advance in their career. Allowable employability services include skills and aptitude assessments; job search and placement support; on-the-job training (OJT) and vocational training (including driver education); skills recertification support; English language instruction; and employability-related case management. Certain supports that address employment barriers are also allowed, like transportation, translation and interpretation, childcare, and helping a client obtain their Employment Authorization Document (EAD).
- **"Other" services** covering allowable supports that promote family stability and community integration. These include outreach services (to familiarize eligible populations with available supports); information and referral services; citizenship preparation and naturalization support; and social adjustment support (which can include emergency-, health-, and home management-related services). States may request approval from the ORR Director to deliver other services promoting self-sufficiency, family stability, and community integration, provided no alternative funding sources exist.
- **Direct, short-term basic needs assistance** to address [immediate housing and food needs](#) that may otherwise undermine a client's stability and progress toward self-sufficiency. This can include housing assistance and short-term food assistance when other resources are unavailable.

Need help supporting staff and clients through program transitions? Switchboard has many resources on navigating change:

- [Meeting the Moment: Sustaining Your Team Through Staff Transitions](#)
- [Supporting Newcomer Clients and Staff Through Service Disruptions](#)
- [Advancing State-Level Refugee Services](#)

Changes to RSS Set-Aside Funds

No new funding will be allocated for [RSS set-aside programs in FY27](#). However, some states may continue offering set-aside-funded services using previously awarded funds. States may also transition certain activities to RSS base funding if they meet RSS requirements. For example, naturalization support previously funded through Services for Older Refugees could be proposed under RSS base funding because it fits an existing allowable service category. Additionally, states can request ORR approval to offer additional services not currently included in the federal definitions of allowable services. The activity must be included in the state's RSS plan, and RSS funds must continue to be used primarily for employability services.



State Spotlight

Georgia: A Fee-for-Service Reimbursement Model

The Office of Refugee Services within the Georgia Department of Human Services operates a state-administered, noncompetitive award, and fee-for-service model.

Under the fee-for-service model, Georgia can continue funding a service even when it serves a small number of newcomers. This approach allows the state to maintain most services previously funded through set-asides as part of its base programs.

Each year, administrators meet with providers and newcomers to assess which services remain needed and to identify emerging needs. This feedback process helps Georgia respond to changing needs.

Conclusion

RSS administration varies across states. States determine their own operation models, subrecipient award and reimbursement processes, and allowable services for each program. While each of these variations complies with federal guidelines, states must outline their specific choices in an annual State Plan submitted to ORR for formal approval.

As RDs stop administering RSS, local providers can expect to experience shifts in their state's operating model and allowable services.

At the same time, the administration of initial resettlement services is also undergoing a major structural shift. Throughout FY27, states will assess their capacity to administer the Program of Initial Resettlement (PIR), as ORR and state agencies explore how a state-centric model can avoid service duplication and promote a seamless transition from a newcomer's first 90 days to their long-term integration.

Resources

[Refugee Program Bureau Policy](#): These policy and guidance letters from ORR ensure administrators maintain compliance with federal guidelines.

- [Policy Letter 16-01](#)
- [State Letter 07-08](#)
- [Policy Letter 25-04](#)
- [Dear Colleague Letter 26-02](#)
- [Dear Colleague Letter 25-15](#)

[Report Forms](#): These reporting forms for ORR federal grants outline all applicable program requirements.

[Refugee Cash Assistance \(RCA\) Guide](#): This Switchboard guide outlines federal requirements for RCA and shares how states can tailor their RCA program to meet the unique needs of their communities.

[Advancing State-Level Refugee Services Blog](#): This Switchboard blog explores strategies for managing change, preserving service continuity, and building organizational readiness.

To learn more about
Switchboard, visit
www.SwitchboardTA.org.



The IRC received competitive funding through the U.S. Department of Health and Human Services, Administration for Children and Families, Grant #90RB0053. The project is 100% financed by federal funds. The contents of this document are solely the responsibility of the authors and do not necessarily represent the official views of the U.S. Department of Health and Human Services, Administration for Children and Families.