

## Serving Unemployment Insurance Claimants During a Public Health Crisis: *The Reemployment Services and Eligibility Assessment (RESEA) Program and the COVID-19 Pandemic*

Since March 2020, the COVID-19 pandemic has had devastating effects on the U.S. economy.<sup>1</sup> The unemployment rate initially rose dramatically, as did the number of workers applying for Unemployment Insurance (UI) benefits. The pandemic has greatly affected not only UI programs across the nation but also participation in and operation of the U.S. Department of Labor’s (DOL’s) **Reemployment Services and Eligibility Assessment (RESEA) program**, which serves UI claimants’ reemployment needs and safeguards UI program integrity by helping ensure that claimants are meeting their continuing eligibility requirements.

Prior to the start of the pandemic (and since), state RESEA programs had been implementing new provisions from legislation passed in February 2018, as part of the Bipartisan Budget Act of 2018.<sup>2</sup> This legislation substantially increased funding for RESEA. It also introduced requirements that RESEA funds be allocated “only for interventions demonstrated to reduce the number of weeks for which program participants receive unemployment compensation.” To understand the effects of the new provisions on RESEA program operations and service delivery, in September 2018, DOL sponsored a study of how states were implementing RESEA.<sup>3</sup>

Before the pandemic, RESEA services were most often provided in local American Job Centers (AJCs). Pandemic-related public health measures including social distancing and temporary closures forced many states to suspend in-person services and led them to rapidly develop and implement capacity to provide RESEA services remotely.

This brief explores how the pandemic affected the RESEA program, including how extensively the pandemic interrupted RESEA operations, how states changed service delivery strategies to maintain or restore program operations, and the extent to which those changes could continue post-COVID.

### Key Findings

From March 2020 through May 2021:

- Pandemic-related layoffs caused new UI claims to surge. State and local agencies reassigned many staff to process the surge who would otherwise have conducted RESEA meetings. This left fewer staff to provide RESEA and other services to claimants.
- Since March 2020, three-quarters of state RESEA programs had temporarily suspended operations in response to the pandemic. However, states worked quickly to resume modified versions of their RESEA program. Within a year, all states but one had restarted their programs.
- Early in the pandemic, the number of claimants served by RESEA programs declined sharply.
- RESEA operations had recovered by late 2020, but the number of RESEA meetings scheduled and completed remained well below pre-COVID levels.
- In response to the pandemic, most states shifted from in-person meetings to phone and/or videoconference meetings to deliver RESEA services safely. Four-fifths of states reported that initial RESEA meetings typically occurred remotely by phone.
- During the pandemic, states made few changes in how they selected claimants, when they selected claimants, and the timing of the initial meeting; a few states reported changes to work search review.
- Phone and videoconference meetings and virtual delivery of services (such as virtual job fairs) seem likely to remain as features of RESEA.

Findings in this brief are based on information collected between February 2020 (pre-COVID) and May 2021. The findings draw on two data collection efforts:

- Three **nationwide surveys** of state RESEA administrators—the first (Wave 1) in February-March 2020 (pre-COVID), the second (Wave 2) in October-November 2020, and the third (Wave 3) in March-May 2021.<sup>4</sup>
- **Telephone interviews** with UI, RESEA, and other workforce agency staff from 10 states and 20 local areas conducted between August and December 2020.<sup>5</sup>

The study team supplemented those data sources with performance metrics reported by states to DOL that are published in the Employment and Training Administration (ETA)'s 9128 reports.

## The RESEA Program

The UI program provides cash benefits to qualifying unemployed workers. Created in 2015, the RESEA program aims to help selected UI claimants<sup>6</sup> return to work more quickly and to reduce improper payments.<sup>7</sup> Since 2015, DOL has provided annual grant funds to states to support RESEA program implementation and operations. States are not required to operate RESEA programs, but as of the start of our data collection in February 2020, forty-seven (47) states, the District of Columbia, Puerto Rico, and the Virgin Islands (hereafter all referred to as “states”) did so.<sup>8</sup>

The RESEA program's core activity consists of at least one and as many as three **meetings** between a claimant and RESEA staff. Consistent with the program's name, the initial meeting includes (1) “**reemployment services**” such as referrals to services available through the workforce system and (2) an “**eligibility assessment**” to review the claimant's ongoing eligibility to receive unemployment compensation. Subsequent meetings, if any, also include eligibility assessments and may include provision of additional reemployment services. Consistent with the mandatory nature of the RESEA meeting, claimants who do not attend when instructed to do so also are referred for adjudication and possible loss of benefits (though specifics of the process and consequences for non-attendance vary across states).

## Pandemic-Induced Challenges

Program staff reported that the pandemic introduced *two key implementation challenges* for their RESEA program operations, starting in March 2020.

### A Note on Study Limitations

The data used in this brief have several limitations:

- **Data aim to describe program implementation**, and so do not intend to, and cannot, establish the impact of new statutory requirements and DOL guidance on the design and implementation of RESEA programs, or on claimant outcomes (e.g., weeks of UI benefit receipt and earnings).
- **Some findings may not be entirely representative.** The survey and administrative sources do cover nearly all states, barring a few that had not yet filed DOL Employment and Training Administration reports for all quarters or that did not respond to one or more survey waves. Staff interviews, however, covered only 10 states and 20 local areas. Those states were chosen through a random process that was structured to produce diversity in region and size, but the resulting sample may not be strictly representative. Within a state, the two local areas where interviews were conducted were chosen largely at the discretion of state RESEA staff and may not be representative of all local areas within those states.
- The telephone interview responses reflect **subjective perceptions** of staff. The experiences of RESEA participants may differ. The study did not interview RESEA participants.

- ❖ **Challenge #1: Fewer Staff to Administer RESEA. Pandemic-related layoffs caused UI applications to surge. State/local agencies reassigned staff who previously conducted RESEA meetings to instead process the avalanche of applications. This left fewer staff to provide RESEA services to claimants.**

Between March 14 and April 4, 2020, initial weekly UI claims increased nearly 25-fold (from 251,416 to 6,211,406).<sup>9</sup> Almost 19 percent of the entire U.S. labor force received first-time regular state UI payments in 2020. In 2020, some 31 million regular UI first-time payments were processed, compared with 28 million regular UI first-time payments processed during 2015-2019.<sup>10</sup> These record high initial claim filings were beyond the capacity of staff who normally processed UI claims. Many staff who normally provided workforce services—including conducting RESEA meetings—were temporarily reassigned to process the incoming claims.

- ❖ **Challenge #2: Closures of Facilities and Temporary Suspension of RESEA Services. In response to the pandemic, state and local workforce agencies, including those administering UI and RESEA, imposed physical distancing measures and temporarily suspended in-person meetings, including delivery of RESEA services.**

Before the pandemic, nearly all RESEA programs (93 percent) held most initial and subsequent RESEA meetings in person, usually at AJCs. Beginning in mid-March 2020, many AJCs and other physical locations where RESEA sessions are conducted closed fully or partially to in-person customer services.<sup>11</sup> In response to fewer staff and temporary building closures, RESEA programs rapidly modified their service delivery approach to include remote and virtual service delivery, as discussed in the “Responses” section below.

## Extent of Interruptions to RESEA Operations

- ❖ **Temporary Suspensions to RESEA Program Services. Three-quarters of state RESEA programs surveyed reported temporarily suspending operations starting in March 2020, in response to the pandemic.**

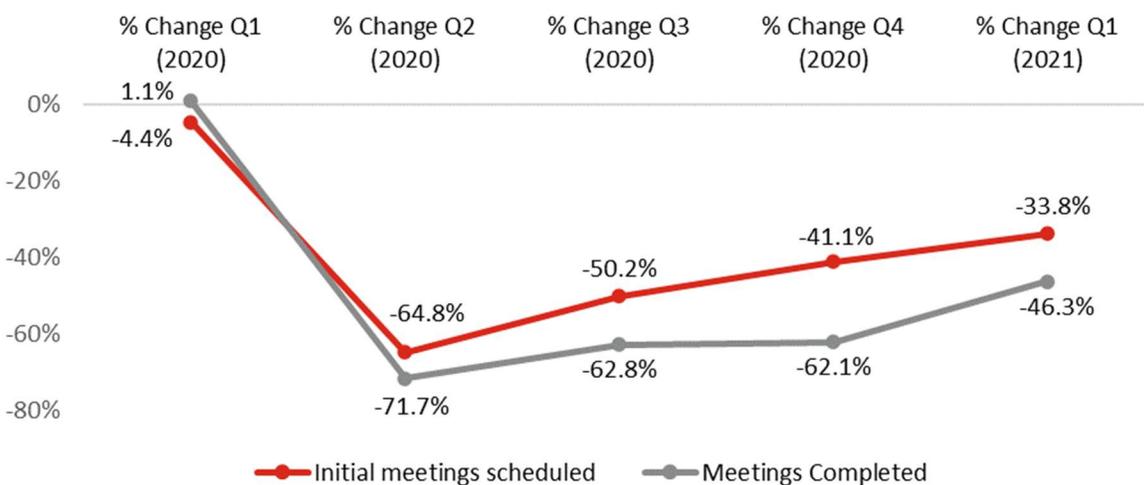
Most states that suspended their RESEA programs did so beginning in mid-March 2020, coinciding with the closure of their AJCs for in-person services. Among the 45 states that responded to both the Wave 2 and Wave 3 surveys, 34 states (75 percent) had suspended their programs at some point. All but one of these 34 states had restarted their programs by the time they completed the Wave 3 survey in March-May 2021.<sup>12</sup>

- ❖ **Sudden, Substantial Decline in RESEA Meetings Conducted. Performance data reported by states to DOL indicate that early in the pandemic, the number of claimants served by RESEA programs dropped by more than half. Operations gradually recovered over the subsequent year, but the number of initial RESEA meetings scheduled and total meetings completed remained well below pre-COVID levels a year after the start of the pandemic.**

In the wake of pandemic-related program suspensions and the temporary reassignment of staff in 2020, the number of initial RESEA meetings scheduled and *total* meetings completed (i.e., initial plus subsequent meetings) dropped sharply compared with 2019 (Exhibit 1). The percentage of UI claimants selected for RESEA declined, both because of the lower number of RESEA meetings conducted (the numerator) and the higher number of new claimants as unemployment rose dramatically (the denominator). Nonetheless, states were able to provide a substantial level of services even at the height of the pandemic.

Exhibit 1 shows the change in initial meetings scheduled and total meetings completed during the first year of the pandemic, relative to the corresponding quarter in 2019 (pre-pandemic). The number of meetings scheduled and completed in the first quarter of 2020 was similar to the first quarter of 2019. The number of initial meetings *scheduled* was 1.1 percent higher in the first quarter of 2020 than in the corresponding quarter a year earlier. Total meetings *conducted* were 4.4 percent fewer in the first quarter of 2020 compared to a year earlier, possibly reflecting cancellations due to AJC office closures in late March 2020, at the very end of the first quarter. But in the second quarter of 2020, meeting activity declined by more than two-thirds—with 72 percent fewer meetings conducted compared to the same quarter in the prior year. Over the subsequent three quarters, RESEA meeting activity gradually rose back toward pre-pandemic levels. In the first quarter of 2021, a year after the start of the pandemic, the number of meetings conducted was 46 percent lower than the number conducted in the same quarter in 2019.

**Exhibit 1. Percentage Change in Initial RESEA Meetings Scheduled and Held in 2020 and 2021 Relative to the Same Quarter in 2019**



**Key:** ETA=Employment and Training Administration, Q=calendar quarter.

**Source:** ETA 9128 reports. Accessed March 23, 2022.

**Note:** Tabulations are by program quarter and year (note: quarter is abbreviated to “Q”, for example, with “Q1” referring to Quarter 1 of the calendar year). The exhibit shows percent change from 2019 to 2020 or 2021 for all states (N=50) that received grant funds to operate programs for all quarters from Q1 2019 through Q1 2021. A small number of state reports are missing for some quarters (2 apiece Q2 2020 and Q1 2021; 4 apiece in Q3 2020 and Q4 2020). For the purposes of tabulating meetings conducted, missing reports are treated as indicating that the state had no RESEA meeting activity (zero meeting scheduled or conducted).<sup>13</sup> *Meetings completed* includes both initial and subsequent meetings completed. Because of seemingly large anomalies in the data for a small number of states, we omit counts of *total meetings scheduled*.

## State and Local Service Delivery Responses to Pandemic-Induced Challenges

In each survey wave, states reported on recent changes made to their program design or operation. In Wave 2 (completed in October-November 2020), states reported on changes they made in the prior six months; in Wave 3, states reported on changes made in the prior four months (between November 2020 and March 2021). Across these two survey waves, the leading change was the same—alterations to service delivery design, reported by about two-thirds of states in each wave (Exhibit 2). The next two leading changes for states were changes to RESEA staffing (reported by about one third of Wave 2 or Wave 3 respondents) and changes to the approach to UI eligibility and work search review (37 percent of states in Wave 2; 24 percent of states in Wave 3).

**Exhibit 2. Changes to RESEA Programs Reported in October/November 2020 (Wave 2) and March-May 2021 (Wave 3) Surveys**

Response	October/November 2020 (Wave 2)		March-May 2021 (Wave 3)	
	Number of States	% of States	Number of States	% of States
Changed service delivery design	31	67.4%	35	70.0%
Changed RESEA staffing or resources	15	32.6%	17	34.0%
Changed the approach to UI eligibility and work search review	17	37.0%	12	24.0%
Changed size and/or geographic coverage area of RESEA program	6	13.0%	6	12.0%
Changed approach to targeting RESEA services to claimants	5	10.9%	4	8.0%
Other (please specify)	3	6.5%	0	0.0%
We have not changed the RESEA program	0	0.0%	11	22.0%
Not shown the question <sup>a</sup>	14	30.4%	2	4.0%
Did not respond (actively declined)	0	0.0%	1	2.0%
<b>Total</b>	<b>46</b>	<b>100.0%</b>	<b>50</b>	<b>100.0%</b>

**Key:** UI=Unemployment Insurance.

**Source:** RESEA Implementation Survey, Wave 2 (October/November 2020) and Wave 3 (March-May 2021), Question 1.a.4.

**Note:** For Wave 2, states were asked “In the past six months, which aspects of your RESEA program have you changed?” For Wave 3, states were asked “Since the end of November 2020, which aspects of your RESEA program have you changed?” Rows do not sum to total because respondents could select more than one response option.

<sup>a</sup> Respondents were not shown the question if they reported that their program was suspended at that point in time.

**❖ Rapid Shift to Remote and Virtual Service Delivery. To deliver services safely during COVID, states shifted away from in-person service delivery. By March-May 2021 (Wave 3 survey), four-fifths of states reported that initial RESEA meetings typically occur by phone or videoconference.**

The Wave 3 survey asked about program shifts away from in-person services to either services provided by a staff person but not in person (“remote”) or services accessed by claimants online without interaction with program staff (“virtual”).<sup>13</sup>

Prior to COVID, Wave 1 survey respondents in nearly all states (98 percent) reported conducting initial RESEA meetings in person at an AJC, with less than a fifth of states offering remote options (Exhibit 3). By contrast, as of March-May 2021 (Wave 3), survey respondents in 40 states (80 percent) reported that initial RESEA meetings occurred remotely by phone call (audio, not video) and by videoconference in 30 states (60 percent) (Exhibit 3). RESEA sessions now occurred in person at an AJC in just 16 states (32 percent).

Additional analyses of the survey data show that, among the states that reported holding meetings remotely using at least one form of technology (phone, videoconference) at Wave 3, all made this remote option available to all claimants. In contrast, at Wave 1, only five such states offered the option to all claimants.

**Exhibit 3. Where RESEA Initial Meetings Occur, Survey Wave 1 vs. Wave 3**

Location of RESEA Initial Meeting	February/March 2020 (Wave 1)		March-May 2021 (Wave 3)	
	Number of States	% of States	Number of States	% of States
Remotely by phone call (audio, not video)	6	14.0%	40	80.0%
Remotely by videoconference	4	9.3%	30	60.0%
In person at an AJC	42	97.7%	16	32.0%
In person at a location other than an AJC (please specify)	8	18.6%	2	4.0%
Not shown the question <sup>a</sup>	0	0.0%	1	2.0%
<b>Total</b>	<b>43</b>	<b>100.0%</b>	<b>50</b>	<b>100.0%</b>

**Key:** AJC=American Job Center.

**Source:** RESEA Implementation Survey, Wave 3 (March-May 2021), Question 3.c.1.

**Note:** Rows do not sum to total because respondents could select more than one response option. Responses indicate status as of time of survey.

<sup>a</sup> Respondents were not shown the question at Wave 3 if they reported that their program was suspended at that point in time.

Finally, RESEA also serves as a gateway to services provided by workforce system partners, and states increased virtual access via the AJCs to those services, which themselves also had shifted to virtual methods. New virtual workforce services include

- posting labor market information and job leads online, or emailing these to job seekers;
- online videos on effective job search strategies and résumé preparation;
- online tools for job search and career interest assessments; and
- virtual job fairs.

❖ **Few Other COVID-Related Changes to RESEA Programs. States reported little change during the pandemic on claimant selection, the timing of claimant selection, and the timing of the initial meeting; a few states reported changes to work search reviews.**

After the onset of the pandemic in March 2020, states continued to target claimants most likely to exhaust benefits. State have also not dramatically accelerated nor decelerated the timing of selection or completion of the initial RESEA meeting.

There was a small shift in state respondents’ views on the main role of the work search review process (Exhibit 4). Between Waves 1 and 3, the percentage of states increased (from 65 percent to 78 percent) that view work search review as primarily intended to improve claimants’ search and facilitate return to work. Fewer states identified the motivation as related to compliance or enforcement.<sup>14</sup>

**Exhibit 4. States' Primary Motivation for Reviewing Work Search, Survey Wave 1 vs. Wave 3**

Work Search Review Is Intended to...	February-March 2020 (Wave 1)		March-May 2021 (Wave 3)	
	Number of States	% of States	Number of States	% of States
...improve claimants' work search practices and help them return to work more quickly.	28	65.1%	39	78.0%
...help claimants understand and comply with work search requirements.	13	30.2%	10	20.0%
...identify and penalize those claimants who are not complying with work search requirements.	2	4.7%	0	0.0%
Not shown the question <sup>a</sup>	0	0.0%	1	2.0%
<b>Total</b>	<b>43</b>	<b>100.0%</b>	<b>50</b>	<b>100.0%</b>

**Source:** RESEA Implementation Survey, Wave 1 (February/March 2020) and Wave 3 (March-May 2021), Question 4.b.1.

<sup>a</sup> Wave 3 respondents were not shown this question if they indicated that their state's RESEA program was suspended at the time of the survey.

**Possible Longer-Term Effects of the Pandemic on RESEA Service Delivery**

❖ **States May Be Likely to Retain Remote and Virtual Service Delivery in Future. Even as the pandemic subsides, remote and virtual services are likely to remain as features of RESEA.**

COVID-19 forced states to explore, test, and accelerate the use of remote and virtual service delivery in RESEA and in the workforce development system as a whole. Once AJCs reopen at full capacity, some states could go back to an in-person service model, but the surveys indicate there may be considerable continued use of remote and virtual services, probably in combination with in-person services. The survey asked states to report on specific plans to change their programs going forward, either in response to COVID-19 or for other reasons.

As of Wave 3, only about a third (17) of states had plans for changes, but nearly all of those states (16 states) intend to retain shifts already made in service delivery design, specifically expansion of remote and virtual services. Of these 16 states with plans to change service delivery design, 15 planned to add or expand remote services such as phone or videoconference meetings, and nine planned to add or expand virtual (self-service) options. (Not shown.)

❖ **The Longer-term Effects of Shifts to Remote and Virtual Service Delivery on Claimants' Participation and Outcomes Need Future Evaluation.**

The study team's reviews and analysis of survey and interview responses surfaced a set of potentially positive effects of remote and virtual services, including the following:

- **Remote service delivery removes geographic constraints, which might make providing RESEA services more efficient.** With in-person service delivery, RESEA staff and selected claimants must reside near the service location. With remote service delivery, a RESEA staff person in one part of the state can serve claimants statewide. For instance, in interviews, staff in one state noted that they were exploring the possibility of having staff in local workforce areas

that have more excess capacity, conduct RESEA meetings remotely with participants in different local workforce areas. States could adopt a centralized call center model or allow staff in one AJC to help another AJC's localized case surge. Hence, conducting meetings via telephone or online holds the potential for greater flexibility in which RESEA staff are scheduled to meet with which claimants.

- **Replacing in-person orientations with virtual orientations might reduce costs for conducting that activity and allow resources to be shifted to other uses.** Prior to the onset of the pandemic, some states and localities had 60- to 90-minute in-person group orientations to explain AJC and partner services to claimants as part of initial RESEA meetings. One interview respondent from a state that had shifted from in-person to virtual orientations observed that providing recorded orientations online had freed staff to spend more time on one-on-one interactions in RESEA meetings.
- **Allowing remote meeting attendance might reduce burden on RESEA participants.** The switch to remote services reduces selected claimants' travel time and costs, reduces barriers to attendance at initial/subsequent meetings (e.g., lack of childcare or transportation), and reduces time waiting to meet individually with RESEA staff.
- **Remote meetings might increase attendance rates at RESEA meetings.** The reduced attendance burden on claimants seems likely to increase attendance rates (and therefore reduce rates of failure to report) at least somewhat. Logically, such reduction in failure to report for meetings might in turn improve claimant employment rates, by exposing claimants to employment-related materials and programming provided at the meetings, thereby helping states improve their performance on a metric they must report to DOL. This hypothesis should be a focus of rigorous evaluation.

Two potential negative effects of remote and virtual services are worth noting, however:

- **Holding RESEA meetings remotely could weaken RESEA's role as an entry point to AJC partner services.** Attending RESEA meetings at an AJC puts UI claimants in proximity to workforce system partners, which may promote claimants' use of those services in a way that a remote model would not.
- **Claimants may face technological or logistical challenges to accessing remote and virtual services.** Challenges related to the "digital divide,"<sup>16</sup> such as comfort with technology, data plans, access to wi-fi, quality of phones or computers, and privacy concerns (e.g., having a space available to attend a videoconference with RESEA staff) might make it difficult for some claimants to meet RESEA requirements that require internet access and, in turn, to effectively take advantage of reemployment services.

RESEA's authorizing legislation requires states to use demonstrated effective interventions to reduce the number of weeks for which program participants receive UI. Because current evidence on effectiveness of RESEA interventions and other practices was developed when meetings and resources were provided in person, additional evidence building is needed to fully understand the possible positive and negative effects of remote and virtual services and to consider strategies to maximize their potential and address possible challenges in order to improve claimant outcomes. Eight (16 percent) of Wave 3 survey respondents indicated that their state planned to evaluate remote services compared to in person services.<sup>17</sup>

## Conclusions

Overall, the COVID-19 pandemic greatly interrupted RESEA service delivery and challenged the workforce development system more broadly. Surveys and interviews with RESEA administrators and staff suggest that the pandemic-related surge in UI claims challenged UI and RESEA state and local operations. RESEA program administrators and staff also have had to cope with temporary pandemic-related suspension of in-person service delivery at AJCs and other localities where RESEA initial and subsequent meetings with claimants are typically conducted. States have been responding—sometimes very rapidly—to adapt their RESEA programs to those interruptions. Some changes are temporary (e.g., easing enforcement of certain requirements), but others seem likely to persist. In particular, the pandemic provides both the need for, and opportunity to introduce or accelerate, remote service delivery platforms and tools. These may be important service delivery features in the future.

## Notes

<sup>1</sup> The seasonally adjusted unemployment rate increased from 3.5 percent (5.7 million unemployed people) in February 2020 to 14.7 percent (23.0 million unemployed people) in April 2020 ([https://www.bls.gov/opub/ted/2020/unemployment-rate-rises-to-record-high-14-point-7-percent-in-april-2020.htm?view\\_full](https://www.bls.gov/opub/ted/2020/unemployment-rate-rises-to-record-high-14-point-7-percent-in-april-2020.htm?view_full)). For an analysis of the short-term labor market impact of the spread of COVID-19 in the United States using data from the Current Employment Statistics Survey and the Current Population Survey microdata, see M. Dalton, “Labor Market Effects of Local Spread of COVID-19,” Working Paper 524 (Washington, DC: US Department of Labor, US Bureau of Labor Statistics, Office of Employment Research and Program Development, 2020), <https://www.bls.gov/osmr/research-papers/2020/pdf/ec200060.pdf>.

<sup>2</sup> On February 9, 2018, the President signed the Bipartisan Budget Act of 2018, Public Law 115-123, which included amendments to the Social Security Act that created a permanent authorization for the RESEA program. The RESEA provisions are contained in Section 30206 of the Bipartisan Budget Act, enacting new Section 306 of the Social Security Act. As stated there, RESEA’s statutory aims are “(a) to improve employment outcomes of individuals that receive unemployment compensation and to reduce the average duration of such compensation, through employment; (b) to strengthen program integrity and reduce the frequency of improper payments of unemployment compensation by states through the detection and prevention of such payments to individuals who are not eligible for such compensation; and (c) to promote alignment with the broader vision of the Workforce Innovation and Opportunity Act (WIOA) of increased program integration and service delivery for job seekers, including claimants for unemployment compensation; (d) to establish reemployment services and eligibility assessments as an entry point for individuals receiving unemployment compensation into other workforce system partner programs.” ([https://www.ssa.gov/OP\\_Home/ssact/title03/0306.htm](https://www.ssa.gov/OP_Home/ssact/title03/0306.htm)).

<sup>3</sup> DOL’s Chief Evaluation Office contracted with Abt Associates and its partners—the Urban Institute, Capital Research Corporation, and the National Association of State Workforce Agencies—to conduct a three-year study to develop strategies to support the evidence requirements for the RESEA program that were enacted as part of the Act (Contract # 1605DC-18-A-0037, “Evaluation to Advance RESEA Program Evidence”).

<sup>4</sup> The survey was administered to a panel of states over three waves. Conducted February through mid-March 2020, the Wave 1 survey captured program features/operations just prior to the onset of the COVID pandemic from 43 states (an 86 percent response rate). Administered in October and November 2020, the Wave 2 survey captured program features/operations from 46 states (a 92 percent response rate) about seven months into the COVID pandemic. Important aims of the survey’s second wave were to understand (1) how the COVID pandemic affected states’ RESEA operations; (2) what strategies states adopted in response; and (3) what change the pandemic might spur in the longer term. Conducted during March through May 2021, the Wave 3 survey captured program

features/operations from 50 states (a 98 percent response rate) a year after the COVID pandemic began. This third wave documented states' continued efforts to re-establish program operations. The multiple waves intended to capture similarities and changes over time of program structure and operations. The survey included a set of items that were administered at each wave, plus a set of questions added for Waves 2 and three that focused particularly on COVID-related impacts and responses. The tabulations presented in this report are, however, for all states that responded. Because that set varied over time, the results for different waves are for an unbalanced panel and differences in results between waves may not strictly reflect change over time but may be affected, in part, by change in composition.

<sup>5</sup> Via telephone and/or video conference, the RESEA study team interviewed state and local staff involved in administering RESEA in the summer and fall of 2020. The team selected a stratified random sample of 10 states, implicitly stratifying by two key factors: (1) program size and (2) geographic region (i.e., according to the six DOL regions to which each state is assigned). The states selected for interviews were Connecticut, Georgia, Louisiana, Maryland, North Carolina, New York, Nevada, Ohio, Washington, and Wisconsin. These 10 states account for about one-third (31 percent) of the total RESEA initial meetings scheduled each year.

<sup>6</sup> RESEA programs' generally select UI claimants who are expected to be more likely to "exhaust" benefits, see J. Trutko, A. Trutko, A. Clarkwest, P. Souvanna, J. Klerman, A. Briggs, S. Spaulding, I. Hecker, A. Islam, B. Katz, M. Scott, and D. Nightingale (Rockville, MA: Abt Associates, 2022). Most states assess new claimants' risk of exhausting benefits using a statistical model that considers claimants' pre-claim employment history (e.g., occupation, industry, job tenure). The model may consider other factors such as prior education and local unemployment rates, see W. F. Sullivan, Jr., L. Coffey, L. Kolovich, C. W. McGlew, D. Sanford, and R. Sullivan, *Worker Profiling And Reemployment Services Evaluation Of State Worker Profiling Models Final Report* (Bethesda, MD: Coffey Communications, LLC, 2007), [https://wdr.doleta.gov/research/FullText\\_Documents/WPRS%20Evaluation%20of%20State%20Worker%20Profiling%20Models%20--%20FINAL.pdf](https://wdr.doleta.gov/research/FullText_Documents/WPRS%20Evaluation%20of%20State%20Worker%20Profiling%20Models%20--%20FINAL.pdf).

<sup>7</sup> In 2015, the RESEA program replaced the Reemployment and Eligibility Assessment (REA) program. Begun in 2005, REA provided similar services for selected claimants. For additional background on the REA program and its impacts on claimants, see J. A. Klerman, C. Saunders, E. Dastrup, Z. Epstein, D. Walton, T. Adam, and B.S. Barnow, *Evaluation of Impacts of the Reemployment and Eligibility Assessment (REA) Program: Final Report* (Cambridge, MA: Abt Associates, 2019), <https://clear.dol.gov/Study/Evaluation-impacts-Reemployment-and-Eligibility-Assessment-REA-Program-Final-report-Klerman>.

<sup>8</sup> In fiscal year 2021, one additional state, Maine, began operating a RESEA program.

<sup>9</sup> Counts are not seasonally adjusted, but because the time window is less than one month, seasonal adjustment should not be materially important. Though weekly claims shrank in 2020, claim counts remained historically high throughout 2020 (e.g., at about one million initial weekly claims during January 2021). By July 24, 2021, non-seasonally adjusted initial weekly claims totaled 344,653 (<https://www.dol.gov/ui/data.pdf>).

<sup>10</sup> National Association of State Workforce Agencies, *2021 State of the Workforce Report: Responding to the Pandemic* (Washington, DC: NASWA, 2021), <https://www.naswa.org/system/files/2021-03/2021-state-of-the-workforce-reportweb3-9-21.pdf>.

<sup>11</sup> AJCs provide free help to job seekers for a variety of career and employment-related needs, including by providing RESEA services. Nearly 2,400 AJCs, funded by DOL's Employment and Training Administration, are located throughout the United States. DOL's CareerOneStop website posted the notice "COVID-19 update: A few AJCs are temporarily closed or have moved to virtual services." (Posting found by research team in August 2021 at the url <https://www.careeronestop.org/LocalHelp/AmericanJobCenters/american-job-centers.aspx>).

<sup>12</sup> To receive 2021 grant funds, DOL required states to restart suspended programs by March 31, 2021. The one state with a program suspended during Wave 3 responded to the survey prior to DOL’s deadline.

<sup>13</sup> By quarter, the states with missing ETA 9128 reports for periods covered in Exhibit 1 are Q2 2020: Minnesota and North Carolina; Q3 2020: California, Indiana, Kansas, and Nevada; Q4 2020: California, Kansas, Nevada, and Pennsylvania, Q1 2021: California and Minnesota. In survey responses, all of these states indicated having suspended their RESEA programs.

<sup>14</sup> In this brief, the term “remote” refers to delivery of services such that a claimant does not have to go in person to meet with RESEA staff, but rather can attend an initial or subsequent meeting via telephone or videoconference. The term “virtual” can refer to remote delivery, but specifically, access by a claimant to online materials and services, such as job leads, labor market information, or orientation to RESEA service delivery, via computer or mobile phone, without interacting with a staff person. Claimants also can access virtual services by visiting a nearby AJC and using a computer located in the AJC’s resource room.

<sup>15</sup> A work search “waiver” was used by most states starting early in the pandemic (beginning in March 2020), which temporarily suspended work search requirements for claimants and enforcement of such requirements by RESEA programs.

<sup>16</sup> “The term ‘digital divide’ refers to the gap between individuals, households, businesses and geographic areas at different socio-economic levels with regard both to their opportunities to access information and communication technologies (ICTs) and to their use of the Internet for a wide variety of activities.” Source: Organisation for Economic Co-operation and Development, *Understanding the Digital Divide* (Paris, France: OECD, 2001), <https://www.oecd.org/digital/ieconomy/1888451.pdf>.

<sup>17</sup> As part of the Wave 3 survey (March-May 2001), eight states (16 percent) reported they planned to evaluate remote vs. in-person services (RESEA Implementation Survey, Question 6.c.6).