# Revamping the Reemployment Services and Eligibility Assessment Program by Utilizing Teleservice Technology to Better Service Rural Communities

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### Overview

Historically, rural communities across the nation have gone underserved. This is true across the spectrum, in education, healthcare, community resources—the list goes on. Part of the issue has to do with funding and the government's use of various criteria to define a rural area. The other contributing factors can be debated indefinitely. However, for some disciplines we can leverage present-day technology, particularly teleservice technology, to close the gap in these underserved communities.

The term *teleservice* has taken root in American society over the last two decades. The notion of providing service through various teleservice technologies has gained substantial momentum in the health field with the idea of providing quality health care to rural patients through telemedicine. However, various forms of teleservice have been around longer than one may assume. Using telemedicine as an example again, consider the following excerpt from Nesbitt (2012):

Telemedicine has also been used for decades in clinical settings. In 1906, the inventor of the electrocardiogram published a paper on the telecardiogram. Since the 1920s, the radio has been used to give medical advice to clinics on ships. Alaska has been a model for the development and use of telemedicine for decades. For example, community health aides in small villages can perform otoscopy and audiometry, and the information can be sent to specialists in Anchorage or Fairbanks to make the determination of whether a patient needs to travel to the specialist for more definitive treatment (pp. 12-13).

Fast-forward to 2020 and institutions across the nation are researching various ways to better serve rural communities. Advanced technology has allowed institutions to make

<sup>&</sup>lt;sup>1</sup> A recent University of South Carolina study reported that the federal government currently uses three definitions of *rural*.

advancements in teleservice options. As a result, if applied correctly, teleservice technology can extend an institution's reach.

### **Problem Statement**

In 2013 the South Carolina Department of Employment and Workforce went through a major reorganization that resulted in the closing of over half of its sites that served unemployment insurance claimants. The move was necessary and it allowed the agency to deliver services more efficiently and effectively by moving from a heavily paper-based system to a web-based system. However, in doing so, the question that surfaced was whether or not some rural communities became isolated from our in-person services. As a result, for programs that require in-person interviews, such as the Reemployment Services and Eligibility

Assessment (RESEA) Program, we are missing opportunities to serve some rural claimants due to exemption.<sup>2</sup>

Statistically, our claimants who live in rural communities need our services the most. However, any claimant who lives more than 50 miles from the nearest service center is exempt from participation in the mandatory program (if selected). This presents an opportunity for the agency to increase its reach into these communities and uphold the four objectives of the program, which are listed below:

- 1. Reduce UI duration through improved employment outcomes
- 2. Strengthen UI program integrity
- 3. Promote alignment with the vision of the Workforce Innovation and Opportunity Act
- 4. Establish RESEA as an entry point to other workforce system partners

<sup>&</sup>lt;sup>2</sup> The RESEA Program's current policy exempts any claimant from the program if their home of record is more than 50 miles from the nearest service center.

The goal of increasing the agency's reach into these rural communities through the RESEA Program is directly aligned with the effort to improve employment outcomes and uphold the integrity of the unemployment insurance program.

Designated rural communities, in general, tend to have a higher unemployment rate than non-designated rural communities. In addition, those residing in non-metropolitan statistical areas or rural counties are more likely to exhaust unemployment insurance benefits. Therefore, we need to find a way to include these claimants in the program rather than exempting them based on their distance from a service center. Looking at other disciplines that have leveraged teleservice technology, it is possible that the agency can use this technology to close the gap between itself and rural communities.

Another hypothesis has yet to be discussed. There is a possibility of reducing negative occurrences in other areas, such as no-shows and requests to reschedule, if teleservice technology can be utilized, due to travel time to a service center not being a factor. This will benefit all claimants, regardless of where they live in the state. In addition, it will benefit the program if the rates of these occurrences are reduced.

### **Data Collection**

It is important to note that the data that collected and analyzed within this research paper describes conditions prior to the 2020 pandemic in an effort to paint the clearest picture possible. The data was examined from a holistic viewpoint as well as by county. The main goal was to measure the number of rural claimants who can be reached through teleservice technology and determine if the technology is cost-effective. To do this, it will also be necessary to

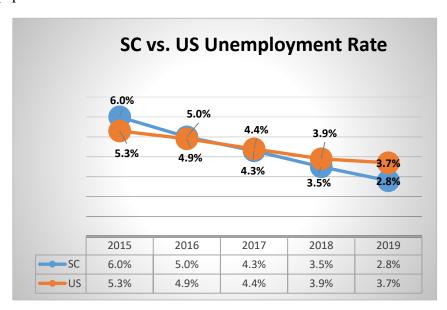
> measure the number of claimants who draw unemployment insurance benefits in rural and non-rural counties.

- > measure the number of claimants who are selected for the RESEA Program.
- > measure the RESEA Program's appointment reschedule rate.
- > measure the RESEA Program's no-show rate.

The majority of the data needed was found through several relevant sources. For this research paper the quantitative data was acquired through the South Carolina Department of Employment and Workforce Labor Market Information Department and the U.S. Census Bureau. Both of these sources are considered to have the most accurate and wide range of raw data sought out for this research paper.

## **Data Analysis**

The data that was revealed was quite interesting. For starters, something that was already known, but worth reiterating, was the strength of South Carolina's



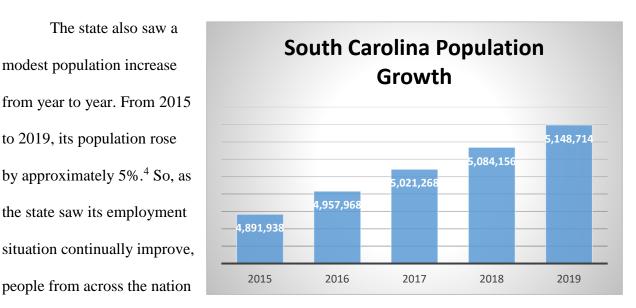
employment picture. From 2015 to 2019, the State of South Carolina recorded record lows in unemployment.<sup>3</sup> During this time, the unemployment rate dropped at least 0.7% year to year. The state continued its progress, beating the nation's average the last three years, from 2017-2019. This data simply reveals the strength of the state of South Carolina and the hard work of its leaders, businesses, and residents. In particular, our declining unemployment rates can be

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<sup>&</sup>lt;sup>3</sup> Source: Bureau of Labor Statistics, SC Department of Employment & Workforce

attributed to recruitment of employers to the state and South Carolina Department of Employment and Workforce Reemployment Programs.

The state also saw a modest population increase from year to year. From 2015 to 2019, its population rose by approximately 5%.<sup>4</sup> So, as the state saw its employment situation continually improve,

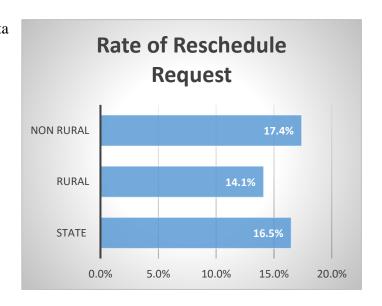


elected to make South Carolina their new home in an effort to tap into our thriving economy.

The data also showed that in 43 of 46 counties, less than 15% of those drawing unemployment are selected to the Reemployment Services and Eligibility Assessment (RESEA) Program. This was an interesting find because the program is not designed this way. It is designed to select claimants who are most likely to exhaust their benefits based on their occupation and education. Nevertheless, the percentage selected is low relative to the number of those actually drawing unemployment benefits. With a closer look, the data revealed that there wasn't a significant difference between the percentages of claimants selected for the RESEA Program based on their designation of living in rural or non-rural counties. It showed that from 2015 to 2019, 11.1% of those drawing unemployment insurance benefits in rural counties were selected for the RESEA Program compared to 11.9% of those in non-rural counties (see Appendix B).

<sup>&</sup>lt;sup>4</sup> Source: U.S. Census Bureau, Population Division. See Appendix A.

From 2015 through 2019, the data showed that on average about 16.5% of those selected to the program requested to reschedule. Unfortunately, we did not capture the reason for the request to reschedule. It may have been due to transportation issues, scheduling conflicts, or administrative reasons.



However, the data also showed that rural counties did not have a significantly higher rate of reschedule requests compared to non-rural counties. In fact, during this period, rural counties posted a lower rate (14.1%) than non-rural counties (17.4%).

The no-show rate during this research period was also not significantly different between rural counties and non-rural counties. From a holistic viewpoint, it appears that the rural counties of South Carolina are not as isolated from RESEA Program services as initially perceived.

Nevertheless, the data did show that there is something to be gained by implementing teleservice technology into our operation.

By utilizing video teleconference technology, we will essentially eliminate the need for a claimant to physically come in to their service center for their RESEA appointment. Thus, we could see

- > a reduction in the no-show rate, currently state 26.8%, rural 25.8%, and non-rural 27.2%.
- > a reduction in the reschedule rate, currently state 16.5%, rural 14.1%, and non-rural 17.4%.

≥ elimination of the 50-plus-mile exemption rule.<sup>5</sup>

# **Implementation Plan**

In order to make the transition from conducting in-person appointments to videoconferencing, the agency first needs to secure a provider through which to conduct the videoconferencing. This would be done at the highest levels within the division, in conjunction with the director of the agency and the finance and legal departments. A cost analysis has been conducted and the agency has found that it will be cost-effective to incorporate Microsoft Teams videoconferencing technology into the RESEA Program. One of the benefits of the Microsoft Teams videoconferencing technology is that the claimant does not need to download the app. They can simply participate in the videoconference via a link from their phone, tablet, or computer as long as they have an internet connection.

The action points listed below will be necessary in order to move forward with implementing the change.

Source Action Item

IT Department	Provide RESEA staff with the updated software and hardware.
RESEA Program Manager	Train RESEA staff on how to utilize the new software.
Policy & Procedure and Unemployment Insurance Division Leadership	Establish best practices and standard operating procedures.
UI Technical Service, IT, and Unemployment Insurance Division Leadership	Update notifications that go out to the claimant informing them of their appointment, e.g., audio messages, text messages, letters, and emails.
Unemployment Insurance Division Leadership	Update supporting staff about the change.

<sup>&</sup>lt;sup>5</sup> Data is not available to show the rate at which claimants are made exempt based on their location from their nearest service center. Yet it is a factor and teleservice technology would allow for this exemption rule to be discontinued.

<sup>&</sup>lt;sup>6</sup> Due to the sensitivity of state contracts and the costs associated with using the same provider for the same service(s) across multiple agencies within the state, cost cannot be discussed in great detail.

We are projecting that the implementation process can begin by the end of the first quarter of 2021. We are currently upgrading all desktops to laptops. This will allow the RESEA staff to be more mobile with their work while conducting appointments via video. Once the hardware upgrade has been completed we can move forward with the implementation. It is anticipated that it will take approximately three to four weeks to fully implement the change. Internally there will not be a significant change in the content of RESEA appointments, only the means by which appointments are conducted.

There are, of course, potential obstacles ahead that can't be accurately predicted. These obstacles are mostly related to the digital divide within South Carolina. First, we are assuming that most of our claimants have access to the internet and a device that can connect to the internet. In the event that they do not, we will allow them to physically come in for their appointment. However, at the moment we cannot estimate what percentage of our claimants will elect to have their appointments in person. Second, if a claimant does have access to the internet and a device that can connect to it, we are assuming that most internet connections will be strong enough to conduct the appointment. While 91.5% of South Carolinians have access to a wired broadband connection there are some counties that are disproportionately impacted by the digital divide. According to www.broardbandnow.com 344,000 people in the state do not have an internet connection that meets the broadband standard of at least 25 Mbps or faster. In addition, another 171,000 people do not have access to a wired connection at all. Thirty-seven of the fortysix counties have broadband coverage in 70% or more within the county. That leaves nine counties that have broadband coverage in less than 70% within the county. These figures do concern us but it has yet to be seen to what extent the digital divide will impact this initiative.

<sup>&</sup>lt;sup>7</sup> We are hopeful that most claimants will take advantage of the videoconference. Many claimants appreciate the program but find the requirement of physically coming in to be a burden.

Undoubtedly, other issues will surface. However, we will not know how any of these potential obstacles will impact the program and to what extent, if any, until we fully implement the teleservice video technology. In an effort to gain some insight on similar initiatives we reached out to other unemployment insurance programs across the nation. We could not identify a program in which video technology is currently being utilized to conduct appointments. However, in our communication we learned that teleservice technology is a popular subject and is currently being explored by several states.

# **Evaluation Method**

Once the solution of conducting RESEA appointments via video is fully implemented, it will be necessary to gauge its effectiveness and efficiency. This can be done through a combination of conducting surveys and querying internal data.<sup>8</sup> After the conclusion of the video appointment, the claimant will be presented with a survey. This survey will be developed to gauge the factors below:

- > Customer service
- ➤ Connectivity quality
- > Preference of meeting via video or in person
- Level of difficulty of securing an internet connection
- Level of difficulty of securing a device that can connect to the internet
- **Location**

The queried data will remain the same in that we will measure the no-show rate and reschedule rate in state, rural, and non-rural counties. While the initial data analysis showed that rural counties are not being underserved on as wide a scale as initially perceived, it also showed

<sup>&</sup>lt;sup>8</sup> The queried data will pertain to the no-show rate and reschedule rate.

that the state as a whole could benefit from utilizing videoconferencing technology in an effort to not only improve the claimant's experience, but also reduce the state's no-show rate<sup>9</sup> and reschedule rate.<sup>10</sup> The move to conduct appointments via videoconference will be evaluated based on the benchmark data collected for the previous five years. We'll be able to say the change was successful if we see at least a 30% decrease in the targeted categories. In addition, we'll compare this data with what claimants are saying via a survey and determine whether they find any benefit from the change.

# **Summary**

Analyzing the data from 2015 to 2019 revealed that the agency's 2013 reorganization did not negatively impact rural claimants on the level initially perceived, particularly as it relates to the RESEA Program. In fact, the program successfully administers its services at an acceptable level to both rural and non-rural claimants. Nevertheless, the research showed that there were still some areas that could be improved by incorporating videoconferencing into the RESEA Program. By replacing in-person appointments with video appointments, we could see a significant decrease in the current no-show rate and reschedule rate. In addition, the policy of exempting claimants located more than 50 miles from their nearest service center will no longer be a factor with videoconferencing technology. Replacing in-person appointments with video teleconference appointments extends our hand not only farther into rural communities but across the state in general. Videoconferencing technology has the potential to significantly change the claimant's experience. All this is possible simply by eliminating travel time.

Going forward, the feedback and data will need to be evaluated at least quarterly over the next several years to determine if the implemented change was a success. The surveys collected

<sup>&</sup>lt;sup>9</sup> No-show rate: state 26.8%, rural 25.8%, and non-rural 27.2%

<sup>&</sup>lt;sup>10</sup> Reschedule rate: state 16.5%, rural 14.1%, and non-rural 17.4%

from both the claimants and RESEA staff at the conclusion of the video appointments will play a significant role. Instead of relying only on quantitative data from reports, we will also collect real-time feedback from the end-user.

History shows that technology, more often than not, improves operations as a whole. It is anticipated that by revamping the Reemployment Services and Eligibility Assessment Program to incorporate teleservice technology, we'll be able to better serve the residents of South Carolina.

# Appendix A

	Population Estimate					
Geographic Area	2015	2016	2017	2018	2019	
South Carolina	4,891,938	4,957,968	5,021,268	5,084,156	5,148,714	
Abbeville County, South Carolina	24,796	24,657	24,567	24,587	24,527	
Aiken County, South Carolina	165,688	167,172	168,325	169,449	170,872	
Allendale County, South Carolina	9,430	9,067	9,012	8,924	8,688	
Anderson County, South Carolina	193,700	195,582	198,186	200,292	202,558	
Bamberg County, South Carolina	14,682	14,478	14,384	14,272	14,066	
Barnwell County, South Carolina	21,781	21,606	21,355	21,121	20,866	
Beaufort County, South Carolina	179,796	183,184	186,497	188,876	192,122	
Berkeley County, South Carolina	203,066	208,525	214,541	221,182	227,907	
Calhoun County, South Carolina	14,759	14,744	14,696	14,563	14,553	
Charleston County, South Carolina	389,310	396,880	402,008	406,222	411,406	
Cherokee County, South Carolina	56,512	56,683	56,913	57,069	57,300	
Chester County, South Carolina	32,410	32,297	32,299	32,304	32,244	
Chesterfield County, South Carolina	46,135	46,120	45,979	45,881	45,650	
Clarendon County, South Carolina	34,029	34,259	34,012	33,742	33,745	
Colleton County, South Carolina	37,439	37,579	37,555	37,676	37,677	
Darlington County, South Carolina	67,520	67,259	66,981	66,759	66,618	
Dillon County, South Carolina	31,141	30,719	30,496	30,612	30,479	
Dorchester County, South Carolina	152,809	156,173	158,988	160,718	162,809	
Edgefield County, South Carolina	26,782	26,626	26,837	27,132	27,260	
Fairfield County, South Carolina	22,874	22,633	22,593	22,376	22,347	
Florence County, South Carolina	138,715	138,595	138,495	138,277	138,293	
Georgetown County, South Carolina	61,456	61,565	61,826	62,232	62,680	
Greenville County, South Carolina	490,900	499,122	506,831	514,621	523,542	
Greenwood County, South Carolina	69,962	70,188	70,496	70,597	70,811	
Hampton County, South Carolina	19,963	19,789	19,498	19,348	19,222	
Horry County, South Carolina	308,987	321,033	332,655	344,105	354,081	
Jasper County, South Carolina	27,460	28,085	28,522	29,147	30,073	
Kershaw County, South Carolina	63,661	64,333	65,213	65,802	66,551	
Lancaster County, South Carolina	86,261	89,823	92,411	95,035	98,012	
Laurens County, South Carolina	66,421	66,603	66,822	66,890	67,493	
Lee County, South Carolina	17,809	17,506	17,388	17,294	16,828	
Lexington County, South Carolina	281,675	286,277	290,338	294,350	298,750	
McCormick County, South Carolina	9,656	9,572	9,554	9,408	9,463	
Marion County, South Carolina	31,770	31,760	31,295	31,056	30,657	
Marlboro County, South Carolina	27,585	26,979	26,691	26,392	26,118	
Newberry County, South Carolina	37,772	37,934	38,381	38,443	38,440	
Oconee County, South Carolina	75,863	76,535	77,388	78,307	79,546	
Orangeburg County, South Carolina	89,159	88,419	87,671	87,013	86,175	
Pickens County, South Carolina	121,500	123,020	123,518	125,225	126,884	
Richland County, South Carolina	406,008	409,014	411,800	414,202	415,759	
Saluda County, South Carolina	20,159	20,187	20,299	20,397	20,473	
Spartanburg County, South Carolina	296,558	300,867	306,740	314,137	319,785	
Sumter County, South Carolina	107,151	107,075	106,431	106,409	106,721	
Union County, South Carolina	27,743	27,666	27,400	27,324	27,316	
Williamsburg County, South Carolina	32,519	31,912	31,216	30,606	30,368	

# Appendix B

	County	Rural County	Total Claimants	Total RESEA Pending	RESEA Appts Comp	Failure to Report	FTR %	% Selected to Program	Rescheduled Appts	Reschedule Rate
	ABBEVILLE	Υ	1,548	161	116	45	28.0%	10.4%	24	14.9%
	AIKEN	Υ	8,663	878	676	202	23.0%	10.1%	103	11.7%
R	ALLENDALE	Υ	710	111	92	19	17.1%	15.6%	17	15.3%
U	BAMBERG	Υ	1,135	194	137	57	29.4%	17.1%	41	21.1%
_	BARNWELL	Υ	1,909	273	217	56	20.5%	14.3%	37	13.6%
R	CHEROKEE	Υ	3,923	408	254	154	37.7%	10.4%	85	20.8%
Α	CHESTER	Υ	2,605	207	144	63	30.4%	7.9%	58	28.0%
	CHESTERFIELD	Υ	2,537	213	157	56	26.3%	8.4%	33	15.5%
L	CLARENDON	Υ	1,975	244	180	64	26.2%	12.4%	44	18.0%
	COLLETON	Υ	2,214	273	202	71	26.0%	12.3%	45	16.5%
С	DILLON	Υ	2,661	279	219	60	21.5%	10.5%	40	14.3%
	EDGEFIELD	Y	1,237	133	103	30	22.6%	10.8%	14	10.5%
0	GEORGETOWN	Υ	3,314	351	325	26	7.4%	10.6%	64	18.2%
U	GREENWOOD	Υ	4,559	677	497	180	26.6%	14.8%	81	12.0%
_	HAMPTON	Υ	1,165	149	99	50	33.6%	12.8%	18	12.1%
N	LANCASTER	Y	3,880	348	278	70	20.1%	9.0%	88	25.3%
Т	LEE	Y	1,232	129	97	32	24.8%	10.5%	21	16.3%
	MARION	Υ	3,024	319	252	67	21.0%	10.5%	34	10.7%
	MARLBORO	Υ	2,550	198	144	54	27.3%	7.8%	25	12.6%
. Е	MCCORMICK	Υ	394	48	41	7	14.6%	12.2%	7	14.6%
_	NEWBERRY	Y	2,093	237	174	63	26.6%	11.3%	49	20.7%
S	OCONEE	Υ	3,562	431	338	93	21.6%	12.1%	53	12.3%
	ORANGEBURG	Y	7,689	1,077	750	327	30.4%	14.0%	217	20.1%
	WILLIAMSBURG	Υ	2,550	344	309	35	10.2%	13.5%	-	0.0%
	YORK	Υ	9,502	814	506	308	37.8%	8.6%	-	0.0%
	Total		76,631	8,496	6,307	2,189			1,198	

		County	Rural County	Total Claimants	Total RESEA Pending	RESEA Appts Comp	Failure to Report	FTR %	% Selected to Program	Rescheduled Appts	Reschedule Rate
		ANDERSON	N	10,312	1,080	785	295	27.3%	10.5%	160	14.8%
		BEAUFORT	N	4,951	544	389	155	28.5%	11.0%	53	9.7%
		BERKELEY	N	8,703	864	679	185	21.4%	9.9%	201	23.3%
	V	CALHOUN	N	706	107	82	25	23.4%	15.2%	14	13.1%
	С	CHARLESTON	N	11,947	1,286	1,014	272	21.2%	10.8%	310	24.1%
	ר כ	DARLINGTON	N	4,230	491	376	115	23.4%	11.6%	43	8.8%
ı	v o	DORCHESTER	N	6,087	585	468	117	20.0%	9.6%	169	28.9%
"	Ù	FAIRFIELD	N	2,290	295	194	101	34.2%	12.9%	61	20.7%
	N	FLORENCE	N	9,051	1,182	925	257	21.7%	13.1%	116	9.8%
	₹ '`	GREENVILLE	N	22,583	3,007	2,066	941	31.3%	13.3%	643	21.4%
	Т	HORRY	N	20,759	2,324	2,038	286	12.3%	11.2%	542	23.3%
,	ָׁ נ	JASPER	N	980	89	60	29	32.6%	9.1%	12	13.5%
	₹ '	KERSHAW	N	3,825	492	366	126	25.6%	12.9%	88	17.9%
	E	LAURENS	N	3,451	443	309	134	30.2%	12.8%	82	18.5%
1	A S	LEXINGTON	N	12,556	1,470	957	513	34.9%	11.7%	239	16.3%
	L	PICKENS	N	5,047	737	530	207	28.1%	14.6%	101	13.7%
		RICHLAND	N	24,890	3,138	1,999	1,139	36.3%	12.6%	403	12.8%
		SALUDA	N	636	53	38	15	28.3%	8.3%	6	11.3%
		SPARTANBURG	N	16,184	2,111	1,494	617	29.2%	13.0%	292	13.8%
		SUMTER	N	6,824	657	501	156	23.7%	9.6%	118	18.0%
		UNION	N	2,711	266	170	96	36.1%	9.8%	46	17.3%
TOTAL		L	178,723	21,221	15,440	5,781			3,699		

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