



# **OVERVIEW OF THIRD-PARTY EMPLOYMENT SERVICE PROVIDERS FOR SUBSTITUTE TEACHERS**

January 8, 2024



# PROVIDING SERVICES IN MULTIPLE STATES



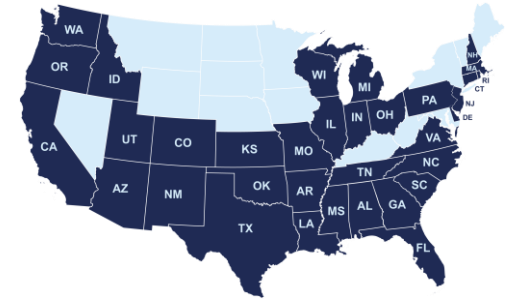
## 11 states

- 600+ school districts supported
- Over 3 million students served
- 60,000+ substitute and permanent employees



## 34 states

- 900+ school districts supported
- Over 5 million students served
- 90,000+ substitute and permanent employees



# **OREGON SERVICES & SUPPORT**

- **96 School Systems**
- **5,713 Active Substitute Teachers**
- **275,000 Students Served**

# COMPENSATION AND BENEFITS

## Edustaff

- **Compensation:** The average for 5 days is \$215.15 and 4 days is \$237.37
- **Health Insurance:** 60 days of employment at the first of the month
- **Voluntary 401(k):** Elective deferral contributions can begin on the 1st of the month coincident or following the hire date. Pre-Tax and Roth deferral contributions options are available

## ESS

- **Compensation:** The daily average is \$248.77
- **Health Insurance:** 30 days to enroll after the first paycheck
- **401(k):** After 30 days of employment, substitutes can participate at the start of the next quarter. Matches are discretionary and made on an annual basis

**ORS 342.610 – “...shall not be paid less per day than 85% of the daily salary of a beginning teacher who hold a bachelor’s degree.” Average Salary: \$46,125**

# **HEALTH BENEFITS QUALIFICATIONS AND PROVIDERS VERY ACROSS DISTRICTS**



**Edustaff & ESS  
Comply with  
Oregon Health  
Insurance  
Coverage  
Requirements**

# PUBLIC EMPLOYEE RETIREMENT SYSTEM (PERS)

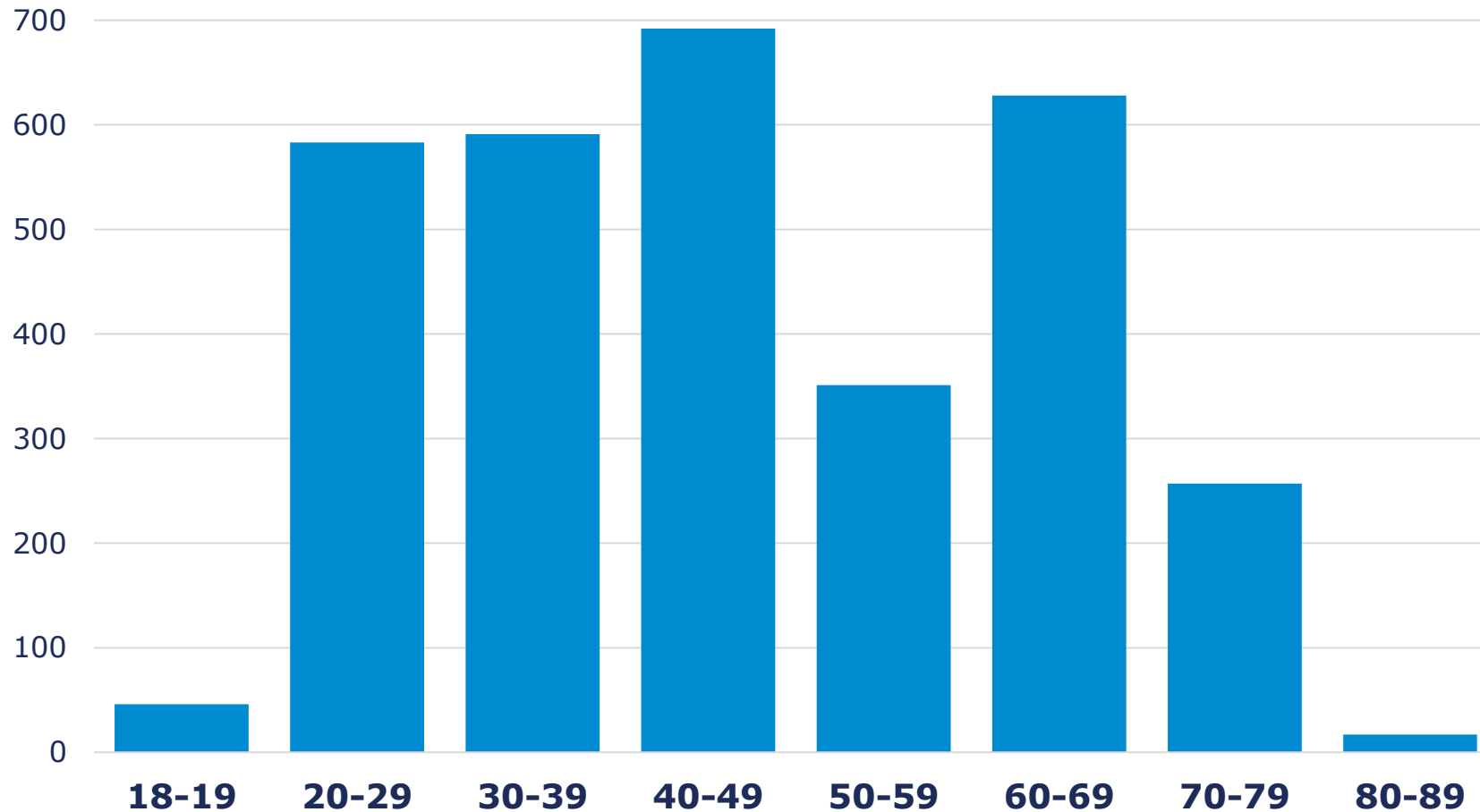
**To become a PERS member, an employee must complete a “trial period” of employment.**

*Six months of uninterrupted service (i.e., no break in service for 30 or more consecutive working days).*

*The employee is still working for the same employer at the end of the six-month period.*

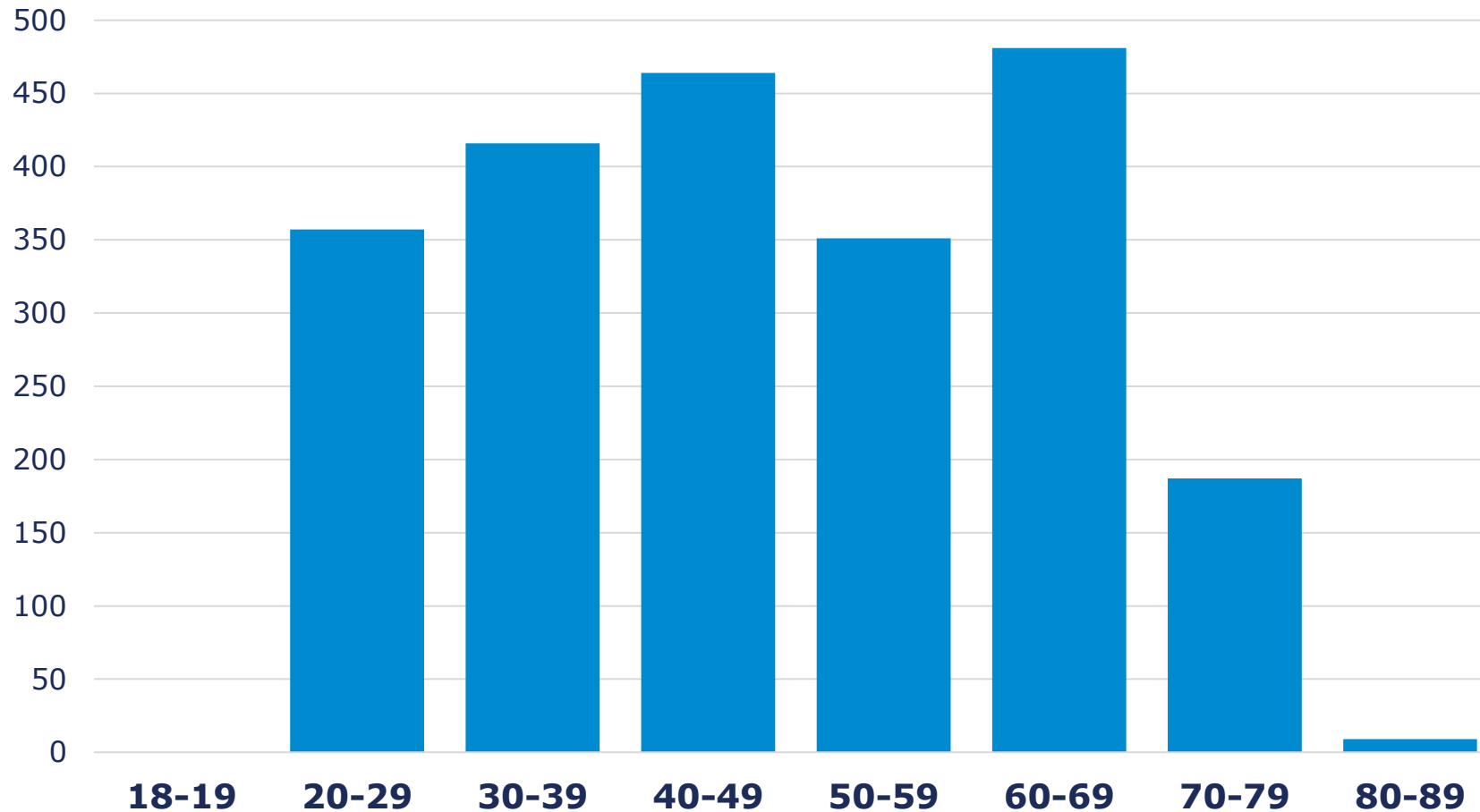
**Based on current employment, only 18% of substitutes would qualify for PERS – However, this number is highly inflated due to the “same employer” rule.**

# AGE: ALL SUBSTITUTE EMPLOYEES



\* Source: ESS Oregon Substitute Data

# AGE: LICENSED SUBSTITUTE EMPLOYEES



\* Source: ESS Oregon Substitute Data



# ADVANTAGES OF THIRD-PARTY SUBSTITUTE PROVIDERS

## Substitute Teachers

- Single employer
- View and accept assignments for multiple districts through portal
- Consolidated paycheck & W2 forms
- 401k
- Health, vision, dental, and life insurance
- Enhanced and consistent training
- Weekly / Bi-Weekly pay
- Enhanced & consolidated background checks
- Performance incentives, reward programs, and recognition programs
- Career development: STEM certifications, mentoring programs, tuition discounts

## School District Administration

- Efficiency of administration - recruiting, screening, interviewing, training, managing, paying, and dispatching
- A broader pool of substitutes
- Higher fill rates
- Reduced advertising costs
- Credentials verified, recorded, and tracked
- Disciplinary actions managed
- Payroll management and disbursement
- Workers' Compensation Insurance and management
- Absence Management customization, training, and management
- Customized reports

# PROFESSIONAL DEVELOPMENT, TRAINING



- Live, in-person training
- Reimbursement for required training
- Training curriculum customized to the district's needs
- Trainers are retired educators
- 200+ online training modules
- STEM certifications
- Shadow/mentoring program

# INCIDENTS AND FEEDBACK

- Interactive and intuitive documentation process
- Swiftly addresses concerns
- Ensures consistency
- Fosters professional development
- Focuses on coaching and retraining to create a positive learning environment
- Addresses allegations with a detailed investigation process



# Absence Management Software

- Can be customized for each district.
- Settings can be turned on or off to meet the district's needs, including the substitute rating and the preferred substitute feature.
- Steps the system takes for preferred substitutes.
  - Substitutes on the teacher's preferred subs list have the first opportunity.
  - The next group to have access is the school's preferred substitute list.
  - Then, the remaining substitute pool would have access.
    - Calculated by the percentage of time from when the absence is created and the start date and time of the assignment.
- Substitute Visibility
  - Teacher's name, school, position, dates, and times for the assignment.
  - Electronic notes/lesson plans can also be left.
- Teacher Visibility
  - Have access to the list of substitutes.
  - If the substitute rating system is turned on, they will also have access to their rating.



**Thank you!**

**Questions?**

January 8, 2024



# HEALTH INSURANCE: OREGON STATUE

HEALTH INSURANCE: REQUIRED REIMBURSEMENTS IN OREGON STATUTE									
Coverage for specific conditions, services, persons, and reimbursement to providers									
Required Reimbursements	Description	Statute	Eff. Date	Repeal Date	Other Health Insurance (non-HBP)	Applicable to HCSCs?	Health Benefit Plans (HBP)	Group	Individual
<b>DISEASES, CONDITIONS, AND SERVICES</b>									
Alcoholism	Coverage for alcoholism treatment, at the request of the insured.	ORS 743A.160, ORS 743.402	1978	No	Yes (except limited benefit coverage)	Yes	Yes	No	Yes
Injuries resulting from alcohol, cannabis and controlled substances	Coverage for the medical treatment of injuries caused in whole or in part by the use of alcohol, cannabis or controlled substances subject to policy limitations for other injuries.	ORS 743A.164	2017	Yes	Yes (except disability policy)	Yes	Yes	Yes	Yes
Applied behavior analysis	Health benefit plans must cover screening and diagnosis of autism spectrum disorder and for medically necessary treatment for autism spectrum disorder and the management of care.	Sections 2 and 22 c.771 Oregon Laws 2013	2014	Yes 1/2/22	No	Yes	Yes	Yes	Yes
Breast examinations	Every health insurance policy that covers hospital, medical, or surgical expenses shall cover breast exams.	ORS 743A.108	2006	No	Yes (except accident or disease-specific plans)	Yes	Yes	Yes	Yes
Chemical dependency and mental or nervous conditions	Group health insurance coverage for treatment of chemical dependency and mental or nervous conditions at the same level as those imposed for treatment of other medical conditions.	ORS 743A.168	2018 orig. 2007	No	Yes (except limited benefit coverage)	Yes	Yes	Yes	No
Child abuse medical assessments	Health benefit plans must pay a community assessment center for services provided in conducting a child abuse medical assessment.	ORS 743A.252	2016	No	No	Yes	Yes	Yes	Yes
Clinical trials	Health benefit plans must cover the routine costs of care for patients enrolled and participating in approved clinical trials.	ORS 743A.192	2010	No	No	Yes	Yes	Yes	Yes
Bilateral cochlear implants	Health benefit plans that cover cochlear implants must cover bilateral implants.	ORS 743A.140	2008	No	No	Yes	Yes	Yes	Yes
Colorectal cancer screenings and laboratory tests	Health benefit plans shall provide coverage for specified colorectal cancer screening examinations and laboratory tests for insureds 50 years of age or older.	ORS 743A.124	2017	Yes 2023	No	Yes	Yes	Yes	Yes
Contraceptives	These plans must provide coverage for prescription contraceptives and, if covered for other drug benefits, must cover outpatient consultations, examinations, procedures and medical services that are necessary to prescribe, dispense, deliver, distribute, administer or remove a prescription contraceptive. Requires dispensing of contraceptives intended to last for a three-month period for the first dispensing and for twelve-month period for subsequent dispensing. A religious employer exemption applies to "religious employers" as defined in the statute.	ORS 743A.066	6-14-17 Orig 2008	No	Yes (Also applies to prescription drug programs, prescription drug benefits offered under health benefit plans and to	Yes	Yes	Yes	Yes



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DISEASES, CONDITIONS, AND SERVICES										Required Reimbursements	Description	Statute	Eff. Date	Repeat Date	Other Health Insurance (non-HBP)	Applicable to HCSCs?	Health Benefit Plans (HBP)	Group	Individual
Alcoholism	Coverage for alcoholism treatment, at the request of the insured.	ORS 743A.160, ORS 743.402	1978												student health insurance policies- Note: Does not apply to short term major medical policies)				
Injuries resulting from alcohol, cannabis and controlled substances	Coverage for the medical treatment of injuries caused in whole or in part by the use of alcohol, cannabis or controlled substances subject to policy limitations for other injuries.	ORS 743A.164	2017																
Applied behavior analysis	Health benefit plans must cover screening and diagnosis of autism spectrum disorder and for medically necessary treatment for autism spectrum disorder and the management of care.	Sections 2 and 22 c.771 Oregon Laws 2013	2014																
Breast examinations	Every health insurance policy that covers hospital, medical, or surgical expenses shall cover breast exams.	ORS 743A.108	2006		Craniofacial anomalies	All health benefit plans providing coverage of hospital, surgical, or dental services shall provide coverage for dental and orthodontic services for the treatment of craniofacial anomalies if the services are medically necessary to restore function.	ORS 743A.150	2013	No	No	Yes	Yes	Yes	Yes					
Chemical dependency and mental or nervous conditions	Group health insurance coverage for treatment of chemical dependency and mental or nervous conditions at the same level as those imposed for treatment of other medical conditions.	ORS 743A.168	2018 orig. 2007		Diabetes management for pregnant women	Health benefit plans may not require a copayment or impose a coinsurance requirement or a deductible on the covered health services, medications, and supplies that are medically necessary for a woman to manage her diabetes during the period of each pregnancy, beginning with conception and ending six weeks postpartum.	ORS 743A.082	2014	Yes 2020	No (Note: does not apply to high-deductible health plans)	Yes	Yes	Yes	Yes					
Child abuse medical assessments	Health benefit plans must pay a community assessment center for services provided in conducting a child abuse medical assessment.	ORS 743A.252	2016		Diethylstilbestrol use by mother	Insurers may not deny issuance of or cancel a health insurance policy solely because the mother of the insured used drugs containing diethylstilbestrol prior to the insured's birth.	ORS 743A.088	1980	No	Yes	Yes	Yes	Yes	Yes					
Clinical trials	Health benefit plans must cover the routine costs of care for patients enrolled and participating in approved clinical trials.	ORS 743A.192	2010		Disease Outbreak	Insurers must cover cost of necessary medical care specified in Ch. 719, 2017 Oregon Laws (HB 3276) when Public Health Director determines a disease outbreak exists. Insurers may not restrict coverage by requiring services be provided by an in-network provider, imposing cost-sharing requirements that are greater than cost-sharing for similar covered services, requiring prior authorization or other utilization management or limiting coverage in any manner that prevents enrollees from accessing necessary health services.	Ch. 719, 2017 Oregon Laws (HB 3276)	7-5-2017	TBD	No	Yes	Yes	Yes	Yes					
Bilateral cochlear implants	Health benefit plans that cover cochlear implants must cover bilateral implants.	ORS 743A.140	2008		Emergency eye care services	Any health benefit plan that provides coverage of eye care services shall allow any enrollee to receive covered eye care services on an emergency basis without first receiving a referral or prior authorization from a primary care provider.	ORS 743A.250	Oct. 23, 1999	No	No	Yes	Yes	Yes	Yes					
Colorectal cancer screenings and laboratory tests	Health benefit plans shall provide coverage for specified colorectal cancer screening examinations and laboratory tests for insureds 50 years of age or older.	ORS 743A.124	2017		Emergency services	All health benefit plans shall provide coverage without prior authorization for emergency services. HB 2339 (2017) added prohibition against balance billing in certain circumstances. HB 3091 (2017) clarifies services to be provided to patients experiencing a behavioral health crisis.	ORS 743A.012	2018, 6-22-2017, orig. 1998	No	No	Yes	Yes	Yes	Yes					
Contraceptives	These plans must provide coverage for prescription contraceptives and, if covered for other drug benefits, must cover outpatient consultations, examinations, procedures and medical services that are necessary to prescribe, dispense, deliver, distribute, administer or remove a prescription contraceptive. Requires dispensing of contraceptives intended to last for a three-month period for the first dispensing and for twelve-month period for subsequent dispensing. A religious employer exemption applies to "religious employers" as defined in the statute.	ORS 743A.066	6-14-17 Orig 2008		Hearing aids	Health benefit plans must provide coverage for one hearing aid per impaired ear to enrollees.	ORS 743A.141 OAR 836-053-0012	2017 orig. 2010	No	No	Yes	Yes	Yes	Yes					
					Human papillomavirus	Health benefit plans must provide coverage of the human	ORS 743A.105	2010	No	No	Yes	Yes	Yes	Yes					

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Required Reimbursements	Description	Statute	Eff. Date	Repeal Date	Other Health Insurance (non-HBP)	Applicable to HCSCs?	Health Benefit Plans (HBP)	Group	Individual

## DISEASES, CONDITIONS, AND SERVICES

Alcoholism	Coverage for alcoholism treatment, at the request of the insured.
Injuries resulting from alcohol, cannabis and controlled substances	Coverage for the medical treatment of injuries caused in whole or in part by the use of alcohol, cannabis or controlled substances subject to policy limitations for other injuries.
Applied behavior analysis	Health benefit plans must cover screening and diagnosis of autism spectrum disorder and for medically necessary treatment for autism spectrum disorder and the management of care.
Breast examinations	Every health insurance policy that covers hospital, medical, or surgical expenses shall cover breast exams.
Chemical dependency and mental or nervous conditions	Group health insurance coverage for treatment of chemical dependency and mental or nervous conditions at the same level as those imposed for treatment of other medical conditions.
Child abuse medical assessments	Health benefit plans must pay a community assessment center for services provided in conducting a child abuse medical assessment.
Clinical trials	Health benefit plans must cover the routine costs of care for patients enrolled and participating in approved clinical trials.
Bilateral cochlear implants	Health benefit plans that cover cochlear implants must cover bilateral implants.
Colorectal cancer screenings and laboratory tests	Health benefit plans shall provide coverage for specified colorectal cancer screening examinations and laboratory tests for insureds 50 years of age or older.
Contraceptives	These plans must provide coverage for prescription contraceptives and, if covered for other drug benefits, must cover outpatient consultations, examinations, procedures and medical services that are necessary to prescribe, dispense, deliver, distribute, administer or remove a prescription contraceptive. Requires dispensing of contraceptives intended to last for a three-month period for the first dispensing and for twelve-month period for subsequent dispensing. A religious employer exemption applies to "religious employers" as defined in the statute.

Required Reimbursements	Description		Eff.	Repeal	Other Health	Applicable	Health Benefit	
		<b>Required Reimbursements</b>	<b>Description</b>	<b>Statute</b>				
		vaccine (HPV)	papillomavirus vaccine for beneficiaries of the plan between the ages of 11 and 26.	836-010-0155 836-053-0012				
		Inmates	Health benefit plans may not deny claims on basis that enrollee, including juvenile enrollees, is in custody of a local supervisory authority; received publicly funded medical care while in custody pending disposition of charges; or care was provided by an employee or contractor of a county or a local supervisory authority. Specific reasons for denial or limitation of benefits also included in this statute.	ORS 743A.260				
Craniofacial anomalies	All health benefit plans providing coverage surgical, or dental services shall provide coverage and orthodontic services for the treatment of craniofacial anomalies if the services are medically necessary.	Nonprescription elemental formula for the treatment of severe intestinal malabsorption	Any policy providing health insurance, except accident only or specific disease only policies, must provide coverage if the formula is needed to treat severe intestinal malabsorption, a physician has issued a written order for the use of the formula, and the formula is at least an essential source of nutrition.	ORS 743A.070				
Diabetes management for pregnant women	Health benefit plans may not require a copayment for prenatal services, medications, and supplies that are necessary for a woman to manage her diabetes during each pregnancy, beginning with the first trimester and ending six weeks postpartum.	Mammogram	Every health insurance policy that covers hospital, medical, or surgical expenses shall provide coverage of mammograms.	ORS 743A.100				
Diethylstilbestrol use by mother	Insurers may not deny issuance of or cancellation of health insurance policy solely because the mother used drugs containing diethylstilbestrol prior to birth.	Mastectomy-related services	All health benefit plans shall provide reimbursement for mastectomy-related services as determined by the attending physician.	ORS 743A.110				
Disease Outbreak	Insurers must cover cost of necessary medical services in Ch. 719, 2017 Oregon Laws (HB 3276). The Director determines a disease outbreak exists and does not restrict coverage by requiring services to be provided by an in-network provider, imposing cost-sharing, or otherwise limiting coverage in any manner that prevents access to necessary health services.	Maxillofacial prosthetic services	All health insurance policies providing hospital, medical, or surgical expense benefits must include coverage for maxillofacial prosthetic services considered necessary for adjunctive treatment...	ORS 743A.140				
Emergency eye care services	Any health benefit plan that provides coverage for emergency services shall allow any enrollee to receive services on an emergency basis without first obtaining referral or prior authorization from a primary care provider.	Inborn errors of metabolism	All health insurance policies shall include coverage for treatment of inborn errors of metabolism.	ORS 743A.180				
Emergency services	All health benefit plans shall provide coverage for emergency services. HB 3276 prohibits against balance billing in certain circumstances. ORS 3091 (2017) clarifies services to be provided for individuals experiencing a behavioral health crisis.	Natural and adopted children	All individual and group health benefit plans shall provide coverage to the child of the insured at the moment of birth and to the adopted child upon placement for adoption.	ORS 743A.090				
Hearing aids	Health benefit plans must provide coverage for hearing aid per impaired ear to enrollees.	Oral anticancer medications	A health benefit plan that covers cancer chemotherapy must provide coverage for oral anticancer medication on a basis no less favorable than intravenous or injected medications.	ORS 743A.060				
Human papillomavirus	Health benefit plans must provide coverage for HPV testing.	Pelvic and Pap smear examinations	All policies providing health insurance shall include coverage for pelvic and Pap smear examinations.	ORS 743A.100				

Required Reimbursements	Description	Statute	Eff. Date	Repeal Date	Other Health Insurance (non-HBP)	Applicable to HCSCs?	Health Benefit Plans (HBP)	Group	Individual
vaccine (HPV)	papillomavirus vaccine for beneficiaries of the plan between the ages of 11 and 26.	836-010-0155 836-053-0012							
Inmates	Health benefit plans may not deny claims on basis that enrollee, including juvenile enrollees, is in custody of a local supervisory authority; received publicly funded medical care while in custody pending disposition of charges; or care was provided by an employee or contractor of a county or a local supervisory authority. Specific reasons for denial or limitation of benefits also included in this statute.	ORS 743A.260	2018 orig. 2015	Yes 2021	No	Yes	Yes	Yes	Yes
Nonprescription elemental enteral formula for the treatment of severe intestinal malabsorption	Any policy providing health insurance, except accident only or specific disease only policies, must provide coverage if the formula is needed to treat severe intestinal malabsorption, a physician has issued a written order for the use of the formula, and the formula is at least an essential source of nutrition.	ORS 743A.070	1994	No	Yes (except accident or specific disease only plans)	Yes	Yes	Yes	Yes
Mammogram	Every health insurance policy that covers hospital, medical, or surgical expenses shall provide coverage of mammograms.	ORS 743A.100	2000 orig. 1994	No	Yes (except accident and disease specific plans)	Yes	Yes	Yes	Yes
Mastectomy-related services	All health benefit plans shall provide reimbursement for mastectomy-related services as determined by the attending physician.	ORS 743A.110	2004	No	No	Yes	Yes	Yes	Yes
Maxillofacial prosthetic services	All health insurance policies providing hospital, medical, or surgical expense benefits must include coverage for maxillofacial prosthetic services considered necessary for adjunctive treatment...	ORS 743A.148	1982	No	Yes (other than limited benefit coverage)	Yes	Yes	Yes	Yes
Inborn errors of metabolism	All health insurance policies shall include coverage for treatment of inborn errors of metabolism.	ORS 743A.188	1998	No	Yes (except accident and disease specific plans)	Yes	Yes	Yes	Yes
Natural and adopted children	All individual and group health benefit plans shall provide coverage to the child of the insured at the moment of birth and to the adopted child upon placement for adoption.	ORS 743A.090	2013 Orig. 1976	No	No	Yes	Yes	Yes	Yes
Oral anticancer medications	A health benefit plan that covers cancer chemotherapy must provide coverage for oral anticancer medication on a basis no less favorable than intravenous or injected medications.	ORS 743A.068	2008	No	No	Yes	Yes	Yes	Yes
Pelvic and Pap smear examinations	All policies providing health insurance shall include coverage for pelvic and Pap smear examinations.	ORS 743A.104	1994	No	Yes (except accident or disease specific	Yes	Yes	Yes	Yes



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# HEALTH INSURANCE: OREGON STATUE

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