

# BIG COUNTRY REGIONAL ADVISORY COUNCIL (RAC)

## Emergency Medical Services Education (EMSE)

### Funding Application Information

#### **General Information** (for reference only)

The COVID-19 pandemic and other long-term factors created staffing challenges in the Texas and National emergency medical services (EMS) industry. Almost every Texas EMS agency continues to experience significant staffing shortages due to EMS professionals feeling the impact of responding to COVID-19. In addition, EMS professionals are leaving the field at a higher rate than ever due to burnout, the risk of COVID-19, and new career opportunities outside of EMS that can offer higher salaries, among other factors. The Texas Department of State Health Services (DSHS) released data indicating that only 35 percent of licensed Texas EMS professionals submitted a patient care report during the first eight months of 2021.

The 87th Texas Legislature recognized the EMS workforce crisis and appropriated \$21.7 million during the third special session to create an EMS education and retention initiative.

The EMS education scholarship funds are distributed based on a documented need. The process strives to meet the needs of the EMS providers. It relies on input from the Regional EMS Offices to determine the severity of the problem and recommendations on funding.

The Department of State Health Services will provide EMS education to students who agree to perform emergency medical services (EMS) for at least one (1) year with a local emergency medical services provider at the EMT level and two (2) years for AEMT and Paramedics. Students who fail to test or become certified and fulfill this agreement within 90 days of the official last day of class may have administrative action taken against them, including but not limited to tuition repayment.

#### **Procedures for Completion and Submission of EMSE Scholarship Funding**

***Follow the steps below to ensure consideration of your request.***

1. Review the EMSE funding program request document thoroughly. Incomplete or incorrectly completed forms may result in delay or denial of your request.
2. Complete the EMSE Funding Application, student agreement forms, and course schedule. These are to be completed for and by the course sponsor, course coordinator, or by a sponsoring EMS provider. Incomplete forms will delay the processing of your request, which will delay your proposed course start date. **The completed application and all supporting documents must be submitted and approved prior to your proposed course start date.**

## Submission

The EMSE scholarship funding application and all other supporting documents must be submitted to Big Country RAC.

Signatures of the course coordinator, course sponsor, or sponsoring EMS provider are required to process the submitted request to affirm all parties are aware of this course and that all information submitted on the application is accurate.

**Note: Do not start a class before receiving final RAC approval.** Once the application for EMSE scholarship funding is complete the student or sponsor will send the forms to the RAC office at [marlee\\_puckett@yahoo.com](mailto:marlee_puckett@yahoo.com) or fax # 877-412-7701. The student or sponsor is responsible for verifying the RAC office has received all documents. Reimbursement **will not** be authorized for any requested EMSE scholarship funding course begun without prior approval.

## Penalties

Falsifying or omitting documentation related to the need or situation will result in revocation of funds. Persons who knowingly submit erroneous or fraudulent information will be subject to actions by the DSHS in accordance with either 157.16 (relating to provider license) or 157.36 (relating to EMS personnel), as appropriate. It is understood that it is a Class A misdemeanor violation of Texas Penal Code sec. 37.10 to submit a false statement to a governmental agency.

## Approval Process

### ► Approval

1. Upon receipt of a complete application, the RAC will compile the application information to ensure complete information is ascertained for approval.
2. The RAC will then approve the EMSE application.
3. The RAC will make payment to the EMS Education Program or the EMS Provider.
4. An EMSE scholarship application will not be approved for payment if the course starts prior to the official notification by the RAC.

**Note:** Each EMSE scholarship funding application will have a prescribed start and end date, which should be ample time to complete the course. (EMT – maximum of 120 days to complete, AEMT – maximum of 240 days to complete, Paramedic – maximum of 365 days to complete) The end date of an application, though firm, can be extended under extenuating circumstances. **It is essential that the education sponsor contact the RAC immediately if, for some reason, the course cannot be completed by the approved date.**

Approval of EMSE scholarship funding applications will be determined based on the approved statement of work provided to the RAC. In addition, applications from rural or

underserved counties and counties with a demonstrated need for EMS education will be given special consideration.

- **Rural** Criteria: A county or area with less than 50,000 in population, and EMS care exists with a response time of ten minutes or more.
- **Underserved** Criteria: A county or area in which the minimum level of or timely response of EMS care does not exist, such as EMS response time is delayed due to impact from the lack of staff.

▶ **Non-Approval**

1. If the RAC does not recommend funding the EMSE request, an email will be routed to the requesting person or entity.
2. The requesting person or entity has the right to appeal the decision to the RAC leadership.
3. The requesting person or entity has the right to appeal the decision to the DSHS leadership for final consideration.

**Special Notes**

***Do not start a class before receiving final approval, as any class that begins without prior approval will not be funded.***

The EMS education sponsor or EMS provider will not be compensated for any expenses incurred before the start of the class that are not explicitly stated within the approved application, except for educational supplies or materials. Payments will only be made to the EMS education sponsor or EMS provider named in the application that is specified to be no higher than the following amount:

- Paramedic Education at \$8,000 per person
- Advanced-EMT Education at \$3,200 per person
- EMT Education at \$2,000 per person

**Submission of Application**

Application requests will be submitted to Big Country RAC.

**Payment Process**

The RAC will enter into an agreement with an EMS education program or EMS provider.

It is the responsibility of the education program or sponsoring EMS provider to provide the education, books, necessary materials, and the student cost for taking the National Registry EMT examination process one (1) time.

For auditing purposes, the person or entity submitting the application should have a valid Taxpayer Identification Number [either an Employer Identification

Number (EIN), Vendor Identification Number (VIN), or Texas Identification Number (TIN)] before entering into an agreement with the local RAC. Valid Taxpayer Identification Numbers are issued for the purpose of tax administration and are not intended for participation in any other activities (e.g., tax lien auction or sales, lotteries, etc.). The person or entity who submits the application must be in good standing with the state, and if applicable, their franchise tax account status must be "active." For more information or to verify your status, please visit the Texas Comptroller of Public Accounts [website](#).

### **EMSE Scholarship Standards**

Scholarships will be provided based on the following standard(s):

1. The EMS course sponsor or the sponsoring EMS provider will receive the amount directly from the RAC in the amount stated above.
2. The amount will be forwarded to the EMS education program or the sponsoring EMS provider before the student starts the course.

### **Book(s) and Course Material(s)**

Costs of textbooks, education materials, and one (1) NREMT exam should be considered in the scholarship amount stated above.

### **Travel or Employment Compensation**

There will be no travel costs or backfill payments for employers when the student is in class. The intent of this project is to provide future EMS personnel with education leading to EMS certification at minimum cost to the student.

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### **EMSE Funding Application**

***Failure to complete all applicable information may delay application processing/approval.***

1. Name of sponsoring agency/organization or EMS education program
2. Physical address (street, city, and zip code)
3. Mailing address, if different from physical (PO box, street, city, and zip)
4. EMS Provider license number
5. County or counties your service provides care to
6. Regional Advisory Council/Trauma Service Area
7. Name of EMS education program if an EMS provider provides the application
8. A signed agreement by the student to provide EMS in an ambulance for one (1) year for EMT and two (2) years for AEMT and Paramedic within 90days of the last official day of class
9. Projected start and end date of the course

Counties with less than 50,000 in population or underserved areas will be considered higher priority for funding.

Counties with higher population levels will be determined on a case-by-case basis.

### **Course Sponsor**

- To be completed by the course sponsor.
- Signature of Course Coordinator is required.
- A valid Taxpayer Identification Number (TIN) should be listed in the application process. If a TIN is not assigned, go to the Texas Comptroller of Public Accounts [website](#) for directions on how to obtain one.
- Type of Entity: Non-Profit or For-Profit AND indicate if with the city or county (if applicable).
- If the above information or forms are not submitted and completed, your application request may be withheld, which could delay the course start date.



Regional Advisory Council

# Student Agreement

Student's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

County of Residence: \_\_\_\_\_

County of EMS Services: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

EMT-B

AEMT

EMT-P

I, \_\_\_\_\_ (student printed name), agree to provide (1) year of service as an Texas EMS Provider in an ambulance at the EMT-B level or two (2) years as an AEMT or Paramedic for which I received this education. The commitment is 96 hours per month until completed. In return for receiving the EMSE scholarship under the 87<sup>th</sup> Texas Legislature, Senate Bill 8, I will successfully complete the class and the NREMT certification examination.

By checking this box , I understand that failure to complete the required year(s) of service may cause the Texas Department of State Health Services to take administrative action against me, including but not limited to tuition repayment.

By checking this box , I understand that if I drop or fail the course; fail the NR exam; or do not become certified at the level of education received; I have to return the full amount of the scholarship to the Big Country RAC.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Sponsoring EMS Provider Information Form

(must be completed by the Administrator of Record)

Sponsoring EMS Provider			
Administrator of Record			
Mailing Address		TX	
Physical Address		TX	
Phone #			
Office #			
DSHS Firm ID #			
Email Address			
Employer Identification Number (EIN)			
County			
Course Start/End Date	Start Date:		End Date:
Type of Certification			
Name of Medical Director			

**By checking this box , I understand on behalf of the Sponsoring EMS Provider: 1) these scholarship funds may not be used to supplant current budgets; 2) must track the 96 hours month for 1 year (EMT-B) or 2 years (AEMT or EMT-P) and report to BCRAC; 3) will help recoup any scholarship funds if the student drops or fails course or never passes NR exam.**

Signature of Sponsoring EMS Provider

Date

Printed Name, if different than above: \_\_\_\_\_

## EMS Course Information

(completed by Course Coordinator)

Student's Name	
Date of Birth	
EMS Agency:	
Comments:	

Coordinator Name			
Name of Education Program Affiliation			
<input type="checkbox"/>	Check this box to verify that the EMS Education Program is aware and has agreed to allow students to test upon completion. Incentive only applies to initial exam pass.		
<input type="checkbox"/>	Check this box to verify that the EMS Education Program understands that if the Student drops the course and is due a refund any amount paid on the students behalf by BCRAC should be repaid to BCRAC and not the student		
Mailing Address		TX	
Office and Fax #		<input type="checkbox"/>	Check if Hybrid Course
Email Address(es)			
DSHS EMS Education ID #			
Course Approval #			
Type of Course	<input type="checkbox"/> EMT-B	<input type="checkbox"/> AEMT	<input type="checkbox"/> EMT-P
Location Course & Clinicals			
Course Start/End Dates	Start Date:	End Date:	

Education Program Contact Printed Name

Signature

Date



## Verification Form

Student's Name: \_\_\_\_\_

### To be completed by BCRAC Staff

SB8 Contract Start/End: **9/1/2022 - 12/31/2024**

Confirm Course Start Date: \_\_\_\_\_

Confirm Course End Date: \_\_\_\_\_

Certification: EMT-B                       AEMT                       Paramedic

Amount of Funds Available: \$ \_\_\_\_\_

Contract Funds Encumbered: \$ \_\_\_\_\_

NR Exam Passed    1st     2nd     3rd     4th     Failed

Comments:

Approved                       Not Approved

RAC Signature: \_\_\_\_\_

Date:

RAC Staff Printed Name: \_\_\_\_\_

Paid to: \_\_\_\_\_                      Amount: \$ \_\_\_\_\_

Date Issued: \_\_\_\_\_