

FAQ

Frequently Asked Questions

By Mattie Mendoza and Phil Lockwood

Q | I submitted my Texas EMT Renewal application a few days prior to my expiration date. Can I still work after my EMT expiration date if my application hasn't been approved?

DSHS: No. According to TAC §157.34(a)(3), to maintain certification status without a lapse, an applicant shall submit a completed application for recertification and shall meet all requirements for renewal of the current certification prior to the expiration date of the current certificate, but no earlier than one year prior to the expiration date.

Application processing time is approximately four to six weeks. To ensure there is no lapse in certification, applicants need to submit a complete Renewal application *at least* four to six weeks prior to the expiration date. As of midnight on your certification expiration date, you are considered expired and are no longer able to work legally in Texas. You can submit your Renewal application through the EMS Certification website at www.dshs.state.tx.us/emstraumasystems/recertinfo.shtm. For questions or more information, contact the EMS Certification office at (512) 834-6700.

Q | I need to renew my EMT-Basic certification, but I have almost completed the EMT-Intermediate class. Can I use the EMT-I class as CE hours to renew my EMT-B certification?

DSHS: Yes. In TAC §157.38(e)(1) “approved educational activities” refers to workshops, seminars, conferences, short-term courses, credit courses or continuing education courses provided by accredited institutions of higher education, clinical learning experiences, individualized instruction,

distributive learning courses, and other learning activities that are related to EMS or that enhance the professional EMS practice of the certified or licensed EMS personnel.

As long as the CE comes from an approved provider and falls into the required content areas, you can count those continuing education hours. You may be required to submit proof of the course completion, as well as a breakdown of the hours in the appropriate content areas. You will find more specific information about continuing education on our website at www.dshs.state.tx.us/emstraumasystems/continuinged.shtm. For questions or more information, contact the EMS Certification office at (512) 834-6700.

Q | I recently moved and need to notify DSHS of my new address. How do I do that?

DSHS: You will need to submit the Address/Name Change form. The form can be found on the EMS Certification website at www.dshs.state.tx.us/emstraumasystems/Address_Name_Change.pdf. There is no fee to update your address or name, and the form can be mailed in or faxed to (512) 834-6714.

There is a \$10.00 fee if you would like a new wallet card printed and mailed to you. In addition to the Address/Name Change form, you will need to submit the Wallet Card Replacement form. The Wallet Card Replacement form can also be found on the EMS Certification website at www.dshs.state.tx.us/emstraumasystems/idcard.pdf.

If you have any questions, contact the EMS Certification office at (512) 834-6700.

Q | I just used the Check Your Certification Status tool on

the EMS Certification website, and my status reads, “Expired, Active.” What does that mean?

DSHS: The EMS Certification database classifies each certification with two distinctions. The first distinction is either “Current” or “Expired.” That notation refers to your expiration date. Either your certification is current, or it is past your expiration date and no renewal application has been approved to date, and your certification is therefore expired. The second distinction is either “Active” or “Inactive.” That notation indicates you are either on Active Status or you have chosen to go on Inactive Status by submitting the Inactive/Active EMS Certification/Licensure application.

Most people who choose to go on Inactive status do so because they are not currently working in the EMS field and either can't or choose not to renew their certification as active. Anyone considering going on Inactive status should read and consider the specific rules regarding Inactive status and to returning to Active status before choosing to go on Inactive status. You can find those rules on our website at [http://info.sos.state.tx.us/pls/pub/readtac\\$ext.TacPage?sl=R&app=9&p_dir=&p_rloc=&p_tloc=&p_ploc=&pg=1&p_tac=&ti=25&pt=1&ch=157&rl=34](http://info.sos.state.tx.us/pls/pub/readtac$ext.TacPage?sl=R&app=9&p_dir=&p_rloc=&p_tloc=&p_ploc=&pg=1&p_tac=&ti=25&pt=1&ch=157&rl=34). It is listed under TAC §157.34(e). Any questions concerning your current status should go to the EMS Certification office at (512) 834-6700.

Q | I need to clear up my deficient application. What is the quickest way to get the corrected information to you?

DSHS: You may fax your corrected application, a copy of your National Registry card, out-of-state verification forms (for reciprocity

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applicants) or a copy of your transcripts (for licensed paramedics) to (512) 834-6714. If you owe additional fees, you will need to mail a copy of your application and the owed amount to the address listed on the application or deficiency letter. For more information about renewal deficiencies, contact the EMS Certification office at (512) 834-6700.

Q | I'm researching EMS history. What are the major milestones in Texas EMS development?

DSHS: A good starting point is the EMS Act of 1973, HB 855, Article 4447 of Vernon's Texas Civil Statutes. Although a law dating back to 1943 was in place, the 1973 act had the most impact. It established the first advisory council, initiated most of the EMS regulation we currently provide, called for coordination of federal EMS program participation (i.e. categorical grant funding) and mandated development of a state plan. Legislation passed in 1989 (HB 18) recodified the EMS statute under the Health and Safety Code, established a statewide EMS trauma system and mandated the formation of the Trauma Technical Advisory Committee (TTAC). The advent of functioning trauma systems across the state is hard to date, but that's certainly another major milestone.

Q | What are the major milestones in EMS nationwide?

DSHS: The Highway Safety Act of 1966 that required states to adopt highway safety programs (including "emergency services") spawned National Highway Traffic Safety (NHTSA) leadership, which included the writing of national standard curricula for EMS, provided funding

for states to develop EMS offices and developed model state EMS legislation. In 1973, Title XII of the Public Health Services Act provided \$300 million in funding to the states. (That was actually a lot of money back then.) The NHTSA "Agenda" series was another important milestone. In 1996 the *EMS Agenda for the Future* was the first of several white papers that helped shape a new national EMS vision. The *Pew Health Professions Commission Taskforce* of 1996 made some historic recommendations for uniformity of EMS regulation across the nation. And the American College of Surgeons was another important player. Starting with the development of the first training program for EMS attendants in the 1950s, their continuing involvement over the years has been monumental.

Q | What are some of the most notable but least-known facts about Texas EMS?

DSHS: It's hard to guess what others don't know. One of the most shocking things to most people is that in many (if not most) areas of the state, EMS is **not** considered an "essential service," such as law enforcement. There are few, if any, volunteer garbage pick up services, but many areas of Texas rely on the goodness of volunteers to provide EMS because it wouldn't be provided otherwise.

Q | What are some of the most notable but least-known facts about EMS nationwide?

DSHS: Probably that the Department of Transportation, through NHTSA, is the federal "parent" agency to EMS. Although there are other notable health care connections to EMS nationally (i.e., HRSA), NHTSA is the main go-to federal agency for emergency medical services support.

The highway/traffic safety connection may also help to explain why the Medical Advisory Board for Driver Licensing is a program within EMS. Another surprising fact may be that levels (training/licensing) of EMS professionals are not consistent from state-to-state. And there is actually a National EMS Advisory Council (NEMSAC). For more information on NHTSA, NEMSAC and a variety of EMS information, see www.ems.gov.

Q | One of the tenets of studying and understanding history is to keep from repeating historic mistakes. Are there any "potholes" in EMS history we should avoid?

DSHS: There are a few potholes that should be mentioned, although none are big enough to swallow the car. The "Johnny and Roy" syndrome is one. The 1970s TV show *Emergency*, which showcased paramedics Johnny Gage and Roy DeSoto, was both a positive and a negative influence on EMS. It brought EMS into the limelight, but it created a stereotype for EMS that continues today, and it may have ironically decreased support for EMS because of an assumption that all EMS systems function like Johnny and Roy's—folks may have little regard for the varieties of service levels and/or disparity of funding. Another pothole is simply the public's resistance to change, which is second only to its resistance of taxation. Changing the status quo will be necessary if sufficient funding is to be provided for EMS statewide. Systems that have historically existed by a "wing and a prayer" may have to continue to do so if the future resembles the past.