



EMS Course Notifications Move Online

Streamlining education paperwork and fee collection.

Presented by: DSHS EMS Compliance



Objectives:

- ▶ Discuss the online accounts created for programs
- ▶ Preview of the online applications before they go live on October 26, 2015.
- ▶ Uploading documents to go with your online application or course notification.
- ▶ Briefly cover third party pay. DSHS will have a separate webinar for this.
- ▶ Discuss paying by credit card or ACH (electronic check).
- ▶ Where to get help & support for the online applications.

We are all in this TOGETHER!

We are asking for your help in streamlining paperwork and fee collection to Austin, so that EMS field staff have more time to spend in the field.



Sign up for Updates & the EMS & Trauma Newsletter

[Home](#) > [EMS-Trauma Systems](#) > EMS-Trauma Systems

EMS-Trauma Systems

 Sign up for e-mail updates

NEW!

Sign up to receive announcements by email regarding the EMS Trauma Systems program. This feature will serve as a tool to increase communication with stakeholders regarding new information added to the website.

► <http://www.dshs.state.tx.us/emstraumasystems/Email-Updates.shtm>

**THE FOLLOWING PREVIEW HAS BEEN APPROVED FOR
ALL AUDIENCES**

Lets take a look at an online account
and the new course notification
online application.

The following slides can be found in
more detail in the EMS Course
Notification Help Document

Your New Online Account

- ▶ We created accounts based on the emails you submitted after coordinator updates.
- ▶ Each email account will receive an email from us with a password and secret question.
- ▶ When you log in, the system will force you to change your password.



Online Licensing Services

| [Help & Support](#) | [Contact Us](#) |

Attention: *Tanning Facilities, Bottled / Vended Water Operators, Contact Lens Dispensers, and Opticians, please read [this notice regarding de-regulation of regulatory programs](#).*

Check License Status or Search for a License

It is not necessary to register or login to view or search for a license or certification. Begin your [license search](#) here to verify that a license holder has a current license with the Department of State Health Services. You can search by name, license type, city or county.

Apply for a New License

To apply for an initial license, please see the [Online Licensing Eligibility](#) page to check if your license type is supported before you [register as a new user](#). If you have previously registered using this system, it is not necessary to create another user registration to apply for a new license.

Renew Your License

To renew an existing license, please verify that your license type is [eligible for online renewal](#). Once you have confirmed that your license may be renewed online, please login with your existing user ID and password, or [register as a new user](#).

Asbestos Notifications

It is not necessary to login to view asbestos notifications. [Search for a notification](#) by project location, date, name or notification number. If you wish to submit an asbestos notification, you may [register as a new user](#) if you have not previously registered using this system.

[Contact Us](#) | [Compact with Texans](#) | [File Viewing Info](#) | [Internet Policy](#)
[Statewide Search](#) | [Homeland Security](#) | [Texas.gov](#)

Returning User

User ID:
Password:

[Forgot user ID?](#)
[Forgot password?](#)

Sign In

New User

 Create a new online account as a first time user. Log in with the password emailed to you to access online services.

[Register as a new user](#)

Quick Start Menu...

The screenshot shows the Texas Department of State Health Services Quick Start Menu. At the top, it says "TEXAS Department of State Health Services" and "Logged in as User, Test". There are links for "Update Profile", "Logoff", and "Contact Us". A red callout box with an exclamation mark points to a "License Information" box that says "No License Information Available". Another red callout box with an exclamation mark points to a "License Information" box that shows "License Number: #000000" and "License Type: Basic Initial Education Program". A green callout box with the number "1" points to the "Apply for a New License" section, which has a dropdown menu for "What are you applying for?" with options "<Choose Board>" and "<Choose Application>". A green callout box with the number "2" points to the "View Application Status" section, which has a button "Check Status of Your App...".

Quick Start Menu
To start choose an option and you will return to this Quick Start menu after you have finished. If no licenses display under the options, and you are interested, select 'Add Licenses to Registration' to add your license(s) to your registration. Go to Asbestos/Demo Notifications menu below to submit, search or pay for a Notification invoice.

It is time to Renew
Basic Initial Education Program #000000 **Renew Education Program** **Select**

Apply for a New License
What are you applying for?
<Choose Board> <Choose Application> **Select**

View Application Status
Check Status of Your App... **Select**

Additional Activities
Pay for Online Applications (1) **Select**
Add Licenses To Registration **Select**

The Application

The screenshot shows the Texas Department of State Health Services website. The header includes the state logo and the text "TEXAS Department of State Health Services". Navigation links include "Contact your licensing board or program | Internet Policy", "Logged in as User, Test", and "Main Menu | Update Profile | Logoff | Contact Us".

The main content area is titled "Initial Course Application - Introduction". On the left is a sidebar menu with the following items: Introduction (selected), Function Suitability, Name and Organizational Details, Contact Information (with an information icon), Select Attributes (with an information icon), Course Information, Clinical Agreements, Field Intern Agreements, Other Agreements, Classroom Agreements, Equipment Agreements, Attachments, Related Licenses Listing, and Application Summary.

The main content area contains the following text:

Initial Course Application - Introduction

Welcome to the Office of EMS/Trauma Systems Coordination online application for initial licensure for an Emergency Medical Services Course Program. Follow the instructions on each screen to complete your application. Your information will not be saved until you complete the application and submit your information and fees.

Press "Next" to continue.

Press "Cancel" to cancel this application and return to the main menu.

PRIVACY NOTIFICATION: With few exceptions, you have the right to request and be informed about information that the State of Texas collects about you. You are entitled to receive and review the information upon request. You also have the right to ask the state agency to correct any information that is determined to be incorrect. See <http://www.dshs.state.tx.us> for more information on Privacy Notification. (Reference: Government Code, Section 522.021, 522.023, 559.003, and 559.004)

At the bottom right of the main content area are two buttons: "Next" and "Cancel".

The footer contains the text: "DSHS Certifications, Licenses and Permits | Disclaimer" and "Last Updated Mar 27, 2013".

NAME AND ORGANIZATIONAL DETAILS

TEXAS
Department of State Health Services

[Contact your licensing board or program](#) | [Internet Policy](#)
Logged in as **User, Test**

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[Contact Information](#)
[Select Attributes](#)
Course Information
Clinical Agreements
Field Intern Agreements
Other Agreements
Classroom Agreements
Equipment Agreements
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Application Summary

Initial Course Application - Name and Organizational Details
Please enter your organizational details and press "Next" to continue.
Press "Previous" to return to the previous section.
Press "Cancel" to cancel this application and return to the main menu.

Organization Name: TEST EMS PROGRAM
Doing Business As Name:
Tax Number: 123456789

[Previous](#) [Next](#) [Cancel](#)

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CONTACT INFORMATION

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Initial Course Application - Contact Information

Press "Previous" to return to previous page.
Press "Next" to go to next page.
Press "Cancel" to Cancel application and go back to Quick Start Menu.
If Return to Summary Button is available. Press "Return to Summary" to return to the summary.
If Delete Button is available. Press "Delete" to delete the address.
If Copy Button is available. Press "Copy" to copy a previously entered address.
Select an address type and press "Add" to add a new address.

Contact Information

Main Address

Street Number: 1100
Address: WEST 49TH ST
Zip Code: 78756
City: AUSTIN
State: Texas
County: TRAVIS
Country: United States
Phone Number: 512-834-6700 (999-999-9999)
Extension: 2329
E-mail: 2329

Classroom Location

Course Location
Program Mailing Address
Coord Mail Addr
Prin Instr Mail

Add Another Contact

Contact Type:

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CONTACT INFORMATION CONTINUED

☐ Course Location

Copy From: 1

Street Number:

* Address:

* Zip Code: 2

* City:

* State:

* County:

Country:

* Phone Number: (999-999-9999)

Extension:

E-mail:

* Organization Name: 3

SELECT ATTRIBUTES

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Initial Course Application - Select Attributes

Listed below are the license attributes you may add or delete.
Please select/de-select the desired attribute and press "Next" to continue.
Press "Previous" to return to the previous section.
Press "Cancel" to cancel this application and return to the main menu.
If Return to Summary is available. Press "Return to Summary" to return to the summary.

1

Attribute Type: Additional Attributes (please check all that apply)
Attributes: Exempt from Licensing Fees

Attribute Type: Type of Business (please select only one)
* Attributes:

2

- AEMT Initial Course
- AEMT Re-Certification Course
- AEMT Remedial Course
- Coordinator Initial
- ECA Initial Course
- ECA Re-Certification Course
- ECA Remedial Course
- EMD Initial
- EMD Instructor Initial Course
- EMT Initial Course
- EMT Re-Certification Course
- EMT Remedial Course
- Instructor Initial Course
- Paramedic Initial Course
- Paramedic Re-Certification Course
- Paramedic Remedial Course

Attribute Type: Category
Attributes: Course Closed to Public

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COURSE INFORMATION

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Initial Course Application - Information
Press "Previous" to return to previous page.
Press "Next" to go to next page.
Press "Cancel" to Cancel application and go back to Quick Start Menu.
If Return to Summary Button is available. Press "Return to Summary" to return to the summary.
If Save Button is available. Press "Save" to save the information and return to the summary.

Course Information

- Program Course Name:
- Course Location Name:
- Number of Students:
- Course Start Date: (mm/dd/yyyy)
- Course End Date: (mm/dd/yyyy)
- Monday: Yes No
- Monday Begin Time:
- Monday End Time:
- Sunday: Yes No
- Sunday Begin Time:
- Sunday End Time:
- Tuition:
- Notes:

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AFFILIATION AGREEMENTS

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Initial Course Application - Information
Press "Previous" to return to previous page.
Press "Next" to go to next page.
Press "Cancel" to Cancel application and go back to the Start Menu.
If Return to Summary Button is available. Press "Return to Summary" to return to the summary.
If Save Button is available. Press "Save" to save the information and return to the summary.

Add Field Intern Agreements [Add](#)

Field Intern Agreements

Affiliate Name:

Expiration Date: (mm/dd/yyyy)

Notes:

[Remove](#)

[Previous](#) [Next](#) [Cancel](#)

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Navigation Menu:
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UPLOADING DOCUMENTS

- ▶ Now taking PDF version of documents.
- ▶ Use Short Names.
- ▶ We hope to have less paper to deal with.





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Introduction	Initial Course Application - Attachments
Function Suitability	Please upload a course schedule. Locate a file with the "Browse" button and press "Attach" or "Remove" as is required.
Name and Organizational Details	Press "Next" when there are no more files to attach.
Contact Information	Press "Previous" to return to the previous screen.
Select Attributes	Press "Cancel" to cancel this application and return to the main menu.
Course Information	File Name: <input type="text"/> <input type="button" value="Browse..."/>
Clinical Agreements	Notes: <input type="text"/>
Field Intern Agreements	<input type="button" value="Attach"/> <input type="button" value="Previous"/> <input type="button" value="Next"/> <input type="button" value="Cancel"/>
Other Agreements	
Classroom Agreements	
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Related License



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Application Summary

Initial Course Application - Related Licenses Listing

Enter in the license numbers for the required related licenses in the bottom section if required. You can delete any related licenses by clicking the Delete hyperlinks.

Add any optional related licenses using the Add a New Relationship section.

Add a New Relationship

Type of Relationship	Coordinator [I am the: Education Program] (Required) ▼
License Type of Coordinator	EMS Educator ▼
License Number	<input type="text"/> Add

Type of Relationship	Course-Medical Director [I am the: Course] ▼
License Number	<input type="text"/> Add

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Paying by credit card, ACH (ACH = electronic check) or Third Party Pay.

- ▶ All applications (paper or online) must pay the online fee.
- ▶ The Texas Online fee is a fixed fee, so we are able to accept credit card payments.
- ▶ The online fees adds \$2 to \$5 per application.
- ▶ New Fees can be found at:
- ▶ <http://www.dshs.state.tx.us/emstraumasystems/EMS/sfees.shtm#Education>



Choose Payment Option

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Online Application Payment
Select the applications you wish to pay for and press "Next" to continue

Press "Main Menu" to return to the main menu

Application Number	Description	License Number	License Type	Applicant Name	Fee
11013	Initial Course Application		EMS Course	TEST EMS PROGRAM	\$30.00 <input checked="" type="checkbox"/> To Third Party

Payment Method

Credit Card
 ACH

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THIRD PARTY PAY

- ▶ Will allow another person to pay for any applications you submit.
- ▶ Look under Update Profile.



View User Profile

Press "Edit" to edit your name, email address, or user ID.

Press "Retire" only if you have no licenses attached to this account and never plan to use this account in the future.

Press "Previous" to go to the main menu.

Personal Information

First Name:	Test	
Second Name:		
Last Name:	User	
User ID:	TEST1234	Edit Retire

Password

Password:	*****	Edit
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Secret Question and Answer

Secret Question:	123456	Edit
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Third Party Payments

Payer Number	3242323	
Accept Payment Requests	No	(what's this?) Turn On

[Previous](#)

HELP & SUPPORT

Start at this web page first:

Online licensing Help Center - Regulatory Services

<http://www.dshs.state.tx.us/regulatory/online-licensing>

EMS Education Programs

<http://www.dshs.state.tx.us/emstraumasystems/educationprograms.aspx>

Will have specific help documents for educators about programs and courses.

Online Licensing Help Center - Regulatory Services

[Online Licensing System](#) | [Contact Us](#)

Registration and Logging In

- [Who Should Register?](#)
- [Which Licenses May Be Renewed Online?](#)
- [Logging In](#)
- [Lost Password](#)
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Managing Licenses

- [View Your Licenses](#)
- [Add a License to Your Account](#)
- [Licensing Boards and Programs](#)

License Applications and Renewals

- [New License Applications](#)
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- [Check Status of Applications](#)
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Online Payment

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Personal Information and Account Details

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- [Update Email Address](#)
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Technical Support

- [Locked Out of Account](#)
- [Minimum Browser Requirements](#)
- [Contact Support](#)

HELP & SUPPORT

▶ Your local regional or field office is always a good place to start.

▶ Field Office Contacts:

<http://www.dshs.state.tx.us/emstraumasystems/regions.shtm>

▶ emscompliance_central@dshs.texas.gov

Questions

- ▶ When do educators need start mailing paper work to Austin?
- ▶ When do the online applications go live?
- ▶ How long will it take to get my course approved?
- ▶ What if there is a deficiency?
- ▶ How will I get my approval letter?
- ▶ If I apply online, can I still mail my payment to Austin?