

Texas EMS Trauma News

Fall 2025
Volume 12 No. 4

Office of EMS Trauma Systems
Texas Department of State Health Services
dshs.texas.gov/dshs-ems-trauma-systems

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Access current news, initiatives, and publications from national EMS and public health organizations, as well as links to GETAC, rules, and enforcement actions.

FROM THIS SIDE

Insight • Inspiration • Ideas



DSHS EMS Trauma Systems is now an approved EMS Continuing Education Program

On September 11, we hosted our inaugural webinar, *EMSTR Data Quality Webinar Series: Thorough Documentation When It Matters Most*, featuring the DSHS EMS Trauma Registry (EMSTR) team. We are excited to offer continuing education credits for educational activities sponsored by DSHS and other approved external partners. This session is available to view on the EMSTR website.

Keep an eye out for upcoming webinars from DSHS that you can now use toward meeting your EMS Continuing Education requirements.

Looking for more educational opportunities?

Continuing education (CE) is a vital component of maintaining excellence in Emergency Medical Services (EMS). As prehospital care providers, staying current with evolving protocols, evidence-based practices, and emerging technologies ensures the highest standard of patient care. Our EMS continuing education credit opportunities are designed to help providers meet certification requirements, sharpen clinical skills, and strengthen professional readiness. These programs support lifelong learning, empowering EMS professionals to deliver safe, effective, and compassionate care in the communities they serve. Whether you're seeking to deepen your expertise, meet certification requirements, or explore new areas of knowledge, these programs offer flexible pathways to achieve your goals.



Pediatric Continuing Education

The Texas EMS for Children Program (EMSC) is collaborating with EMSTS to promote the Texas Prehospital Pediatric Readiness Education Series. This initiative, endorsed by the Governor's EMS and Trauma Advisory Council (GETAC), aims to equip prehospital providers with critical skills necessary for delivering effective emergency care to children, thereby reducing morbidity and mortality rates associated with pediatric emergencies.

To learn more, check out the [Educational Opportunities](#) section of the DSHS GETAC webpage, where you have a couple of options for accessing the CE offerings. Each month, Sam Vance from EMS for Children (EMSC)-Texas State Partnership, arranges a live presentation from one of Texas's very own pediatric emergency medicine practitioners. If you are unable to attend the live version, most of the presentations are available via recording on the [Baylor College of Medicine – EMSC Education webpage](#). Both options provide the opportunity for an hour of CE credit. The best part is that they are FREE. Some of the educational topics presented thus far include pediatric readiness in EMS, diabetic ketoacidosis, pediatric resuscitation, recognizing signs of a trafficked pediatric patient, multi-system trauma, and pediatric triage tools for EMS.

Deidra Lee, MA
GETAC/RAC Program Specialist
DSHS EMS Trauma Systems Section



Mental Health and Substance Use Continuing Education

In partnership with the Texas Department of State Health Services (DSHS), the [Heroes First Responder Education Program](#) is providing free one-credit-hour CE opportunities for first responders. There are fourteen courses to choose from – here are a few of those offered:

- [First Responder and Healthcare Leadership Support: Culturally Competent Care](#) aims to provide leaders within first responder and healthcare agencies with essential tools to engage in discussions surrounding substance use and mental health.
- [Substance Use Disorder in the First Responder Workforce](#) “provides first responders with the tools and information necessary to recognize and address symptoms of substance use and mental health disorders in themselves or others.” It is self-paced and online, accommodating first responder schedules.
- [Alcohol Use Disorder and Its Treatment](#) introduces learners to the concepts of alcohol use disorder and its development, diagnosis, experience, and treatment.
- [Understanding and Coping with Anxiety](#) focuses on helping the first responder recognize and cope with acute or chronic stress, anxiety, and PTSD using evidence-based strategies. Remember that the [Heroes Helpline](#) (1-833-EMS-IN-TX) is available 24/7 for first responders.
- [First Responders’ Guide to Understanding Suicide](#) aims to provide insight into suicide and suicide prevention within the first responder and healthcare communities. In addition to understanding the unique risks to first responders, learners will be equipped with valuable resources to help themselves or their colleagues in times of need.

The EMSC and HEROES training modules are a valuable resource for meeting the continuing education requirements necessary for the renewal of your certification. They provide essential knowledge for effectively engaging with our youngest patients and offer valuable insights into substance use and mental wellness areas that can have a significant impact on both patient outcomes and the well-being of healthcare providers.

NASEMSO Pediatric Transport Guidance Updates

The Safe Transport of Children Committee of the National Association of State EMS Officials (NASEMSO) has recently updated the following documents related to the transport of children in ground ambulances:

Safe Transport of Children by EMS: Interim Guidance

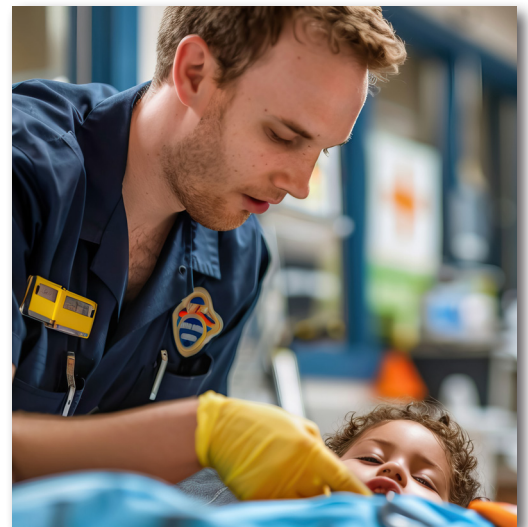
[View document](#)

This document was approved by the NASEMSO Board of Directors on March 8, 2017, and has now been reaffirmed as of August 14, 2025. There are no major revisions, but the document continues to highlight a commitment to safe pediatric transport practices.

Pediatric Transport Products for Ground Ambulances

[View Document](#)

The NASEMSO Board of Directors decided that as of August 14, 2025, no further updates will be made to this document. The document will remain available for historical reference but be aware that product changes and market availability may differ.



Additional resources for safe transport of children are available on the [NASEMSO website](#).

Texas EMS Conference - November 23-26

Join your fellow EMS professionals in Fort Worth for the 2025 [Texas EMS Conference](#). There's a great line-up this year, with something for everyone. I look forward to seeing y'all there!

Take care! -Joe



From Scoop and Run to Science and Systems - 40 Wonderful Years of Controlled Chaos

CE: Preparatory

Opening Session
Ed Racht, MD

November 24, 8:00-9:15 AM | Ballroom AB

GETAC Participation

Council and committee meetings

Governor's EMS and Trauma
Advisory Council

November 22-24
Omni Fort Worth

Ask Joe: Q&A With the State EMS Director

CE: AOR, Preparatory

Joseph Schmider, DSHS EMS
Trauma Systems Section

November 25, 8:00-10:15 AM
Meeting Room 203AB

Texas EMS Trauma Awards Luncheon

Celebrate exceptional service
and the profound impact they
have on our communities.

November 25
Fort Worth Convention Center

EMS Performance Improvement and Patient Safety

CE: AOR, CRO

Jorie Klein, MSN, MHA, BSN, RN
Director, DSHS EMS Trauma Systems Section

November 25, 3:15-4:15 PM
Meeting Room 202AB

40 Years Behind, 40 Years Ahead: Practice, Progress, and Prognosis

CE: Preparatory

Closing session
Jeff Jarvis, MD, MS, EMT-P, FACEP, FAEMS

November 26, 11:00 AM-12:00 PM
Ballroom AB



November 23, 2025 Omni Fort Worth | 7:00-11:00 PM



Jennifer's Law: Is There an Impact to Texas Paramedics Administering IVs?

Texas lawmakers introduced and passed Jennifer's Law, also known as House Bill 3749 (HB 3749), during the 89th legislative session. The new law limits those who can administer elective intravenous (IV) therapy outside of traditional healthcare settings like hospitals and physician's offices. While this law will significantly affect medical spas and IV hydration clinics, it has also raised concerns regarding potential impacts on Texas community paramedic programs and the emergency medical system.

No Change to Emergency Protocols

It is important to understand that Jennifer's Law does **not** change existing protocols or a paramedic's scope of practice in the field. Paramedics can continue to perform IV access and administer medications and fluids under the direction of their medical director.

Restriction to EMS

The law reinforces that a paramedic's authority to administer IVs is tied to their function in an emergency medical services setting as subject to [Subchapter B](#), Chapter [157](#). It does not affect their ability to perform this critical skill during an authorized emergency or non-emergency response, as that falls under their established scope of practice for advanced life support.

If you have any concerns, please review this [legislation](#) with your department attorney.

HEALTH ADVISORY

The Texas Department of State Health Services (DSHS) is providing information to raise awareness the about New World screwworm (NWS), a parasitic fly that can have significant effects on human and animal health. Although no recent human or animal cases have been identified in Texas, state and federal agencies are preparing for the possible reintroduction of the parasite into the United States.

Healthcare providers should consider NWS if their patient:

- Has recently traveled in areas with animal or human cases of NWS.
- Has a very painful and foul-smelling wound with visible larvae.
- Has a particularly deep wound with extensive tissue damage and evidence of larval infestation.
- Has an egg mass in or around a wound or opening

Clinicians should remain vigilant when seeing patients who have traveled in areas where the fly is present and report all suspected NWS cases to their local health department immediately.

Find more information on the [DSHS website](#).

The “Not Perfect” Initial EMS Program: Ideas to Help Your Program and Students Succeed

by Jon Puryear, NRP, Owner of Jon Puryear EMS CE

I recently read about the top ten EMS programs in Texas and commend their success. But what about the many other programs aiming to improve? How can you boost your students’ knowledge, application, and NREMT exam success? Here are practical ideas to strengthen your Initial EMS Program.

Strong Educators Are Essential

Quality instructors are critical for student success. Even if competitive pay is difficult, equip educators with the tools they need to meet education standards and current NREMT science. Encourage them to be NREMT certified to ensure they understand and teach at the proper competency level. High-performing programs emphasize hiring certified instructors, maintaining consistent teaching, and using standardized lesson plans (Margolis et al., 2008).

Competency Beyond Psychomotor Skills

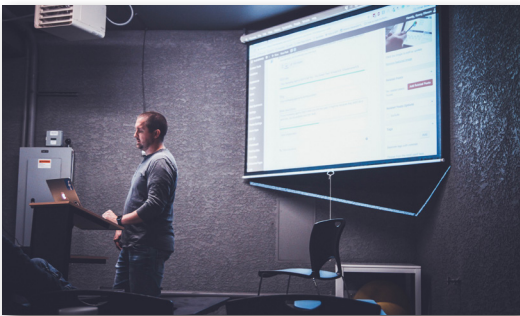
Teaching students to perform skills is not enough. They must communicate effectively, get along with others, make sound decisions, operate medical equipment, drive emergency vehicles, conduct radio communications, and provide quality patient care. Employers often report that new hires lack these practical skills. Experiential learning embedded in internships improves skills and job readiness significantly (Alrazeeni et al., 2021).

Improve Exam Question Quality

Align your exams with the NREMT format. Traditional tests may help students pass your finals but not the NREMT exam. Attend NREMT test writing sessions or collaborate with knowledgeable educators to format questions properly. Use established practice question banks that provide explanations for correct and incorrect answers. Scoring 70% or higher on these predicts exam success (Clemency et al., 2017).

Utilize Prep Courses and Apps

Students benefit from hearing multiple instructor voices and varied teaching styles. External prep courses and apps offer diverse perspectives, personalized review, and support a student-centered approach. Educators should guide students toward quality test review resources and integrate these into the program. This model, common in other medical fields, fosters deeper understanding and confidence (Limmer; Clemency et al., 2017).



Voices from Programs Nationwide

- **Alabama Fire College** stresses teaching to national, not personal, standards (Ray Grantham).
- **Victoria College** relies on Q&A sessions with multiple instructors to clarify learning (Susie Jechow).
- **Bridge Valley College** values prep sessions that build confidence and professional growth (Jonathan Fannin).
- **Northwest Mississippi College** credits leadership support and prep courses for the rise in pass rates (James Duke).

Conclusion

Provide every opportunity for student success: excellent educators, national curriculum, real NREMT-style exams, prep courses, and apps. Assist students in finding jobs where they can apply their skills and deliver quality care. This approach builds a strong Initial EMS Program.

[Click to read full article.](#)

These views are my own, based on extensive EMS experience and research. I own Jon Puryear EMS CE, offering prep courses, refreshers, and continuing education since 2003.



Senate Bill 916: Strengthening Transparency and Accountability in EMS Billing

Effective Date: September 1, 2025

Legislative Reference: Senate Bill 916, 89th Texas Legislature (2025)

The 89th Legislature recently passed Senate Bill 916 (SB 916), a measure that continues the state's commitment to protecting patients from surprise ambulance bills while enhancing regulatory oversight of EMS provider billing practices. This new law directly affects EMS providers, political subdivisions, and regulatory partners across Texas. It also provides updated guidance on how rates are set, reported, and enforced.

Key Changes Introduced by SB 916

1. Continued Protection from Surprise Billing – SB 916 extends Texas' prohibition on balance billing for ground ambulance services provided to patients covered by state-regulated health plans through September 1, 2027. This ensures patients are not charged unexpected out-of-network costs after receiving emergency transport.
2. Rate Adjustment Flexibility for Political Subdivisions – Cities, counties, and other political subdivisions that regulate EMS rates may now adjust their submitted rates annually by up to:
 - ◇ The Medicare Ambulance Inflation Factor, or
 - ◇ 10 percent of the previous year's rates – whichever is less.
3. Annual Reporting Requirement – Political subdivisions must report their regulated rates annually to the Texas Department of Insurance (TDI). This data will support statewide transparency, allowing regulators to monitor trends and ensure consistency in billing practices.
4. Stronger Enforcement Authority – Under SB 916 and Health and Safety Code (HSC) 773.061(a-1), the Department of State Health Services (DSHS) may revoke, suspend, or deny renewal of an EMS provider's license or certificate if the provider:
 - ◇ Knowingly submits false or inaccurate information under Insurance Code § 38.006, or
 - ◇ Engages in a pattern of noncompliance or improper billing behavior in violation of Section(s) 1271.159, 1275.054, 1301.166, 1551.231, 1575.174, or 1579.112 of the Insurance Code.

These provisions strengthen the ability of regulators to address unethical or fraudulent billing activity and uphold public trust in EMS services.

Sabrina Lee Richardson, Paramedic,
Information Specialist
DSHS EMS Trauma Systems Section



What EMS Providers Should Do Now

- **Review Billing Policies:** Ensure your billing practices and submissions meet all requirements under Insurance Code § 38.006 and SB 916.
- **Educate Staff:** Make sure billing, compliance, and administrative personnel understand the new annual rate-adjustment limits and reporting deadlines.
- **Coordinate with Oversight Bodies:** Work closely with your local political subdivision or billing contractor to ensure rate submissions are accurate and compliant.
- **Prepare for Audits:** DSHS and TDI will begin integrating these requirements into future audits and complaint investigations.

Why This Matters

SB 916 reinforces Texas's goal of a fair, transparent, and patient-focused EMS system. By ensuring accurate rate reporting and eliminating surprise billing, the legislation promotes greater accountability and financial integrity across the EMS community.

As the effective date approaches, EMS leaders, compliance officers, and regulatory partners are encouraged to begin preparing now to ensure a smooth transition and continued public confidence in the emergency medical system that serves Texans every day.

For more information, visit the [Texas Department of Insurance](#) or [Texas Legislature Online](#) for official bill text and implementation resources.



Influenza Information for Health Care Professionals

Flu season is here and healthcare providers can directly impact the health and safety of our communities. Here are some resources to help stay informed and spread the word on best practices and current recommendations.

- **Texas health professionals** -Flu information, resources, and data can be found on the [Influenza \(Flu\) - Provider Information](#) site.
- **Reporting**- All influenza-associated pediatric mortality cases, novel/variant influenza cases, and influenza-like illness (ILI) outbreaks should be reported to the [local health department or health service region](#).
- **Surveillance** - View the latest information on the [DSHS Influenza Surveillance webpage](#).
- **Centers for Disease Control (CDC)** - Visit the CDC's [Influenza for Health Care Providers webpage](#).



Lessons from the Bench Seat: Why Your Bedside Manner Matters More Than Your Monitor

By Mike Doss, shared with permission by JEMS

Abstract

In emergency medical services (EMS), technical competence is vital—but too often, it overshadows the softer side of care. Bedside manner, including verbal communication, body language, and active listening, plays a critical role in patient experience and outcomes.

This article explores the practical, emotional, and evidence-based importance of bedside manner, especially in low-acuity or “basic” EMS calls. Supported by recent research and field experience, it makes the case that presence, empathy, and professionalism aren’t extras—they’re essential. And sometimes, the most advanced thing on scene isn’t in your kit.

Introduction

Come on in, grab a cup of joe (make sure the lid’s tight—been burned that way before), and I’ll try and teach you something that’s not in textbooks. Something I’ve learned over three decades of sirens, stretchers, and midnight nursing home runs: your bedside manner is just as important as any airway skill you’ll ever learn.

You can read the full article on [JEMS](#).

DEA Resources for Drug Diversion Reporting

The department met with the federal Drug Enforcement Agency (DEA) to discuss the ongoing issue of drug diversion in emergency medical services (EMS). Reporting suspected drug diversion is a crucial step in protecting patient safety and the integrity of the healthcare system. The DEA's Diversion Control Division is the primary federal agency responsible for preventing, detecting, and investigating drug diversion and provides resources to help understand and follow government reporting regulations.



The [DEA local registration specialist website](#) offers resources including:

- **Reporting Drug Diversion:** The site provides a way to submit a tip about illegal activities involving prescription drugs.
- **Registration Tools:** It has tools for registering an EMS agency to handle controlled substances, including access to forms and information on state licensing requirements.
- **Information and Guidance:** The website offers a variety of educational resources, forms, and publications related to the Controlled Substances Act, proper handling of medications, and security issues.

DEA regulations state that employees with knowledge of illegal drug activity are mandatory reporters and have an obligation to report such information to a responsible security official of the employer.

For additional information or assistance, contact Diversion Control at 1-800-882-9539 or DEA.Registration.Help@dea.gov.

Updates

Regulations • Programs • Funding



Updates to 89R Session Highlights

Below is a summary of key legislation affecting the EMS Trauma System. You can review each of these bills to understand their impact by visiting [Texas Legislature Online](#) (TLO).

- **HB 3000:** Provides grants for ambulance purchasing. The Comptroller's office has drafted the rules for this program and is currently processing them through the approval process.
- **EMS Scholarships:** The Texas Workforce Commission (TWC) received \$2.5 million from the 89R Session for EMS initial education scholarships. TWC is developing the process for these scholarships and is expected to have additional information available in early 2026.

Rules are under development for the following legislation:

- **HB 33** will require emergency services and school officials to plan and drill together in the event of a school shooting.
- **HB 742** will require education for EMS personnel on human trafficking.
- **HB 149** will require a plan to notify to patients when using artificial intelligence.
- **SB 1021** will make a conviction of stalking a disqualifier for certification if the conviction is on or after September 1, 2025.

Sunset Review

The Department of State Health Services (DSHS) is currently under review by the Sunset Advisory Commission. Most state agencies go through this process every 12 years.

Every state agency has an automatic end date set into state law. Unless the Legislature passes a bill to continue it - typically another 12 years - the agency will be abolished on that date. This process allows lawmakers to regularly examine an agency's mission, priorities, and performance.

DSHS is under review by the Sunset Commission from September 2025 through December 2026

Visit the [Sunset Advisory Commission's website](#) for more information.

DSHS Sunset Self-Evaluation Report

Each agency undergoing Sunset review is required to complete a [Self-Evaluation Report](#) (SER). The SER offers insights and suggested improvements for the agency.

Updates

Regulations • Programs • Funding



EMS Processing times for the Fourth Quarter of Fiscal Year 2025

Emergency Medical Services Personnel ¹	Application Count	Median Days to Approve
Initial	5677	3
Renewal	3433	128
Upgrade	810	2
EMS Educator ¹	Application Count	Median Days to Approve
Initial	151	7
Renewal	392	135
Upgrade	10	16
Emergency Medical Service Provider ²	Application Count	Median Days to Approve
Initial	4	101
Renewal	80	71
First Responder Organization ²	Application Count	Median Days to Approve
Initial	7	65
Renewal	70	65

¹ Renewal processing times are longer because applications are opened six months in advance to begin renewal.

² Initial processing times are longer because applicants frequently don't have their medical equipment and are not ready for inspection.

Data on 9-1-1 dispatch but NO transport

as of 9/16/2025 | National data from NEMSIS | Texas data from DSHS EMS Trauma Registry



This scenario refers to the percentage of EMS responses where qualified professionals assess a patient's condition and determine that an ambulance is not necessary and the patient does not require transport to a hospital.

Updates

Regulations • Programs • Funding



DESIGNATION

Fiscal Year (FY25) Application Statistics

Application Type	Trauma	Stroke	Maternal	Neonatal
In-Active Pursuit Applications Approved	7	-	-	-
Designation Applications Approved	114	52	88	69
Initial Designations	11	7	7	13
• Upgrade	4	2	1	6
• Downgrade	1	-	-	1
• New Facility	4	4	2	2
• Change of Ownership	2	1	4	4
Re-Designation	103	45	81	56
Contingent Designation	75	1	19	11
Probationary Designation	6	-	5	9

Fiscal Year (FY25) Site Visits

Activity	Trauma	Stroke	Maternal	Neonatal
Program Assistance Site Visits	14	0	23	18
Contingent Site Visits	10	0	25	17
Surveys Attended	37	0	24	17
Other Facility Assistance Meetings	99	3	2	18
Corrective Actions Reviews	374	5	9	28
Designation Determination Meetings	91	2	7	24

Announcement

The Texas Department of State Health Services (DSHS) is pleased to announce the release of the [Trauma Designation Survey Guidelines](#). These guidelines have been developed in accordance with the Texas Administrative Code (TAC) Section 157.126 requirements and the American College of Surgeons (ACS) verification standards.

We encourage you to review these guidelines thoroughly to understand their impact on current and future survey scheduling.

NEWS AND LINKS

Local • National • Resources

NHTSA's EMS Update

Learn more about current projects and efforts in EMS from NHTSA and its Federal partners.

[Learn more](#)

CDC Newsroom

View the latest CDC public health news and press releases.

[Learn more](#)

The Bulletin

The Bulletin of the American College of Surgeons.

[Learn more](#)

Washington Update

Bi-monthly newsletter of the National Association of State EMS Officials.

[Learn more](#)

EMSC Pulse

A digest of information about the pediatric emergency medical care community.

[Learn more](#)

Integrated Healthcare

Focuses on improving the patient experience of care through inter-professional collaborations.

[Learn more](#)

EMS/Trauma Systems Links

GETAC

Visit the Governor's EMS and Trauma Advisory Council web page to view council, committee, and meeting information.

Rules

Links to the Texas Administrative Code rules pertaining to EMS/Trauma Systems.

Disciplinary actions

Public notice of disciplinary action by the Department of State Health Services and the Consumer Protection Division, Consumer Safety Unit.

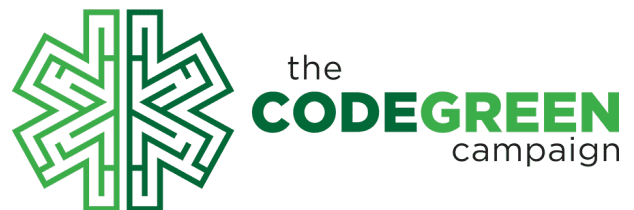
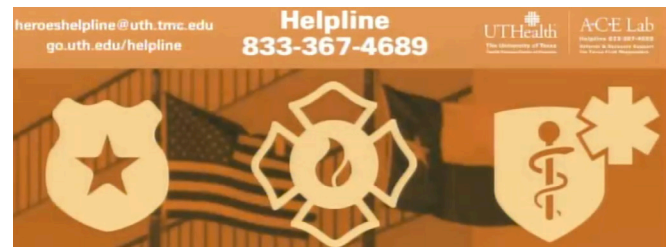
Staff Contacts

Contact information for the Office of EMS/Trauma Systems staff and programs.

Questions, comments, or suggestions about *Texas EMS Trauma News*? Contact us at EMSTraumaNews@dshs.state.tx.us.



Texas Department of State Health Services





For more information on all National Registry initiatives, scan this QR code or go to <https://linktr.ee/nremtcomms> for the latest updates!

National Registry Key Initiatives

- ALS Redesign Update
- AEMT Student Minimum Competencies
- Table of Authorities / EBGs
- Scaled Scores
- NCCP Update and EBGs

External links to other sites are intended to be informational and do not have the endorsement of the Texas Department of State Health Services.