



Background

In the early 2000s, Texas Legislature created the Permanent Fund for Emergency Medical Services and Trauma Care (fund 5046) with a \$100 million corpus (principal), which was intended to provide perpetual funding for emergency medical services (EMS) agencies and regional advisory councils (RACs) from the interest earned on the account. While the corpus was never intended to be used, a 2011 amendment tapped the fund and shifted revenue to other priorities. The fraction of original funds left did not provide adequate dollars to keep up with state commitments. As a result, local project grants (LPGs) for EMS agencies were eliminated. LPGs were used by urban and rural Texas EMS providers to acquire equipment, fund training, and create injury prevention programs to increase continuity of care across the state.

The 2017 Texas Legislature passed HB 1407 (Rep. JD Sheffield and Sen. Kel Seliger), which created a rural paramedic training program and created the framework to restore LPGs. It also required 60 percent of the grants to be spent in rural counties. Despite support for EMS, LPG funding was not included in the 2018-19 budget.

HB 1477 in the 86th Legislature

The 86th Legislature is being asked to make EMS a priority by funding LPGs. HB 1477 by Rep. Four Price would:

- Allocate new funds for ground and air ambulance agencies and RACs in both urban and rural communities.
- Create the Emergency Medical Services Scholarship Program, which would enable rural EMS agencies to use LPG funding for paramedic tuition assistance in rural areas.

From a funding standpoint, HB 1477 would:

- Redirect funds collected by the \$30 state traffic fine to support LPGs. Currently, one third goes to hospital funding (5111) while the balance goes to undedicated general revenue. HB 1477 would divert 10 percent of the funds going to general revenue to pay for LPGs. This is projected to result in approximately in \$7 million in the biennium for 1:1 matching funds.
- Allow LPGs to be used by rural agencies to provide education scholarships as an incentive to retain and grow rural health workforce. Location and pay serve as barriers for rural EMS agencies when it comes to competing with urban agencies for personnel. The legislation would allow rural agencies to utilize LPGs for tuition assistance programs as a tool to attract EMS professionals to rural communities.
- A contingency rider directing the Department of Health Services to spend the money on LPGs would be necessary.