SEVEN FLAGS REGIONAL ADVISORY COUNCIL (SFRAC) BOARD MEETING

AGENDA

Regular Meeting of the SFRAC Board of Directors
Monday, August 24, 2026, 2:00 p.m. to 4:00 p.m.
Laredo Fire/EMS Administrative Building, EOC Rm., Second Floor, 616 E. Del Mar, Laredo, Texas, 78045

AGENDA

26-44 Item 26-44 Call to Order – Chairman, Jorge Delgado

a. Roll Call
b. Introduction of Guests

26-45 *(Tab 1)* Item 26-45: Presented to the Board for Review and Possible Action is the Approval of the Minutes to the SFRAC Board meeting held April 30, 2026 - Chairman.

26-46 *(Tab 2)* Item 26-46: Presented to the Board for Discussion and Possible Action is the Approval of the SFRAC Committees Reports – Chairman.

Trauma/Injury Prevention Committee (Chairman: Letisia Colon; Co-Chair: Joe Gonzalez)

EMS/Prehospital Committee: (Chairman: Victor Villarreal; Co-Chair: Angel Garcia)

Neonatal/NICU Committee (Chairman: Angelica Perez; Co-Chair: Liza Gonzalez)

Maternal Committee (Chairman: Maria Santillan; Co-Chair: Denise Morales)

Stroke Committee: (Chairman: Chantelle Molina; Co-Chair: Veronica Cantu)

Cardiac/STEMI Committee: (Chairman: Leticia Paredes; Co-Chair: Rosie Tamez)

Performance Improvement (P.I.) Committee: (Chairman: Vacant; Co-Chair: Vacant)

26-47 *(Tab 3)* Item 26-47: Presented to the Board for Review and Possible Action is the Approval of the SFRAC Financial Report for the Period of April 11, 2026, thru August 10, 2026 – Chairman.

26-48 *(Tab 4)* Item 26-48: Presented to the Board for Review and Possible Action is the Ratification to Approve the Submittal of the 3rd Quarter Financial Reports as Submitted to the Texas Department of State Health Services Covering the EMS RAC, System Development, and Exceptional Items Programs – Chairman.

26-49 *(Tab 5)* Item 26-49: Presented for Review and Possible Action on approving that the Board of Directors hereby ratifies and acknowledges the Form 990 IRS Income Tax Return of the Seven Flags Regional Advisory Council for the tax year 2024, as previously prepared and submitted to the Internal Revenue Service on July 9, 2026. – Chairman.

26-50 *(Tab 6)* Item 26-50: Presented to the Board for Discussion and Possible Action is the Approval to Nominate a Chairman and Treasurer to Serve on the Seven Flags Regional Advisory Council (SFRAC) as officer on the Board of Directors for a Two-Year Consecutive Term to Cover Fiscal Year 2027 and 2028, (i.e., September 1, 2026, thru August 31, 2028) - Chairman.

26-51 *(Tab 7)* Item 26-51: Presented to the Board for Review and Possible Action is the Approval to Assess all Current Standing Committee Chairmen and Co-Chairmen and to Make Necessary Changes in Selecting New Said Officers as needed Based on History of Participation.

26-52 (*Tab 8)* Item 26-52: Presented to the Board for Review and Possible Action is the Approval and Authorization to Ratify the Renewal of the Fiscal Year 2027 Regional Advisory Council Program Contract Between the Seven Flags Regional Advisory Council and the Texas Department of State Health Services for a Total Amount Not to Exceed Three Hundred and Twenty Thousand Five Hundred and Fifty-Seven Dollars ($320,557.00)– Chairman.

26-53 *(Tab 9)* Item 26-53: Presented to the Board for Discussion and Possible Action in the Approval and Authorization to Renew the Contract Between the Seven Flags Regional Advisory Council and South Texas Development Council for Administrative and Grant Management Services for the Period Covering Fiscal Years 2027, (i.e., September 1, 2026, thru August 31, 2027), for a Fee not to Exceed the Yearly Total Dollar Amount Allotted By the Texas Department of State Health Services (DSHS) Under the EMS RAC Program, being Thirty-One Thousand Nine Hundred and Seventy-Eight Dollars ($31,978.00) - Chairman.

26-54 *(Tab 10)* Item 26-54: Presented to the Board for Discussion and Possible Action is the Approval to Renew the Contract Between Health Access LLC., a Professional Services Firm Specializing in Health Care Consulting to Facilitate the Completion and Submittal of Phase III of the RAC Self-Assessment Program and any Required Plan of Action to the Department of State Health Services (DSHS) by the Due Date of August 31, 2027. And in so doing, Authorize the SFRAC Administrator to Negotiate and Finalize Terms of Agreement within the Established Scope of Work and Approved Monthly Rate of Six Thousand Dollars ($6,0000 for a Period of Twelve Months from September 1, 2026, through August 31, 2027, for a Total not to Exceed Seventy-Two Thousand Dollars ($72,000). – Chairman.

26-55 *(Tab 11)* Item 26-55: Presented to the Board for Review and Possible Action in the Approval to Accept the First Reading of the Revisions, Deletions, and Additions to the Seven Flags Regional Advisory Council By-Laws – Chairman.

26-56 *(Tab 12)* Item 26-56: Presented to the Board for Discussion and Possible Action is the Acceptance of the FY2026 Revisions made to the Seven Flags Regional Advisory Council (SFRAC) Region Trauma Plan and as Presented to be Submitted as Required to the Texas Department of State Health Service in Accordance with Section II(G) of Attachment A-4, Fourth Revised Statement of Work under Contract No. HHS001336600020 – Chairman.

26-57*(Tab 13)* Item 26-57: Other Business

a. Report on the FY26 Membership Summary (i.e., Membership Fees, Document Submittals, and Member Attendance) - SFRAC Administrator.

b. Informational Item Presented by Mr. Rafael Ruiz III, Founder / Managing Director Imperium Critical Support Services PLLC.

c. Hospital Preparedness Program Announcement/Reports.

26-58 *(Tab 14)* Item 26-58: Communication/Correspondence – Chairman.

26-59 Item 26-59: General Announcements

26-60 Item 26-60: Next SFRAC Board meeting – Chairman.

FY25 Meeting Schedule	
Date	**Location**
Friday, January 30, 2026	**Laredo Medical Center, 1700 E. Sauders, Laredo, Tx.**
Thursday, April 30, 2026	**Laredo Medical Center, 1700 E. Sauders, Laredo, Tx.**
Monday, August 24, 2026	**Laredo Fire/EMS Administrative Bldg., 616 E. Del Mar, Laredo Texas 78045**
Wednesday, September 30, 2026	**City of Laredo Health Department, Auditorium Rm., 2600 Cedar, Laredo, Texas.**

Name	Title/Location	Cell
Jorge Delgado	**TSA-T Chairman**	**(956) 552-8080**
John Keiser	**TSA-T Administrator**	**(956) 693-0536**

26-61 Item 26-61: PUBLIC COMMENT: Individuals/Organizations providing comments are required to complete a SFRAC Public Comment Sign-In Sheet. The Board asks that each presenter's comments pertain to RAC business. The public comment process and matters resulting from the process shall be directed by the Chairman. The Board will not discuss or take immediate action on any agenda or non-agenda item(s) as a result of comments presented during the meeting. The Board will hear the public comments but will not respond in the form of dialog, except to ask questions, if necessary. All information received is subject to verification. Those requesting to address the Board are granted three (3) minutes to address their topic(s). The Board has requested that no insulting, abusive or profane language, be used. As each individual speaker begins his/her testimony, they must state their name for the record and state on whose behalf they are providing comments.

26- 62 Item 26-62: Adjournment – Chairman.

ITEM 26-45 (TAB 1)

04-30-2026 MEETING MINUTES

SEVEN FLAGS RAC (SFRAC) BOARD OF DIRECTORS

Date & Time: 2026-04-30 14:11

Attendees Present:

Reynaldo Veliz (Angel Care)
Chief Adrian Esparza (City of Laredo Fire/EMS)
Stacey Lopez (Doctors Hospital of Laredo - Alternate)
Vanessa Garza (Priority MS - Alternate, represented by Alejandro Rivera)
Joe Gonzales (Laredo Medical Center)
Juan Medellin (Medpoint Ambulance)
Ramiro Elizondo (Webb County Volunteer Fire EMS)
Chief Daniel Aviaga (Zapata County Fire/EMS)
Victor Villarreal (Victorious Care Ambulance Service - Alternate, represented by Melva Villarreal)
Rene Castillo (Lalitas Ambulance)
Gilbert Guardiola (Texas Superior Ambulance Service)
Alberto Soto (Texas Ambulance Response Team)
Kevin Harris (Skyline EMS - Alternate, represented by Gilbert Garza)
Armando Parra (Primary Ambulance - Alternate, represented by Elisa Parra)
Ramon Rojas (Dignicare)
Jose Cavazos (United Med Care Ambulance – Alternate, represented by Deborah Madrigal)
Jose F. Carrasco (Air Evac)
Gateway Ambulance (Present)

Members Absent:

Peter Gonzales (Laredo Lifeline)
Lorenzo Chua (Villa Ambulance Service)
Hector Medina (Bronze Star)
John Jones (Ex officio)

Call to Order

The meeting was called to order at approximately 2:11 PM by the Chair, Mr. Jorge Delgado. Mr. Keiser, SFRAC Administrator, conducted the roll call and confirmed a quorum was present.

Agenda Item 26-33: Approval of Previous Meeting Minutes

- **Topic:** Review and approval of the minutes from the Seven Flags RAC Board meeting held on January 30, 2026.
- **Discussion:** The minutes were previously posted and available for review. The Chair called for a motion to approve.
- **Action:**
    - A motion to approve was made by Rey Veliz.
    - The motion was seconded by Joe Gonzales.
    - The motion passed unanimously.

Agenda Item 26-34: Committee Reports

- **Topic:** Discussion and approval of the Seven Flags RAC committee reports.

Trauma and Injury Prevention Committee

- Leticia Colon (Chair) was absent.
- Joe Gonzales (Co-chair) reported that there was nothing to report for the committee at this time.

EMS Pre-Hospital Committee

- Victor Villarreal (Chair) was absent.
- Monica Arredondo (Co-chair) was absent.
- **Update:** A general reminder was issued to all EMS agencies to ensure patient wristbands (the Texas wristband) are applied to every patient transported to the emergency room, as they are being tracked.

Neonatal/NICU Committee

- Angelica Perez (Chair) and Lilly Limas (Co-chair) were both present.
- They reported there was nothing to report at this time.

Maternal Committee

- Maria Santillan (Chair) and Stacey Lopez (Co-chair) were both present.
- **Update:** Laredo Medical Center has scheduled its maternal designation survey for August 13-14, 2026.
- **Update:** Doctors Hospital of Laredo has scheduled its maternal designation survey for June 4-5, 2026.

Stroke Committee

- Chantel Molina (Chair) was present; Angie Avila (Co-chair) was absent.
- **Announcement:** Laredo Medical Center (LMC) will host its 5th annual "Fiesta de LMC" on May 1, 2026, from 10:00 AM to 12:30 PM at the community center in Tower B. This event kicks off Stroke Awareness Month. It will feature health booths, music, door prizes, and a proclamation for both stroke and Parkinson's at 11:30 AM.

Cardiac/STEMI Committee

- Claudia Amaya is no longer with the organization. The new committee chair is Leticia Paredes, the chest pain coordinator with LMC.
- Rosie Tamez (Co-chair) was absent.
- There was nothing to report for this committee at this time.

PI Committee

- Mr. Kaiser reported that the new PI committee is working with Stacey Cuzick from Health Access to address PI for trauma, specifically transfer times. The scope will later expand to stroke and cardiac.
- **Stacey Cuzick (Health Access):**
    - The PI committee has been created and smart goals from the self-assessment have been addressed.

- The committee is reviewing data to identify trends and challenges for a quality improvement project.
- **Goal 1:** A driver diagram is being developed to track progress.
- **Goal 2 (Improve Transfer Times):** The committee is reviewing puncture wound cases and developing tools to trend data for transfer times, aiming for less than 120 minutes.
- The next PI committee meeting is scheduled for **May 14, 2026**.
- Updates have also been made to the system plan and bylaws based on recommendations from the self-assessment.

- **Action:**
  - A motion to approve the committee reports was made by Chief Danny Arriaga.
  - The motion was seconded by Joe Gonzales.
  - The motion passed unanimously.

Agenda Item 26-35: Financial Report (January 11, 2026 - April 10, 2026)

- **Note:** Mr. Keiser noted that agenda items 26-35 and 26-36 were inverted in the packet. This item corresponds to Tab 4.
- **Update on Financial Security:** Mr. Keiser reported an attempted fraud incident where a "bad actor" was writing fraudulent checks from the organization's accounts. As a result, all bank accounts were closed and reopened. This has caused a delay in issuing checks, including those for EMS County Assistance. Files were not hacked.
- **Reporting Changes:** The financial reports have been revised to present less detailed public information to prevent future fraud attempts, while still providing necessary numbers.
- **Financial Summary (Mr. Kaiser):**
  - **General Fund:** Started with $67,567, had a deficit of $464, and ended with a balance of **$67,102**.
  - **EMS RAC Exceptional Item:** A total of **$18,000** was paid to the collaborating team, bringing the closing balance to **$114,000**.
  - **EMS RAC Grant Administration & System Development:** No activity reported.

  - **EMS County Assistance:** Checks have been written but not sent (except for City of Laredo) due to the account closures. Members will receive their funds once the new accounts are fully operational.

- **Action:**
  - A motion to approve the financial report was made by Joe Gonzales.
  - The motion was seconded by Mr. Garza (Texas Ambulance Response Team).
  - The motion passed unanimously.

Agenda Item 26-36: Ratification of 2nd Quarter DSHS Financial Reports

- **Note:** This item corresponds to Tab 3 in the packet.
- **Topic:** Ratification to approve the submittal of the quarterly financial reports to the Texas Department of State Health Services (DSHS).
- **Discussion (Mr. Keiser):** These reports reflect the financials just presented but are formatted for DSHS.
  - **EMS RAC Expenditure Report:** No funds disbursed.
  - **RAC System Development Report:** No grants issued yet.
  - **Exceptional Item (EI) Expenditures Report:** Reflects payments made to the collaborating team for the PI and self-assessment project.
- **Action:**
  - A motion to approve was made by Joe Gonzales.
  - The motion was seconded by Chief Arriaga.
  - The motion passed unanimously.

Agenda Item 26-37: Renewal of APLOS Accounting Software Subscription

- **Topic:** Approval to renew the annual subscription for APLOS accounting software at a cost of **$2,508**.
- **Discussion (Mr. Keiser):** Board approval is required for any expense over $2,000. This software is used for all financial and accounting purposes.

- **Action:**
    - A motion to approve the renewal was made by Alex Rivera (Priority EMS).
    - The motion was seconded by Mr. Garza (Texas Ambulance Response Team).
    - The motion passed unanimously.

Agenda Item 26-38: Other Business

A. Fiscal Year 2026 Membership Summary

- **Report (Mr. Keiser):** All members have successfully submitted their required documents and fees. The report also tracks meeting attendance, reminding members that missing two consecutive meetings can affect "good standing" status and funding eligibility. Currently, all members are in good standing.

B. Update on Fund Releases

- **EMS County Assistance (Deadline: April 30, 2026):**
    - Mr. Keiser presented a status chart. As of the meeting day, most agencies had submitted their information.
    - Victorious, Texas Superior, and United Med had pending documentation.
    - Villa Ambulance had not submitted their information and was at risk of forfeiting its **$4,000** allocation, which would then be redistributed among other members. They have until midnight on April 30, 2026.
- **System Development (Original Deadline: May 31, 2026):**
    - This is the next round of funding to be released.
    - Mr. Keiser announced that the deadline may be extended by approximately 15 days (to mid-June) due to the delays caused by the bank account fraud. The new deadline will be communicated on the invoice.
    - New safeguards and software are being implemented with the bank to prevent future fraud.
- **Exceptional Item (EI) Funds (Deadline: June 30, 2026):** This allocation will be released toward the end of the fiscal year. All funds must be disbursed before August 31, 2026.

C. Hospital Preparedness Program

- Mr. Rubio was unavailable to attend, so there were no announcements or reports.

D. Board Member Responsibility Training

- Mr. Keiser stated that as a performance measure required by DSHS, the board must review a training video on the responsibilities of a board member annually.
- A video presentation from the Texas Department of State Health Services was shown, covering topics such as board member commitment, bylaws, policies, and procedures.

Agenda Item 26-39: Communications/Correspondence

- There were no items of communication or correspondence to present.

Agenda Item 26-40: General Announcements

- Mr. Joe Gonzalez announced that LMC will be opening their newest Free Standing Emergency Facility (Buena Vista) on June 25, 2026). All members were invited to attend. Mr. Gonzalez also announced changes to the patient reporting and tracking systems to be implemented by LMC among EMS agencies and other local hospitals using the patient wristband. The changes would apply to EMS entities using anything other than ESO as a reporting run platform.

Agenda Item 26-41: Next SFRAC Board Meeting

- The next SFRAC Board meeting is scheduled for August 24, 2026, at 2:00 p.m.

Agenda Item 26-42: Public Comments

- No one registered for public comments.

Agenda Item 26-43: Adjournment

- A motion by Chief Arriaga was made to adjourn the meeting.
- The motion was seconded by Joe Gonzalez.
- Motion passed, meeting adjourned at 3:03 p.m.

ITEM 26-46 (TAB 2)

FY26 TRAUMA / INJURY PREVENTION COMMITEE

CHAIRMAN:

LETICIA COLON
(DOCTORS)

Present: ___ Absent ___

CO-CHAIR:

JOE GONZALEZ
(LMC)

Present ___ Absent ___

TRAUMA MEDICAL DIRECTOR (LMC):

Dr. Adolfo Diaz

Present ___ Absent ___

TRAUMA MEDICAL DIRECTOR (DOCTORS):

Dr. Roberto Gomez Vasquez

Present ___ Absent ___

MEETING DATE:

August 24, 2026

LOCATION:

Laredo Medical Center Ave., Laredo Tx. 78040

NAME	TITLE	COMPANY	PHONE	EMAIL
Alma Hernandez	Trauma Registrar	Laredo Medical Center	956-796-2309	Alma_hernandez1@chs.net
Martha Vasquez		Laredo Medical Center	956-796-4117	Martha_garcia4@chs.net

FY26 EMS / PRE-HOSPITAL COMMITEE

CHAIRMAN:

VICTOR VILLARREAL
(*VICTORIOUS CARE*)

Present: ___ Absent ___

MEETING DATE:

AUGUST 24, *2026*

CO-CHAIR:

MONICA ARREDONDO
(*ANGEL CARE*)

Present ___ Absent ___

LAREDO MEDICAL CENTER, LAREDO TX. 78040

NAME	TITLE	COMPANY	PHONE	EMAIL
Peter Gonzalez	Board Director	Laredo Lifeline, LLC.	956-251-3787	lifelinepeter@yahoo.com
Reynaldo Veliz	Board Director	Angel Care Ambulance Service	956-725-7484	angelcareambulance@gmail.com
Hector M. Medina Jr.	Board Director	BronzeStar Ambulance Service	956-712-3667	bronzestaramb@yahoo.com
Letisia Colon	Board Director	Doctors Hospital of Laredo	956-523-2193	letisia.colon@uhsinc.com
Jorge Delgado	Board Officer, Chairman	Priority EMS	956-251-5318	admin@PriorityEMSTX.com
Jose "Joe" Gonzalez	Board Officer, Treasurer	Laredo Medical Center	956-796-2309	jose_gonzalez@chs.net
Juan Medellin	Director	Medpoint Ambulance	956-728-7707	Ldomed1@yahoo.com
Ramiro Elizondo	Board Director	Webb County Volunteer Fire/EMS	956-523-5700	ramelizondo@webbcountytx.gov
Daniel Arriaga	Board Director	Zapata County Fire/EMS Department	956-765-9942	firepolice114@gmail.com

NAME	TITLE	COMPANY	PHONE	EMAIL
Victor Villarreal	Board Director	Victorious Care Ambulance Service	956-568-1178	victoriouscareambser@hotmail.com
Rene Castillo	Board Director	Lalitas Ambulance Care	956-516-4499	rc.lalitasamb@outlook.com
Gustavo A. Martinez	Board Director	Lonestar Ambulance Service, INC	956-348-0632	gmartinez@lonestarambulance.net
Gilberto Guardiola	Board Director	Texas Superior Ambulance Service	956-568-3380	txsuperioramb@outlook.com
Kevin Harris	Board Director	Skyline EMS	956-682-7222	skyline.ems@gmail.com
Lorenzo A. Ochoa	Board Director	Villa Ambulance Service	956-568-2916	villaambulance@gmail.com
Armando Parra	Board Director	Primary Ambulance	956-462-5390	primaryambulance@yahoo.com
Ramon Rojas	Board Director	Digni Care	956-220-2715	dignicare3@gmail.com
Jose Cavazos	Board Director	United Care Ambulance	956-775-2222	josecavazos1802@yahoo.com
Adrian Esparza	Board Officer, Vice-Chairman	City of Laredo Fire Department	956-781-6022	aresparza@ci.laredo.tx.us

FY26 CARDIAC / STEMI COMMITEE

CHAIRMAN:

Leticia Paredes (LMC)

Present: ___ Absent ___

MEETING DATE:

August 24, 2026

CO-CHAIR:

ROSIE TAMEZ (DOCTORS)

Present ___ Absent ___

LOCATION:

Laredo Medical Center, Laredo Tx. 78040

NAME	TITLE	COMPANY	PHONE	EMAIL
Leticia Paredes, RN	Chest Pain Coordinator	Laredo Medical Center		Leticia_paredes@chs.net
Chantel E. Molina, DNP, RN	Stroke Coordinator	Laredo Medical Center	Office 956-796-3218 Cell 361-231-0207	chantel_molina@chs.net
Juanita Fernandez, BSN, RN	ICU Clinical Coordinator	Laredo Medical Center	Office 956-796-4746	juanita_fernandez@chs.net
Rosie Tamez, BSN, RN	Chest Pain Coordinator	Doctors Hospital of Laredo	Office 956-523-2738 Cell (956) 771-3446	Rosa.Tamez@uhsinc.com
Angie Avila, RN	Stroke Coordinator	Doctors Hospital of Laredo	Office 956-523-2269 Cell (956) 334-4640	
Letisia Colon, BSN, RN	Trauma Coordinator	Doctors Hospital of Laredo	Office 956-523-2193 Cell (956) 523-9933	letisia.colon@uhsinc.com
Rosa Rodriguez, RN	ED Manager	Doctors Hospital of Laredo	Office 956-523-2196 Cell (956) 206-8360	
Leticia L. Paredes		Laredo Medical Center	Office 956-796-3177	Leticia_paredes@chs.net

FY26 MATERNAL COMMITEE

CHAIRMAN:

MARIA SANTILLAN
(LMC)

Present: ___ Absent ___

MEETING DATE:

AUGUST 24, 2026

CO-CHAIR:

DENISE MORALES
(DOCTORS)

Present ___ Absent ___

LOCATION:

Laredo Medical Center, Laredo Tx. 78040

NAME	TITLE	COMPANY	PHONE	EMAIL
Denise Morales	Maternal Program Manager	Doctors Hospital of Laredo	956-523-2272	Denise.morales2@uhsinc.com
Guadalupe P. Cisneros	Director	Doctors Hospital of Laredo	956-523-2273	Guadalupe.cisnernos@uhsinc.com
Dr. Juan Montalvo	Maternal Medical Director	Doctors Hospital of Laredo		office@drjuanfmontalvo.com
Maria Santillan	Maternal Program Manager	Laredo Medical Center	956-796-4146	Maria_santillan@chs.net
Maria Uribe	Director Women's Services	Laredo Medical Center	956-796-4501	Maria_uribe@chs.net
Dr. George Trivette	Maternal Medical Director	Laredo Medical Center		

FY26 NEONATAL / NICU COMMITEE

CHAIRMAN:

ANGELICA PEREZ
(LMC)

Present: ___ Absent ___

MEETING DATE:

AUGUST 24, 2026

CO-CHAIR:

Liza Gonzalez
(DOCTORS)

Present ___ Absent ___

LOCATION:

LAREDO MEDICAL CENTER, LAREDO TX. 78040

NAME	TITLE	COMPANY	PHONE	EMAIL
Angelica Perez	NPM	LMC	956-326-0676	angelica_perez@chs.net
Dr. Satbir Chhina	NMD	LMC	956-206-0112	schhina@icloud
Patricia Diaz	NICU Director	LMC	956-251-8351	patricia_diaz1@chs.net
Lisa Y. Gonzalez	Neonatal/NICU Program Manager	DHL	956-523-2232	Lisa.Gonzalez2@uhsinc.com
Lilliana Limas	Neonatal Director	DHL	956-523-2113	Lilliana.limas@uhsinc.com
Dr. Roberto Villegas	Neonatal Medical Director	DHL	956-523-2104	Roberto.VillegasMD@uhsinc.com

Seven Flags Regional Advisory Council Committee / Workgroup Report

Date: August 11, 2026 Committee/Workgroup: Neonatal/NICU Number of attendees at meeting: 5

Submitted by: Lilliana Limas-DHL Neonatal Committee Member

Topic(s) discussed:

- Reviewed Neonatal/NICU regional plan and committee expectations.
- Discussed quarterly meeting schedule and attendance expectations.
- Established standing meeting structure: regional trends/outcomes, quality improvement, case review, education/best practice, and outreach education.
- Discussed potential regional QI projects, including NICU breast milk percentage at discharge and NICU nutritional protocol compliance.

Action(s) Taken:

- Agreed to revise the regional plan to reflect quarterly meetings and attendance guidelines.
- Established Lisa Gonzalez as Committee Co-Chair.
- Agreed to use a standardized standing agenda for future meetings.
- Identified potential QI topics for committee review.

Next Step(s):

- Finalize and submit revised regional plan.
- Determine future meeting dates approximately two weeks before RAC meetings.
- Committee to select a regional QI project.
- Begin neonatal case review and regional data/trend discussion at future meetings.
- Coordinate regional neonatal outreach education opportunities.

Comments

- Committee updates and meeting minutes will be shared at Seven Flag RAC meetings.
- Members should attend at least 3 of 4 meetings annually or send a representative when unable to attend.

Seven Flags RAC Neonatal/NICU Committee Report

Date: August 11, 2026

Committee Chair: Lilliana Limas

Committee Co-Chair: Lisa Gonzalez

Committee Members: Lilliana Limas NICU Director, Doctors Hospital; Patricia Diaz, NICU Director-Laredo Medical Center; Angelica Perez, NICU Program Manager-Laredo Medical Center; and Dr. Pawel Zieba-Neonatologist-Laredo Medical Center.

Other Attendees: Stacy Cuzick, ACRN, Health Access Director of Operations

Topic Discussed: *State the general topic that was discussed.*	**Components of Discussion:** *Describe discussion/activities carried out during the meeting.*	**Status of Action Items:** *Identify any action items with responsibility, target date, and any notes.*
1. Purpose of the Meeting	• Review the recently submitted Neonatal RAC regional plan and establish the structure, participation, and expectations for future Neonatal/NICU Committee meetings.	• *None*
2. Leadership Update	• Lisa Gonzalez will serve as the new NICU RAC Co-Chair. Lilly Limas will step down to committee member and will step up in the Co-Chair role in Lisa's absence.	• *Lilly will remain a committee member and step up in Lisa's absence.* • *Lilly will send Lisa's contact information to Stacy as the new Perinatal RAC Co-Chair. Completed on 8/11/2026.*
3. Regional Plan Review and Committee Expectations	• The committee reviewed the recently submitted Neonatal RAC Regional Plan/Bylaws and discussed expectations for the Neonatal/NICU Committee. • Health Access (Stacy) recommended revising the meeting frequency from "at least three times annually" to quarterly to reflect the expected meeting cadence.	• *Lilly will update meeting frequency language. Completed on 8/17/2026.* • *Lilly will add attendance guideline language to the regional plan, as discussed. Completed on 8/17/2026.*

Seven Flags RAC Neonatal/NICU Committee Report

	• Health Access (Stacy) also recommended adding an attendance guideline requiring committee members to attend at least 3 of 4 Neonatal/NICU RAC meetings annually or send a representative when unable to attend. • Lilly will revise the regional plan to incorporate the approved changes and send the updated version to Health Access (Stacy).	• *Lilly will send updated regional plan to RAC Administrator and Health Access. Completed on 8/17/2026.* • *Regional Plan presented to RAC Administrator for discussion and approval by Board.*
4. Future Meeting Schedule	• The committee discussed scheduling Neonatal/NICU RAC meetings approximately two weeks before each Seven Flags RAC meeting. • Patricia noted that RAC meeting dates have not historically been released far enough in advance to allow adequate planning. • Health Access (Stacy) shared that work is underway to release future RAC meeting dates earlier so subcommittee meetings can be scheduled accordingly. • The future Neonatal/NICU RAC meeting schedule remains to be determined once RAC dates are available.	• *Committee will establish future dates of committee meetings, with a goal of two weeks prior to Board of Directors (BOD) meetings.* • *Health Access will discuss earlier release/scheduling of BOD meetings with RAC Administrator to allow committees to hold their meetings timely.*
5. Standing Structure for Future Perinatal RAC Meetings	• Case Review: LMC and Doctors Hospital will rotate responsibility for presenting a neonatal case at each meeting for collaborative review and learning. • Outreach Education: The committee will discuss and coordinate regional neonatal education opportunities. • Regional Neonatal Trends & Outcomes: Review trends, recurring concerns, and outcome data within the neonatal population. • Quality Improvement Projects: Review current or proposed regional neonatal quality initiatives.	• *Standing agenda presented to RAC Administrator via email for approval on 8/17/2026.*

Seven Flags RAC Neonatal/NICU Committee Report

	• Education, Best Practices & Shared Resources: Share evidence-based practices, education, and resources applicable to neonatal care.	
6. Outreach Education Discussion	• Patricia shared that EMS/fire stations have requested neonatal resuscitation skills review at individual stations. • Angie suggested coordinating these outreach efforts through the committee, with a target of providing neonatal resuscitation education in the fall. • Additional planning will be needed to determine scope, participating sites, instructors, and dates.	• *Committee will have further planning discussions around this topic. Target date: Fall 2026.*
7. Potential Regional Quality Improvement Projects	• Dr. Zieba proposed evaluating adherence to the neonatal nutritional protocol, including reasons clinicians deviate from the established protocol. • Patricia, Angie, and Lilly identified the percentage of infants receiving breast milk at NICU discharge as another potential regional quality improvement measure. • Both topics will be reviewed with the full committee before selecting one regional quality improvement project.	• *Committee members in attendance held discussion regarding nutritional protocol adherence vs. breast milk at NICU discharge. Full committee will continue discussion at the next meeting.*
8. Case Review Criteria	• The committee discussed which cases would be most appropriate for presentation and collaborative review at Neonatal/NICU RAC meetings. • Cases identified for consideration include home deliveries transported to the hospital by EMS, neonatal codes occurring in the Emergency Department, and other unusual or educational neonatal cases.	• *The first neonatal case presentation will be at the next committee meeting and follow a rotating hospital schedule.*

Seven Flags RAC Neonatal/NICU Committee Report

	• LMC agreed to present the case review at the next Neonatal/NICU RAC meeting.	
9. Communication and Reporting	• Committee meeting minutes will be maintained and shared as required for Seven Flags RAC reporting. • The Chair/Co-Chair will provide updates on Neonatal/NICU Committee discussions, activities, and recommendations at subsequent Seven Flags RAC meetings.	• *Committee minutes and report emailed to RAC Administrator on 8/17/2026 in advance of the next BOD meeting.*

SEVEN FLAGS REGIONAL ADVISORY COUNCIL

Neonatal/NICU Committee

STANDING MEETING AGENDA

Date: _____ **Time:** _____

Location: _____ **Chair/Co-Chair:** _____

#	Standing Agenda Item	Discussion / Notes / Action Items
1	**Regional Neonatal Trends & Outcomes**	
2	**Quality Improvement Project**	
3	**Case Review**	
4	**Education, Best Practices & Shared Resources**	
5	**Outreach Education**	

Next Meeting: _____ **Time:** _____

Additional Notes / Follow-Up:

_____

_____

FY26 STROKE COMMITEE

CHAIRMAN:

CHANTELE MOLINA (LMC)

Present: ___ Absent ___

MEETING DATE:

AUGUST 24, 2026

CO-CHAIR:

VERONICA CANTU (DOCTORS)

Present ___ Absent ___

LOCATION:

Laredo Medical Center, Laredo Tx. 78040

NAME	TITLE	COMPANY	PHONE	EMAIL
Chantel E. Molina, DNP, RN	Stroke Coordinator	Laredo Medical Center	Office 956-796-3218 Cell 361-231-0207	chantel_molina@chs.net
Juanita Fernandez, BSN, RN	ICU Clinical Coordinator	Laredo Medical Center	Office 956-796-4746	juanita_fernandez@chs.net
Rosie Tamez, BSN, RN	Chest Pain Coordinator	Doctors Hospital of Laredo	Office 956-523-2738 Cell (956) 771-3446	Rosa.Tamez@uhsinc.com
Veronica Cantu	Stroke Coordinator	Doctors Hospital of Laredo		Veronica.Cantu@uhsinc.com
Letisia Colon, BSN, RN	Trauma Coordinator	Doctors Hospital of Laredo	Office 956-523-2193 Cell (956) 523-9933	Letisia.Colon@uhsinc.com
Rosa Rodriguez, RN	ED Manager	Doctors Hospital of Laredo	Office 956-523-2196 Cell (956) 206-8360	Rosa.Rodriguez@uhsinc.com

Seven Flags RAC Performance Improvement (P.I.) Committee Report

Date: August 24, 2026

Committee Chair: Vacant

Committee Co-Chair: Vacant

Committee Members: Letisia Colon (Doctors Hospital), Joe Gonzalez (Laredo Medical Center), Monica Arredondo (Angel Care), Jorge Delgado (SFRAC Board Chairman), Dr. Adolfo Diaz (Laredo Medical Center), Dr. Roberto Gomez Vasquez (Doctors Hospital)

Performance Improvement Goal: *State the performance improvement project at hand and goal(s) in addressing it.*	**Activities Completed Leading to Goal**: *Describe activities carried out in meeting the objective and implementation of the P.I. goal(s).*	**Status in Meeting Goal/Next Steps/ Conclusions:** *Describe the status of the P.I. project, next steps, and identifiable conclusions.*
1. Improving transfer times specifically reviewing puncture wounds.	1. Data reviewed from 2025 with PI committee; very few cases were reported for year with puncture wounds specifically. 2. Develop QI tools for trending data to determine if changes to system have improved transfer times. 3. Comparison of 2025 to 2026 first quarter data to determine any improvements based on regional activities implemented.	*Trend data in 2026 for puncture wounds AND use GCS and ISS codes for severity to meet the criteria for transfer times improving to <120 minutes.* *Conclusion: data for 1st qtr 2026 shows reduction in total number of transfer cases; continue to monitor with new improved data system collection implemented 7/1/2026 that reports delay reasons.*
2. Creation of PI Committee Regional Plan	1. PI Committee implemented and members selected in 2025, 2. Regional Plan with 2 measurable goals discussed and approved in August 14, 2026 PI Committee meeting.	*Regional Plan presented to RAC Administrator for discussion and approval by Board.*

ITEM 26-47 (TAB 3)

FUND ACTIVITY SUMMARY
(4/11/2026 – 8/10/2026)

Seven Flags Regional Advisory Council

Fund Activity Summary
for the period of 04/11/2026 to 08/10/2026

Fund	Beginning Balance	Income	Expenses	Net Income (Expense)	Transfer	Net Increase (Decrease)	Ending Balance	[Beginning of Fiscal Year] Balance
General Fund	$67,102.76	$0.00	$6,151.94	$-6,151.94	$0.00	$-6,151.94	$60,950.82	$55,799.17
EMS RAC Grant (Exceptional Item Funds)	$114,000.00	$0.00	$30,000.00	$-30,000.00	$0.00	$-30,000.00	$84,000.00	$0.00
EMS RAC Grant (Administrative)	$31,503.60	$0.00	$0.00	$0.00	$0.00	$0.00	$31,503.60	$0.00
System Development Grant Allocations	$49,341.93	$0.00	$0.00	$0.00	$0.00	$0.00	$49,341.93	$3,320.93
EMS County Assistance Grant Allocations	$30,439.99	$0.00	$30,439.99	$-30,439.99	$0.00	$-30,439.99	$0.00	$0.00
Total	$292,388.28	$0.00	$66,591.93	$-66,591.93	$0.00	$-66,591.93	$225,796.35	$59,120.10

TRANSACTION LIST REPORT
(4/11/2026 – 8/10/2026)

Seven Flags Regional Advisory Council

Transaction List

for the period of 04/11/2026 to 08/10/2026

Date	Type	Contact	Fund	Memo	Amount
04/13/2026	Check	Microsoft Corporation	General Fund	Microsoft 365 Business Premium Plan ...	$71.46
04/28/2026	Check	Amazon	General Fund	Printer Switch and Cable (Debit)	$29.75
04/30/2026	Deposit	Harland Clarke	EMS RAC Grant (Administrative)	Transfer to EMS RAC (Administration)	$255.40
04/30/2026	Check	Aplos Software	General Fund	Annual Payment for the FY26/27 Acco...	$2,508.00
05/04/2026	Check	Health Access	EMS RAC Grant (Exceptional Item Fun...	Payment for March 2026 (FY26): Self-...	$6,000.00
05/06/2026	Deposit	Bronze Star Ambulance Service	EMS County Assistance Grant Allocati...	VOID REVERSAL - New Account Creat...	$4,348.57
05/06/2026	Deposit	Medpoint Ambulance	EMS County Assistance Grant Allocati...	VOID REVERSAL - New Account Creat...	$4,348.57
05/06/2026	Deposit	Primary Care Ambulance	EMS County Assistance Grant Allocati...	VOID REVERSAL - New Account Creat...	$4,348.57
05/06/2026	Deposit	Laredo Lifeline	EMS County Assistance Grant Allocati...	VOID REVERSAL - New Account Creat...	$4,348.58
05/06/2026	Deposit	Skyline EMS	EMS County Assistance Grant Allocati...	VOID REVERSAL - New Account Creat...	$16,693.00
05/06/2026	Deposit	Zapata County Fire/EMS	EMS County Assistance Grant Allocati...	VOID REVERSAL - New Account Creat...	$15,051.00
05/06/2026	Deposit	Webb County Volunteer Fire/EMS	EMS County Assistance Grant Allocati...	VOID REVERSAL - New Account Creat...	$4,348.58
05/06/2026	Deposit	Digni Care Ambulance	EMS County Assistance Grant Allocati...	VOID REVERSAL - New Account Creat...	$4,348.57
05/08/2026	Check	Health Access	EMS RAC Grant (Exceptional Item Fun...	Payment for April 2026 (FY26): Self-As...	$6,000.00
05/10/2026	Deposit	Fictitious Check	General Fund	VOIDED - Fictitious Check Written on ...	$1,950.00
05/13/2026	Deposit	Fictitious Check	General Fund	VOID REVERSAL - Fictitious Check Wr...	$1,950.00
05/22/2026	Check	Bronze Star Ambulance Service	EMS County Assistance Grant Allocati...	FY26 EMS County Assistance Award	$4,710.95
05/22/2026	Check	Angel Care Ambulance	EMS County Assistance Grant Allocati...	FY26 EMS County Assistance Award	$4,710.95
05/22/2026	Check	City of Laredo Fire Department Fire/E...	EMS County Assistance Grant Allocati...	FY26 EMS County Assistance Award	$362.38
05/22/2026	Check	Webb County Volunteer Fire/EMS	EMS County Assistance Grant Allocati...	FY26 EMS County Assistance Award	$4,710.97
05/22/2026	Check	Victorious Care Ambulance	EMS County Assistance Grant Allocati...	FY26 EMS County Assistance Award	$4,710.95
05/22/2026	Check	Priority EMS	EMS County Assistance Grant Allocati...	FY26 EMS County Assistance Award	$4,710.95
05/22/2026	Check	Laredo Lifeline	EMS County Assistance Grant Allocati...	FY26 EMS County Assistance Award	$4,710.96
05/22/2026	Check	Texas Superior Ambulance Service	EMS County Assistance Grant Allocati...	FY26 EMS County Assistance Award	$4,710.95
05/22/2026	Check	Lalitas Ambulance	EMS County Assistance Grant Allocati...	FY26 EMS County Assistance Award	$4,710.95
05/22/2026	Check	Medpoint Ambulance	EMS County Assistance Grant Allocati...	FY26 EMS County Assistance Award	$4,710.95
05/22/2026	Check	Primary Care Ambulance	EMS County Assistance Grant Allocati...	FY26 EMS County Assistance Award	$4,710.95
05/22/2026	Check	Digni Care Ambulance	EMS County Assistance Grant Allocati...	FY26 EMS County Assistance Award	$4,710.95
05/22/2026	Check	United Med Care Amb.	EMS County Assistance Grant Allocati...	FY26 EMS County Assistance Award	$4,348.57
05/22/2026	Check	Zapata County Fire/EMS	EMS County Assistance Grant Allocati...	FY26 EMS County Assistance Award	$15,051.00
05/22/2026	Check	Skyline EMS	EMS County Assistance Grant Allocati...	FY26 EMS County Assistance Award	$16,693.00
06/08/2026	Check	John R. Keiser	General Fund	GETAC Travel Reimbursement (June 2...	$905.30
06/09/2026	Check	Health Access	EMS RAC Grant (Exceptional Item Fun...	Payment for May 2026 (Re: FY26 Self-...	$6,000.00
07/06/2026	Check	Amazon	General Fund	Acrylic Sign Holders	$9.19
07/08/2026	Check	Adobe	General Fund	Adobe Pro Annual Subscription	$16.24
07/09/2026	Check	De La Garza CPA Firm	General Fund	990 Preparation and Filing (2024 Filing...	$1,100.00
07/09/2026	Check	Health Access	EMS RAC Grant (Exceptional Item Fun...	Payment for June 2026 (Re: FY26 Self-...	$6,000.00
07/14/2026	Check	VFIS of Texas	General Fund	FY27 Insurance Coverage Renewal	$1,512.00
08/07/2026	Check	Health Access	EMS RAC Grant (Exceptional Item Fun...	Payment for July 2026 (RE: Self-Assess...	$6,000.00

ITEM 26-48 (TAB 4)

EMS RAC

SUPPORT DOCUMENT revised 12/12/24

EMS/RAC EXPENDITURES

CURRENT FISCAL YEAR (FY)	2026
Prior FY Year EMS/RAC Carryforward	$ -
Current FY EMS/RAC Allocation Amount	$ 31,759.00
Current FY EMS/RAC Expenditures	$ -
Less: Unexpended Prior FY Carryforward (if any)	$ -
Total Unexpended Funds (Subject to Carryforward)	$ 31,759.00
Program Income	

In Support of Reimbursement Requests for

RAC NAME *Seven Flags Regional Advisory Council*

In Support of Reimbursement Requests for

RAC NAME Seven Flags Regional Advisory Council

Total Funds Available for Current Year		Program Costs	Administrative Costs	Total of P Administra
$ 31,759.00		$ -	$ -	$

Prior Year Carryforward has been Expended. Balance is Now $0.00. $ -

Current FY Activities

		1st Quarter				2nd Quarter			
		September	October	November	1st Quarter Totals	December	January	February	2nd Quarter Totals
PERSONNEL	List employees N/A	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
		$ -	$ -	$ -		$ -		$ -	
FRINGE BENEFITS	Fringe Benefits	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ -	$ - 0.00	$ -
TRAVEL	List each individual expense. Local Travel N/A	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$ -
Report TOTAL costs for each Conference attended on a single line.									
EQUIPMENT	List each individual expense. N/A	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$ -
SUPPLIES	List each individual expense. N/A	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$ -
CONTRACTUAL	List each individual expense. Contract between SFRAC and STDC for Program's Administrative/Managerial Services	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$ -
OTHER	List each individual expense. N/A	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$ -
INDIRECT COSTS	List costs by individual, if applicable and report all Non-Personnel indirect costs as one lump sum. N/A	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$ -
EMS-RAC FUNDS	All Non-Personnel Indirect Costs								
TOTAL COSTS		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -

In Support of Reimbursement Requests for		In Support of Reimbursement Requests for	
RAC NAME	Seven Flags Regional Advisory Council	RAC NAME	Seven Flags Regional Advisory Council

rogram & tive Costs	Data Check
-	Program + Admin Costs = Current FY Expenditures. Good job!

3rd Quarter				4th Quarter				
March	April	May	3rd Quarter Totals	June	July	August	4th Quarter Totals	Total Expenditures
$ - $ -	$ - $ -	$ - $ -	$ -	$ -	$ -	$ -	$ -	$ -
$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ -	$ -	$ -	$ -	$ -
$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ -	$ -	$ -	$ -	$ -
$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ -	$ -	$ -	$ -	$ -
$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ -	$ -	$ -	$ -	$ -
$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ -	$ -	$ -	$ -	$ -
$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ -	$ -	$ -	$ -	$ -
$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ -	$ -	$ -	$ -	$ -
$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -

SYSTEM DEVELOPMENT

SUPPORT DOCUMENT revised 12/12/24	
RAC SYSTEMS DEVELOPMENT EXPENDITURES	
CURRENT FISCAL YEAR (FY)	2026

In Support of Reimbursement Requests for		In Support of Reimbursement Requests for	
RAC NAME	Seven Flags Advisory Council	RAC NAME	Seven Flags Advisory Council

RAC SYSTEMS DEVELOPMENT Allocation Amount	$ 46,021.00
Total RAC SYSTEMS DEVELOPMENT Expenditures	$ -
Total Unexpended Funds	$ 46,021.00
Program Income	$ -

Total Funds Available for Current Year		Program Costs	Administrative Costs	Total of P Administra
$ 46,021.00		$ -	$ -	$

Current FY Activities

		1st Quarter				2nd Quarter			
		September	October	November	1st Quarter Totals	December	January	February	2nd Quarter Totals
PERSONNEL	List employees N/A	$ - $ -	$ - $ -	$ - $ -	$ -	$ - $ -	$ - $ -	$ - $ -	$ -
FRINGE BENEFITS	Fringe Benefits	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$ -
TRAVEL	List each individual expense. Local Travel	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$ -
EQUIPMENT	List each individual expense. N/A	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$ -
SUPPLIES	List each individual expense. N/A	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$ -
CONTRACTUAL	List each individual expense. N/A	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$ -
OTHER	List each individual expense.	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$ -

Report TOTAL costs for each Conference and each *PERSON* attended on a single line.

INDIRECT COSTS	List costs by individual, if applicable and report all Non-Personnel indirect costs as one lump sum.							
	N/A	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$ -
	All Non-Personnel Indirect Costs								
TOTAL COSTS		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -

MONTHLY BREAKDOWN OF PROGRAM & ADMINISTRATIVE COSTS

	September	October	November	1st Quarter Totals	December	January	February	2nd Quarter Totals
Program Costs								
PERSONNEL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
FRINGE BENEFITS	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
TRAVEL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
EQUIPMENT	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
SUPPLIES	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
CONTRACTUAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
OTHER	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
TOTAL COSTS	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Administrative Costs								
PERSONNEL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
FRINGE BENEFITS	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
TRAVEL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
EQUIPMENT	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
SUPPLIES	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
CONTRACTUAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
OTHER	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
INDIRECT	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
TOTAL COSTS	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -

Name & phone number of Person Completing this Form	John R. Keiser / 956-722-3995	John R. Keiser / 956-722-3995

In Support of Reimbursement Requests for		In Support of Reimbursement Requests for	
RAC NAME	*Seven Flags Advisory Council*	RAC NAME	*Seven Flags Advisory Council*

rogram & tive Costs	Data Check
-	Program + Admin Costs = Current FY Expenditures. Good job!

3rd Quarter				4th Quarter				
March	April	May	3rd Quarter Totals	June	July	August	4th Quarter Totals	Total Expenditures
$ - $ -	$ - $ -	$ - $ -	$ -	$ -	$ -	$ -	$ -	$ -
$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ -	$ -	$ -	$ -	$ -
$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ -	$ -	$ -	$ -	$ -
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$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
								$ -

March	April	May	3rd Quarter Totals	June	July 2022	August	4th Quarter Totals	Total Expenditures
$ -	$ -	$ -	$ -				$ -	$ -
$ -	$ -	$ -	$ -				$ -	$ -
$ -	$ -	$ -	$ -				$ -	$ -
$ -	$ -	$ -	$ -				$ -	$ -
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John R. Keiser / 956-722-3995

EMS RAC

EXCEPTIONAL ITEM (E.I)

SUPPORT DOCUMENT revised 12/12/24	
EI EXPENDITURES	
CURRENT FISCAL YEAR (FY)	2006

Prior FY Year EI Carryforward	$ -
EI Allocation Amount	$ 150,000.00
Total EI Expenditures	$ 48,000.00
Less: Unexpended Prior FY Carryforward (if any)	$ -
Total Unexpended Funds (subject to carryover)	$ 102,000.00

In Support of Reimbursement Requests for

RAC NAME *Seven Flags Regional Advisory Council*

In Support of Reimbursement Requests for

RAC NAME Seven Flags Regional Advisory Council

Total Funds Available for Current Year		Program Costs	Administrative Costs	Total Admin
$ 150,000.00		$ 48,000.00	$ -	$

Current FY Activities

		1st Quarter				2nd Quarter			
		September	October	November	1st Quarter Totals	December	January	February	2nd Quarter To
PERSONNEL	List employees N/A	$ - $ -	$ - $ -	$ - $ -	$ -	$ - $ -	$ - $ -	$ - $ -	$
FRINGE BENEFITS	Fringe Benefits	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$
TRAVEL	List each individual expense. Local Travel	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$
EQUIPMENT	List each individual expense. N/A	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$
SUPPLIES	List each individual expense. N/A	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$
CONTRACTUAL	List each individual expense. Self-Assessment Program.	$ 6,000.00 6000.00	$ -	$ -	$ 6,000.00	$ 12,000.00 6000.00 6000.00	$ 6,000.00 6000.00	$ 6,000.00 6000.00	$ 24,00
OTHER	List each individual expense. N./A	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$

Report TOTAL costs for each Conference and each *PERSON* attended on a single line.

INDIRECT COSTS	List costs by individual, if applicable and report all Non-Personnel indirect costs as one lump sum.								
	N/A	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$
	All Non-Personnel Indirect Costs								
TOTAL COSTS		$ 6,000.00	$ -	$ -	$ 6,000.00	$ 12,000.00	$ 6,000.00	$ 6,000.00	$ 24,00

MONTHLY BREAKDOWN OF PROGRAM & ADMINISTRATIVE COSTS

	September	October	November	1st Quarter Totals	December	January	February	2nd Quarter T
Program Costs								
PERSONNEL	$ -	$ -	$ -	$ -				$
FRINGE BENEFITS	$ -	0	$ -	$ -				$
TRAVEL	$ -	$ -	$ -	$ -				$
EQUIPMENT	$ -	$ -	$ -	$ -				$
SUPPLIES	$ -	$ -	$ -	$ -				$
CONTRACTUAL	$ 6,000.00	$ -	$ -	$ 6,000.00	$ 6,000.00	$ 6,000.00	$ 6,000.00	$ 18,00
OTHER	$ -	$ -	$ -	$ -	$ 6,000.00	$ -	$ -	$ 6,00
TOTAL COSTS	$ 6,000.00	$ -	$ -	$ 6,000.00	$ 12,000.00	$ 6,000.00	$ 6,000.00	$ 24,00
Administrative Costs								
PERSONNEL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$
FRINGE BENEFITS	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$
TRAVEL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$
EQUIPMENT	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$
SUPPLIES	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$
CONTRACTUAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$
OTHER	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$
INDIRECT	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$
TOTAL COSTS	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$
	$ 6,000.00	$ -	$ -	$ 6,000.00	$ 12,000.00	$ 6,000.00	$ 6,000.00	$ 24,00

Name & phone number of Person Completing this Form	John R. Keiser / 956-722-3995	john R. Keiser / 956-722-3995

In Support of Reimbursement Requests for		In Support of Reimbursement Requests for	
RAC NAME	Seven Flags Regional Advisory Council	RAC NAME	Seven Flags Regional Advisory Council

rogram & itive Costs	Data Check
48,000.00	Program + Admin Costs = Current FY Expenditures. Good job!

3rd Quarter				4th Quarter				
March	April	May	3rd Quarter Totals	June	July	August	4th Quarter Totals	Total Expenditures
$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
$ -	$ -	$ -						
$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
0.00	0.00	0.00						
$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
0.00	0.00	0.00						
$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
0.00	0.00	0.00						
$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
0.00	0.00	0.00						
$ 6,000.00	$ -	$ 12,000.00	$ 18,000.00	$ -	$ -	$ -	$ -	$ 48,000.00
6000.00		6000.00						
		6000.00						
$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
0.00	0.00	0.00						

$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ -	$ -	$ -	$ -	$ -
$ 6,000.00	$ -	$ 12,000.00	$ 18,000.00	$ -	$ -	$ -	$ -	$ 48,000.00
								$ 48,000.00

March	April	May	3rd Quarter Totals	June	July 2022	August	4th Quarter Totals	Total Expenditures
$ -	$ -	$ -	$ -				$ -	$ -
$ -	$ -	$ -	$ -				$ -	$ -
$ -	$ -	$ -	$ -				$ -	$ -
$ -	$ -	$ -	$ -				$ -	$ -
$ -	$ -	$ -	$ -				$ -	$ -
$ 6,000.00	$ -	$ 12,000.00	$ 18,000.00				$ -	$ 42,000.00
			$ -				$ -	$ 6,000.00
$ 6,000.00	$ -	$ 12,000.00	$ 18,000.00	$ -	$ -	$ -	$ -	$ 48,000.00
$ -	$ -	$ -	$ -				$ -	$ -
$ -	$ -	$ -	$ -				$ -	$ -
$ -	$ -	$ -	$ -				$ -	$ -
$ -	$ -	$ -	$ -				$ -	$ -
$ -	$ -	$ -	$ -				$ -	$ -
$ -	$ -	$ -	$ -				$ -	$ -
$ -	$ -	$ -	$ -				$ -	$ -
$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
$ 6,000.00	$ -	$ 12,000.00	$ 18,000.00	$ -	$ -	$ -	$ -	$ 48,000.00

John R. Keiser / 956-722-3995

ITEM 26-49 (TAB 5)

Date:	**Thursday, July 9, 2026 10:15 AM**
Tax Exempt Organization:	**Seven Flags Regional Advisory Council**
Submission ID:	**74477720261900575767**
Status:	**Federal Electronic Return Accepted**

Seven Flags Regional Advisory Council's Federal return has been accepte
the IRS on 07/09/2026.

July 7, 2026

Seven Flags Regional Advisory Council
PO Box 450094
Laredo, TX 78045

Please find enclosed a copy of your 2024 Federal Tax-Exempt Organization tax return for your records. Your federal return was electronically transmitted to the IRS on July 9, 2026; therefore, do not mail your federal Form 990 to the IRS.

If you have any questions about your tax return, please contact us. Thank you for letting us be of service to you.

Sincerely,

DLG Tax & Financial Services
PO Box 451756
Laredo, TX 78045
(956)220-3785 or (956)220-3785

2024

Exempt Organization Tax Return

Prepared For:

Seven Flags Regional Advisory Council
PO Box 450094
Laredo, TX 78045
(956)722-3995

Prepared By:

DLG Tax & Financial Services
PO Box 451756
Laredo, TX 78045
Telephone: (956)220-3785 or (956)220-3785
Email: ben@dlgcpafirm.com

Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2024 calendar year, or tax year beginning 09/01, 2024, and ending 08/31, 20 25

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization: Seven Flags Regional Advisory Council
Doing business as: Trauma Service Area T

D Employer identification number: 74-2915493

Number and street (or P.O. box if mail is not delivered to street address): PO Box 450094
Room/suite:

E Telephone number: (956) 722-3995

City or town, state or province, country, and ZIP or foreign postal code: Laredo, TX 78045

G Gross receipts $ 341,321.

F Name and address of principal officer: John R Keiser 1216 Santa Maria Laredo, TX 78040

H(a) Is this a group return for subordinates? ☐ Yes ☒ No
H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. See instructions
H(c) Group exemption number

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website:

K Form of organization: ☐ Corporation ☐ Trust ☐ Association ☒ Other Council

L Year of formation:

M State of legal domicile: TX

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: Develop and maintain regional trauma system serving three counties in Texas - Webb, Zapata, and Jim Hogg.

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	18
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	18
5	Total number of individuals employed in calendar year 2024 (Part V, line 2a)	5	0
6	Total number of volunteers (estimate if necessary)	6	0
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.

Revenue

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	345,672.	341,321.
9	Program service revenue (Part VIII, line 2g)		
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	345,672.	341,321.

Expenses

13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	280,536.	263,439.
14	Benefits paid to or for members (Part IX, column (A), line 4)		
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		
16a	Professional fundraising fees (Part IX, column (A), line 11e)		
b	Total fundraising expenses (Part IX, column (D), line 25)		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	63,041.	65,842.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	343,577.	329,281.
19	Revenue less expenses. Subtract line 18 from line 12	2,095.	12,040.

Net Assets or Fund Balances

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)		
21	Total liabilities (Part X, line 26)		
22	Net assets or fund balances. Subtract line 21 from line 20		

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer
Date

John R Keiser, Director
Type or print name and title

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	Check ☒ if self-employed	PTIN
Benjamin D De la Garza, CPA				P01735708

Firm's name: DLG Tax & Financial Services
Firm's EIN: 47-4363523
Firm's address: PO Box 451756 Laredo, TX 78045
Phone no.: (956) 220-3785

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2024)

UYA

Part III **Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III . . . . . ☐

1 Briefly describe the organization's mission:

Developed and maintained regional trauma system, serving three counties in Texas - Webb County, Jim Hogg County, and Zapata County.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: _____) (Expenses $ 317,980. including grants of $ 263,439.) (Revenue $ _____)

Provided medical equipment, supplies, trainings, for the enhancement of trauma/medical care. Purchased medical supplies and equipment to be distributed to enhance responder capabilities. The medical supplies and equipment infrastructure expenditures will serve to enhance the organization's trauma and medical preparedness capabilities.

4b (Code: _____) (Expenses $ _____ including grants of $ _____) (Revenue $ _____)

4c (Code: _____) (Expenses $ _____ including grants of $ _____) (Revenue $ _____)

4d Other program services (Describe on Schedule O.)
(Expenses $ including grants of $) (Revenue $)

4e Total program service expenses 317,980.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? *If "Yes," complete Schedule C, Part III*	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		X
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*. See instructions	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		X
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	X	

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV.*	28b		X
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in noncash contributions? *If "Yes," complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? **Note:** All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V ☐

				Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	0		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		X	

Part V Statements Regarding Other IRS Filings and Tax Compliance *(continued)*

				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b			
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	3a			X
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation on Schedule O*	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			X
b	If "Yes," enter the name of the foreign country _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a			X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	7a			X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	0		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b			
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state? **Note:** See the instructions for additional information the organization must report on Schedule O.	13a			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation on Schedule O*	14b			
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15			X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16			X
17	**Section 501(c)(21) organizations.** Did the trust, or any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	17			

Part VI **Governance, Management, and Disclosure.** *For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.*

Check if Schedule O contains a response or note to any line in this Part VI X

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	18		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
b	Enter the number of voting members included on line 1a, above, who are independent.	1b	18		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6	Did the organization have members or stockholders?	6			X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		X	
b	Each committee with authority to act on behalf of the governing body?	8b		X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses on Schedule O*	9			X

Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code.)*

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . .	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? .	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe on Schedule O how this was done.*	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed TX

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request ☐ Other *(explain on Schedule O)*

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records.

John R Keiser (956)722-3995, 1216 Santa Maria, Laredo, TX 78040

Part VII **Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII . . . . . ☐

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

☒ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Letisia Colon Secretary	01.00	X		X				0.	0.	0.
(2) Hector M Medina, Jr. Director	01.00	X						0.	0.	0.
(3) Jorge Delgado Chairman	01.00	X		X				0.	0.	0.
(4) Armando Parra Director	01.00	X						0.	0.	0.
(5) Silvestre Rodriguez Vice-Chairman	01.00	X		X				0.	0.	0.
(6) Jose "Joe" Gonzalez Treasurer	01.00	X		X				0.	0.	0.
(7) Baldomero A Bondoc Director	01.00	X						0.	0.	0.
(8) Ricardo Rangel Director	01.00	X						0.	0.	0.
(9) Daniel Arriaga Director	01.00	X						0.	0.	0.
(10) Victor Villarreal Director	01.00	X						0.	0.	0.
(11) Kevin L Harris Director	01.00	X						0.	0.	0.
(12) Reynaldo Veliz Director	01.00	X						0.	0.	0.
(13) Peter Gonzalez Director	01.00	X						0.	0.	0.
(14) Jose Garcia Director	01.00	X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees *(continued)*

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) Ismael Flores Director	01.00	X						0.	0.	0.
(16) Juan Medellin Director	01.00	X						0.	0.	0.
(17) Rene Castillo Director	01.00	X						0.	0.	0.
(18) Ramon Rojas Director	01.00	X						0.	0.	0.
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1b Subtotal										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization

		Yes	No
3	Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*		X
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII . . . . . ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b	15,900.			
	c	Fundraising events	1c	5,151.			
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	320,270.			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f				
	g	Noncash contributions included in lines 1a-1f	1g	$			
	h	**Total.** Add lines 1a-1f		341,321.			
Program Service Revenue			Business Code				
	2a						
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a-2f					
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)					
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
			(i) Real / (ii) Personal				
	6a	Gross rents	6a				
	b	Less: rental expenses	6b				
	c	Rental income or (loss)	6c				
	d	Net rental income or (loss)					
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory	7a				
	b	Less: cost or other basis and sales expenses	7b				
	c	Gain or (loss)	7c				
	d	Net gain or (loss)					
	8a	Gross income from fundraising events (not including $ _____ of contributions reported on line 1c). See Part IV, line 18	8a				
	b	Less: direct expenses	8b				
	c	Net income or (loss) from fundraising events					
	9a	Gross income from gaming activities. See Part IV, line 19	9a				
	b	Less: direct expenses	9b				
	c	Net income or (loss) from gaming activities					
	10a	Gross sales of inventory, less returns and allowances	10a				
	b	Less: cost of goods sold	10b				
	c	Net income or (loss) from sales of inventory					
Miscellaneous Revenue			Business Code				
	11a						
	b						
	c						
	d	All other revenue					
	e	**Total.** Add lines 11a-11d					
	12	**Total revenue.** See instructions		341,321.			

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX . . . . . ☐

	Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	138,438.	138,438.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	125,001.	125,001.		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
a	Management				
b	Legal				
c	Accounting				
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
13	Office expenses	372.		372.	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	1,480.		1,480.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a	Administration	57,229.	54,541.	2,688.	
b	Professional Services	1,255.		1,255.	
c	Training and Instruction	4,506.		4,506.	
d	Membership Dues	1,000.		1,000.	
e	All other expenses				
25	**Total functional expenses.** Add lines 1 through 24e	329,281.	317,980.	11,301.	
26	**Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X . . . . . ☐

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a			
	b	Less: accumulated depreciation — 10b		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)	0.	16	0.
Liabilities	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	**Total liabilities.** Add lines 17 through 25	0.	26	0.
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here ☐ and complete lines 27, 28, 32, and 33.**			
	27	Net assets without donor restrictions		27	
	28	Net assets with donor restrictions		28	
		Organizations that do not follow FASB ASC 958, check here ☐ and complete lines 29 through 33.			
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds		31	
	32	Total net assets or fund balances	0.	32	0.
	33	Total liabilities and net assets/fund balances	0.	33	0.

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI . . . . . ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	341,321.
2	Total expenses (must equal Part IX, column (A), line 25)	2	329,281.
3	Revenue less expenses. Subtract line 2 from line 1	3	12,040.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	12,040.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII . . . . . ☐

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both. ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization

Seven Flags Regional Advisory Council

Employer identification number

74-2915493

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____

10 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations . . . . . ☐

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	(iv) No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	187,086.	148,491.	558,754.	345,672.	341,321.	1,581,324.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	187,086.	148,491.	558,754.	345,672.	341,321.	1,581,324.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4.						1,581,324.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4	187,086.	148,491.	558,754.	345,672.	341,321.	1,581,324.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on	20.	8.				28.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 **Total support.** Add lines 7 through 10						1,581,352.

12 Gross receipts from related activities, etc. (see instructions) 12

13 **First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . . ☐

Section C. Computation of Public Support Percentage

14	Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f))	14	100.00%
15	Public support percentage from 2023 Schedule A, Part II, line 14	15	100.00%

16a **33 1/3 % support test–2024.** If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ☒

b **33 1/3 % support test–2023.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ☐

17a **10%-facts-and-circumstances test–2024.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization. . . . . ☐

b **10%-facts-and-circumstances test–2023.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization. . . . . ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . ☐

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						

14 **First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f))	15	00.00%
16	Public support percentage from 2023 Schedule A, Part III, line 15	16	00.00%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2024** (line 10c, column (f), divided by line 13, column (f))	17	00.00%
18	Investment income percentage from **2023** Schedule A, Part III, line 17	18	00.00%

19a **33 1/3 % support tests–2024.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3 %, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

b **33 1/3 % support tests–2023.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in* ***Part VI*** *how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer lines 3b and 3c below.*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* ***Part VI*** *when and how the organization made the determination.*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* ***Part VI*** *what controls the organization put in place to ensure such use.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in* ***Part VI*** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in* ***Part VI****, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).*	5a		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* ***Part VI.***	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990).*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in* ***Part VI.***	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* ***Part VI.***	9b		
c	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* ***Part VI.***	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer line 10b below.*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)*	10b		

Part IV Supporting Organizations *(continued)*

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
c	A 35% controlled entity of a person described on line 11a or 11b above? *If "Yes" to line 11a, 11b, or 11c, provide detail in* ***Part VI.***	11c		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or memberships of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organizations's officers, directors, or trustees at all times during the tax year? *If "No," describe in* ***Part VI*** *how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in* ***Part VI*** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.*	2		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in* ***Part VI*** *how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	1		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in* ***Part VI*** *how the organization maintained a close and continuous working relationship with the supported organization(s).*	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in* ***Part VI*** *the role the organization's supported organizations played in this regard.*	3		

Section E. Type III Functionally Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year* ***(see instructions).***

a ☐ The organization satisfied the Activities Test. *Complete* ***line 2*** *below.*

b ☐ The organization is the parent of each of its supported organizations. *Complete* ***line 3*** *below.*

c ☐ The organization supported a governmental supported organization. *Describe in* ***Part VI*** *how you supported a governmental supported organization (see instructions).*

2 Activities Test. ***Answer lines 2a and 2b below.***

			Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of its supported organization(s)? *If "Yes," then in* ***Part VI identify those supported organizations and explain*** *how these activities directly furthered their exempt purposes, how the organization was responsive to each of its supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* ***Part VI*** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	2b		

3 Parent of Supported Organizations. ***Answer lines 3a, 3b, and 3c below.***

a	Are the organization and its supported organization(s) part of an integrated system (for example, a hospital system)? *If "Yes," provide details in* ***Part VI.***	3a		
b	Did the organization direct the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* ***Part VI*** *the role played by the organization in this regard.*	3b		
c	Did the organization have the power to regularly appoint or elect (and remove) a majority of the officers, directors, or trustees of each of the supported organizations? *If "Yes" or "No", provide details in* **Part VI.**	3c		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 *(explain in **Part VI**)*. **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 **Adjusted Net Income** (subtract lines 5, 6, and 7 from line 4)	8		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d **Total** (add lines 1a, 1b, and 1c)	1d		
e **Discount** claimed for blockage or other factors *(explain in detail in **Part VI**)*:			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 **Minimum Asset Amount** (add line 7 to line 6)	8		

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

7 ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Part V **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** *(continued)*

Section D - Distributions			**Current Year**
1	Amounts paid to supported organizations to accomplish exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set-aside amounts (prior IRS approval required - *provide details in* ***Part VI***)	5	
6	**Total annual distributions.** Add lines 1 through 6.	6	
7	Distributions to attentive supported organizations to which the organization is responsive *(provide details in* ***Part VI****)*. See instructions.	7	
8	Distributable amount for 2024 from Section C, line 6	8	
9	Line 7 amount divided by line 8 amount	9	

Section E - Distribution Allocations (see instructions)		**(i) Excess Distributions**	**(ii) Underdistributions Pre-2024**	**(iii) Distributable Amount for 2024**
1	Distributable amount for 2024 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2024 (reasonable cause required- *explain in* ***Part VI***). See instr.			
3	Excess distributions carryover, if any, to 2024			
a	From 2019			
b	From 2020			
c	From 2021			
d	From 2022			
e	From 2023			
f	**Total** of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2024 distributable amount			
i	Carryover from 2019 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2024 from Section D, line 7: $			
a	Applied to underdistributions of prior years			
b	Applied to 2024 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, *explain in* ***Part VI.*** See instructions.			
6	Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, *explain in* ***Part VI.*** See instructions.			
7	**Excess distributions carryover to 2025.** Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2020			
b	Excess from 2021			
c	Excess from 2022			
d	Excess from 2023			
e	Excess from 2024			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, 3b and 3c; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 7; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Schedule B
(Form 990)
(Rev. January 2025)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ or 990-PF.
Go to *www.irs.gov/Form990* for the latest information.

OMB No. 1545-0047

Name of the organization	Employer identification number
Seven Flags Regional Advisory Council	74-2915493

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	☒ 501(c)(3) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	☐ 527 political organization
Form 990-PF	☐ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☒ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33⅓% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (**1**) $5,000; or (**2**) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year . . . . . $ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization: Seven Flags Regional Advisory Council

Employer identification number: 74-2915493

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Texas Dep. of State Health Services 1100 West 49th Street Austin, TX 78756	$ 320,270.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization: Seven Flags Regional Advisory Council

Employer identification number: 74-2915493

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

Name of organization	Employer identification number
Seven Flags Regional Advisory Council	74-2915493

Part III *Exclusively* **religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor.** Complete columns **(a)** through **(e)** and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **$1,000 or less** for the year. (Enter this information once. See instructions.) $

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE I (Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Seven Flags Regional Advisory Council

Employer identification number

74-2915493

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☒ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Bronze Starr Ambulance 5816 East Dr. Ste. Unit A Laredo, TX 78045			8,562.				Systems Improvement
(2) Laredo Fire Department EMS 616 East Del Mar Blvd. Laredo, TX 78045			8,562.				Systems Improvement
(3) Angel Care Ambulance 1901 San Bernardo Ste. Ste 1 Laredo Laredo, TX 78040			8,562.				Systems Improvement
(4) Webb County Volunteer Fire 2399 St. hwy 359 Oilton, TX 78371			8,562.				Systems Improvement
(5) Victorious Care Ambulance 1706 San Bernardo Laredo, TX 78041			8,562.				Systems Improvement
(6) Priority EMS 315 Calle Del Norte Laredo, TX 78045			8,562.				Systems Improvement
(7) Zapata County Fire/EMS 305 FM 496 Zapata, TX 78076			18,243.				Systems Improvement
(8) Texas Superior Ambulance 802 Galveston St Ste. Ste A Laredo, TX 78040			8,562.				Systems Improvement
(9) Laredo Lifeline 2337 Endevor Dr Ste. Ste C Laredo, TX 78045			8,562.				Systems Improvement
(10) Medpoint Ambulance 6318 Krone Ln. Ste. Ste. B Laredo, TX 78045			8,562.				System Improvement

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ____

3 Enter total number of other organizations listed in the line 1 table . . . . . ____

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1	EMS education scholarships or tuition assistance		125,001.			
2						
3						
4						
5						
6						
7						

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Part II question 1 g	The organization monitors grant and scholarship assistance through grant grant documentation, eligibility review, supporting invoices or reimburseme documentation, and review of expenditures to ensure funds are
Part II question 1 g	used for EMS education, training, equipment, supplies, and trauma-system capability improvements.

SCHEDULE I (Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Schedule I Part II Overflow Page 1

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Seven Flags Regional Advisory Council

Employer identification number

74-2915493

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☐ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Primary Care Ambulance 1801 Gust St Ste. Ste b Laredo, TX 78041			8,562.				Systems Improvement
(2) Lalitas Ambulance Care 1217 N Seymour Ave Laredo, TX 78040			8,562.				Systems Improvement
(3) Skyline EMS E Griffin Pkwy Ste. Ste B Mission, TX 78572			19,876.				Systems Improvement
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ____

3 Enter total number of other organizations listed in the line 1 table . . . . . ____

SCHEDULE O
(Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

Go to *www.irs.gov/Form990* for the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Seven Flags Regional Advisory Council

Employer identification number

74-2915493

Name of the organization: Seven Flags Regional Advisory Council

Employer identification number: 74-2915493

Part VI Line 8a
These records are retained and made available upon request in accordance
Part VI Line 11b
The Form 990 is prepared by an independent CPA and provided to
Part VI Line 11b
the governing body for review before filing.
Part VI Line 12c
Board members and key personnel are required to disclose potential conflict
Part VI Line 12c
of interest annually and as they arise. Disclosed conflicts are reviewed by
Part VI Line 19
The organization can make available to the public any
Part VI Line 19
public information upon request.

Form **8879-TE**

Department of the Treasury
Internal Revenue Service

IRS E-file Signature Authorization for a Tax Exempt Entity

For calendar year 2024, or fiscal year beginning September 1, 2024, and ending August 31, 2025

Do not send to the IRS. Keep for your records.
Go to *www.irs.gov/Form8879TE* for the latest information.

OMB No. 1545-0047

2024

Name of filer	EIN or SSN
Seven Flags Regional Advisory Council	74-2915493

Name and title of officer or person subject to tax

John R Keiser, Director

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line **1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a,** or **10a** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b,** or **10b,** whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a	**Form 990** check here. . . . . ☒	b	**Total revenue,** if any (Form 990, Part VIII, column (A), line 12)	1b	341,321.
2a	**Form 990-EZ** check here. . . ☐	b	**Total revenue,** if any (Form 990-EZ, line 9)	2b	
3a	**Form 1120-POL** check here . ☐	b	**Total tax** (Form 1120-POL, line 22)	3b	
4a	**Form 990-PF** check here. . . ☐	b	**Tax based on investment income** (Form 990-PF, Part V, line 5)	4b	
5a	**Form 8868** check here . . . . ☐	b	**Balance due** (Form 8868, line 3c).	5b	
6a	**Form 990-T** check here. . . . ☐	b	**Total tax** (Form 990-T, Part III, line 4)	6b	
7a	**Form 4720** check here . . . . ☐	b	**Total tax** (Form 4720, Part III, line 1).	7b	
8a	**Form 5227** check here . . . . ☐	b	**FMV of assets at end of tax year** (Form 5227, Item D).	8b	
9a	**Form 5330** check here . . . . ☐	b	**Tax due** (Form 5330, Part II, line 19).	9b	
10a	**Form 8038-CP** check here . . ☐	b	**Amount of credit payment requested** (Form 8038-CP, Part III, line 22) .	10b	

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that ☒ I am an officer of the above entity or ☐ I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the 2024 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS **(a)** an acknowledgement of receipt or reason for rejection of the transmission, **(b)** the reason for any delay in processing the return or refund, and **(c)** the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

☒ I authorize DLG Tax & Financial Services to enter my PIN 54321 as my signature

ERO firm name

Enter five numbers, but do not enter all zeros

on the tax year 2024 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☐ As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2024 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax _____ Date _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

744777 12345

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2024 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163,** Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature _____ Date _____

ERO Must Retain This Form - See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

ITEM 26-50 (TAB 6)

SEVEN FLAGS REGIONAL ADVISORY COUNCIL	
NOMINATION FOR OFFICERS **Two Year Term: September 1, 2026- August 31, 2028** *In order to be considered as a nominee a candidate must be a SFRAC Board Director, with the exception of the Chairperson, who may be nominated from outside the Board membership. Alternates do not qualify for the selection of any of the remaining Officer positions.*	
POSITION TO BE FILLED: **CHAIRMAN**	NAME: Joe Gonzalez
POSITION TO BE FILLED: **TREASURER**	NAME: Peter Gonzalez

SEVEN FLAGS REGIONAL ADVISORY COUNCIL	
NOMINATION FOR OFFICERS **Two Year Term: September 1, 2024- August 31, 2026** *In order to be considered as a nominee a candidate must be a SFRAC Board Director, with the exception of the Chairperson, who may be nominated from outside the Board membership. Alternates do not qualify for the selection of any of the remaining Officer positions.*	
POSITION TO BE FILLED: **CHAIRMAN**	NAME: Joe Gonzalez
POSITION TO BE FILLED: **TREASURER**	NAME: Armando Parra

ITEM 26-51 (TAB 7)

SFRAC COMMITTEE ATTENDANCE MATRIX (September 2025 to April 2026)

Committee	Chairman	September 2025		January 2026		April 2026		Percent %	
		Present	Absent	Present	Absent	Present	Absent	Present	Absent
Neonatal/NICU	**Angelica Perez**	**P**			**A**	**P**		**67%**	**33%**
Cardiac	**Claudia Amaya**		**A**		A			**33%**	**67%**
	Leticia Perez						**P**	Overall	Overall
Prehospital/EMS	**Victor Villarreal**		**A**		**A**		**A**		**100%**
Maternal	**Maria Santillan**	**P**		**P**		**P**		**100%**	
Trauma/Injury Prevention	**Leticia Colon**		**A**	**P**			**A**	**33%**	**67%**
Stroke	**Chantele Molina**	**P**		**P**		**P**		**100%**	

Committee	Co-Chair	September 2025		January 2026		April 2026		Percent %	
		Present	Absent	Present	Absent	Present	Absent	Present	Absent
Neonatal/NICU	Lilly Limas	**P**		**P**		**P**		**100%**	
Cardiac	Rosie Tamez		**A**		**A**		**A**		**100%**
Prehospital/EMS	Angel Garcia		**A**		**A**		**A**		**100%**
Maternal	Stacy Lopez	**P**			**A**			**33%**	**67%**
	Denise Morales					**A**		Overall	Overall
Trauma/Injury Prevention	Joe Gonzalez	**P**		**P**		**P**		**100%**	
Stoke	Angie Avila		**A**		**A**		**A**		**100%**

ITEM 26-52 (TAB 8)

TEXAS
Health and Human Services

Texas Department of State Health Services

Jennifer A. Shuford, M.D., M.P.H.
Commissioner

Jorge Delgado, Chair
The Seven Flags Regional Advisory Council on Trauma, Trauma Service Area (TSA)-T
1002 Dicky Lane
Laredo, Texas 78043

Subject: Emergency Medical Services (EMS)/County (CO) Regional Advisory Council (RAC) (EMS/CO-RAC)
Contract Number: HHS001336600020, Amendment No. 5
Contract Amount: $1,282,043.00
Contract Term: September 1, 2023, to August 31, 2027

Dear Mr. Delgado:

Attached is an amendment to the EMS/Trauma System services grant agreement between the Department of State Health Services and The Seven Flags Regional Advisory Council on Trauma, Trauma Service Area (TSA)-T ("Contract").

The purpose of the Contract is for the enhancement and delivery of patient care in the trauma service area and to perform activities for the purpose of developing, implementing, and monitoring a regional trauma and emergency healthcare system plan.

This Amendment No. 5 adds funds for State Fiscal Year 2027 in the amount of $320,557.00, which increases the total not-to-exceed amount of the Contract to $1,282,043.00. Amendment No. 5 also updates the Contract attachments and extends the Contract term to August 31, 2027.

Please let me know if you have any questions or need additional information.

Sincerely,

Kimberly Royal, CTCM, CTCD
Contract Administration Manager
(512) 776-3613
kimberly.royal@dshs.texas.gov

DEPARTMENT OF STATE HEALTH SERVICES
CONTRACT NO. HHS001336600020
AMENDMENT NO. 5

The **DEPARTMENT OF STATE HEALTH SERVICES** ("DSHS" or "System Agency") and **THE SEVEN FLAGS REGIONAL ADVISORY COUNCIL ON TRAUMA, TRAUMA SERVICE AREA (TSA)-T** ("Grantee"), each a "Party" and collectively the "Parties" to that certain Emergency Medical Services/County Regional Advisory Council (EMS/CO-RAC) grant agreement, effective September 1, 2023, and denominated DSHS Contract No. HHS001336600020 ("Contract"), as amended, now desire to further amend the Contract.

WHEREAS, the Parties desire to exercise their option to renew the Contract for an additional one-year term for the period beginning September 1, 2026, through August 31, 2027 ("FY27"), representing the third of four one-year extension options;

WHEREAS, the Parties desire to add funds to the Contract for FY27 in support of services to be provided by Grantee and update the not-to exceed amount of the Contract;

WHEREAS, the Parties desire to update the Contract Representative information and the Contract Affirmations; and

WHEREAS, the Parties desire to revise the Statement of Work, the EMS Trauma Care System Account (County Detail) and the Deliverables Reporting Calendar; and

WHEREAS, for the avoidance of doubt, the parties desire to clarify that the contract includes the Statement of Work for FY24 - FY26; and

WHEREAS, for the avoidance of doubt, the parties desire to clarify that the contract includes the EMS Trauma Care System Account (County Detail) for FY25; and

WHEREAS, for the avoidance of doubt, the parties desire to clarify that the contract includes the Deliverables Reporting Calendar for FY25.

WHEREAS, for the avoidance of doubt, the parties desire to clarify that **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK** includes a requirement to return all unexpended funds to DSHS at end of the biennium (FY26-27).

NOW, THEREFORE, the Parties hereby amend and modify the Contract as follows:

1. **SECTION III, DURATION,** of the Contract is amended to reflect a revised termination date of **August 31, 2027**, unless extended or terminated sooner pursuant to the terms and conditions of the Contract.
2. **SECTION V, BUDGET,** of the Contract is amended to add funds for FY27 in the amount of **$320,557.00**. Accordingly, the total not-to-exceed amount of the Contract is increased to **$1,282,043.00.** All expenditures for FY27 will be in accordance with **ATTACHMENT A-5,**

FIFTH REVISED STATEMENT OF WORK, and **ATTACHMENT B-3, FY27 RAC EMS COUNTY PASS-THRU AND ADDITIONAL FUNDING INFORMATION.**

3. **SECTION VII, CONTRACT REPRESENTATIVES,** of the Contract is hereby amended to replace the System Agency contact information as follows:

   System Agency
   Department of State Health Services
   1100 West 49th Street, MC 1990
   Austin, Texas 78756
   Attention: Kimberly Royal
   kimberly.royal@dshs.texas.gov

4. **ATTACHMENT A-4, FOURTH REVISED STATEMENT OF WORK**, of the Contract is supplemented with **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**, which is attached to this Amendment No. 5 and incorporated into and made part of this Contract for all purposes.

5. **ATTACHMENT A, A-1, A-2 AND A-3, THE PREVIOUS STATEMENTS OF WORK**, are added and incorporated back into and made part of this Contract for all purposes.

6. **ATTACHMENT B-2, FY26 EMS TRAUMA CARE SYSTEM ACCOUNT (COUNTY DETAIL),** of the Contract is supplemented with **ATTACHMENT B-3, FY27 RAC EMS COUNTY PASS-THRU AND ADDITIONAL FUNDING INFORMATION**, which is attached to this Amendment No. 5 and incorporated into and made part of the Contract for all purposes.

7. **ATTACHMENT B-1, FY25 EMS TRAUMA CARE SYSTEM ACCOUNT (COUNTY DETAIL),** is added and incorporated back into and made part of this Contract for all purposes.

8. **ATTACHMENT C-2, HHS CONTRACT AFFIRMATIONS – V. 2.5, NOVEMBER 2024,** of the Contract is deleted in its entirety and replaced with **ATTACHMENT C-3, HHS CONTRACT AFFIRMATIONS – V. 2.9, MARCH 2026,** which is attached to this Amendment No. 5 and incorporated into and made part of the Contract for all purposes.

9. **ATTACHMENT F-3, FY26 DELIVERABLES REPORTING CALENDAR**, of the Contract is supplemented with **ATTACHMENT F-4, FY27 DELIVERABLES REPORTING CALENDAR**, which is attached to this Amendment No. 5 and incorporated into and made part of the Contract for all purposes.

10. **ATTACHMENT F-2, REVISED FY25 DELIVERABLES REPORTING CALENDAR**, is added and incorporated back into and made part of this Contract for all purposes.

11. This Amendment No. 5 shall be effective on August 31, 2026.

12. Except as modified by this Amendment, all terms and conditions of the Contract, as previously amended, shall remain in full force and effect.

13. Any further revision to the Contract shall be by written agreement of the Parties.

14. Each Party represents and warrants that the individual executing this Amendment on its respective behalf has full power and authority to enter into this Amendment.

SIGNATURE PAGE FOLLOWS

SIGNATURE PAGE FOR AMENDMENT NO. 5
DSHS CONTRACT NO. HHS001336600020

DEPARTMENT OF STATE HEALTH SERVICES

By: Signed by: Christy Havel Burton 3A9AA1FD9B20448...

Printed Name: Christy Havel Burton

Title: Chief Financial Officer

Date of Signature: June 19, 2026

THE SEVEN FLAGS REGIONAL ADVISORY COUNCIL ON TRAUMA, TRAUMA SERVICE AREA (TSA)-T

By: Signed by: 233BF41BF02E4DA...

Printed Name: Jorge Delgado

Title: Chairman

Date of Signature: June 18, 2026

THE FOLLOWING DOCUMENTS ARE ATTACHED TO THIS AMENDMENT NO. 5 AND INCORPORATED INTO AND MADE PART OF THE CONTRACT:

ATTACHMENT A-5	FIFTH REVISED STATEMENT OF WORK
ATTACHMENT B-3	FY27 RAC EMS COUNTY PASS-THRU AND ADDITIONAL FUNDING INFORMATION
ATTACHMENT C-3	HHS CONTRACT AFFIRMATIONS – V. 2.9, MARCH 2026
ATTACHMENT F-4	FY27 DELIVERABLES REPORTING CALENDAR

ATTACHMENT A-5
FIFTH REVISED STATEMENT OF WORK

I. GRANTEE RESPONSIBILITIES & REQUIREMENTS

A. EMS/COUNTY FUNDING REQUIREMENTS

The Department of State Health Services (DSHS) shall contract with each eligible Grantee to distribute the county shares of the Emergency Medical Service allocation to eligible EMS providers providing EMS emergency response within counties which are aligned with the Regional Advisory Council jurisdiction.

Grantee will:

1. Distribute funds directly to eligible EMS providers. DSHS will provide allocations by county; however, actual eligibility will be based upon meeting the RAC's participation requirements and holding an EMS provider licensure for the reporting year. If an EMS provider is no longer considered eligible or is no longer operational, these funds may be redirected to provide additional allocations to eligible EMS providers within the same county to which funds were allocated. If there are no additional eligible EMS providers within the same county, the funds may be distributed to EMS providers providing emergency transports in adjacent counties that meet the requirements and provide emergency transports within this county. If an alternate EMS provider cannot be identified, the funds will be returned to DSHS. Grantee should contact the DSHS Contract Management Section ("CMS") for instructions if funds will be returned to DSHS. Funds distributed to EMS providers as an advance may not be reduced by the Grantee for the cost of dues, fees, or services provided by the Grantee and that are billed to the EMS providers.
2. Evaluate its distribution plan based on the following:
   a. Fair distribution process to all eligible EMS providers, taking into account all eligible providers participating in contiguous Trauma Service Areas ("TSAs");
   b. Needs of the EMS providers; and
   c. Evidence of EMS providers' consensus and their written approval for any separate distribution plan funding proposed by the Grantee for shared county projects or costs that impact the eligible county entities listed on **ATTACHMENT B-3, FY27 EMS TRAUMA CARE SYSTEM ACCOUNT (COUNTY DETAIL).**
3. Ensure the county portion of the EMS allocation is distributed directly to eligible recipients without any reduction in the total amount allocated by DSHS and that these funds are used to supplement the current county EMS funding of eligible recipients. Grantee will prioritize EMS provider reimbursements to ensure the continuation of EMS services by the EMS provider, including reimbursement for:
   a. EMS operational expenses used to maintain the EMS services provided by the EMS provider;
   b. EMS supplies;
   c. EMS education and training:
      i. Cost of meals during overnight travel may be reimbursed only if EMS personnel are attending meetings or conferences that relate to the

EMS/COUNTY Grant Program and technical information is being disseminated; and

ii. EMS providers must have travel policies that specify maximum reimbursement limits for meals, lodging, and the mileage rate. Otherwise, the State of Texas travel policies and reimbursement rates will apply;

d. EMS equipment;

e. EMS ambulances (other vehicles may be considered upon request and prior approval by DSHS); and

f. EMS communication systems.

4. Ensure Contract funds **are not** used for the following:

   a. Buildings or real property unless Grantee obtains prior written approval from DSHS. Any costs related to the initial acquisition of the buildings or real property are not allowable without written pre-approval;

   b. Purchase and improvement of land;

   c. Food (other than as specified under **SECTION I(A)(3)(C)(I)** of this **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**);

   d. Investments (such as stocks, bonds, or mutual funds); and

   e. Expenses associated with a person or entity that has been hired to affect the outcome of legislation.

5. If necessary, utilize EMS/RAC or RAC SYSTEMS DEVELOPMENT funds to administer the EMS/COUNTY deliverables.

6. Submit an EMS Provider Expenditure Report that records funds distributed to EMS providers as an advance or reimbursement. The EMS Provider Expenditure Report records how the EMS providers spent their allocated funds. Grantee should ensure the report is complete, reconciled, and verified to be accurate. The EMS Provider Expenditure Report will be submitted using the template located under the "Regional Advisory Councils (RAC)" heading at the following URL: https://www.dshs.texas.gov/dshs-ems-trauma-systems/applications-forms#RAC. Grantee will submit the EMS Provider Expenditure Report annually. Supporting documentation may be required as requested by DSHS.

7. Submit an EMS Provider Distribution Report that outlines the final list of eligible EMS providers that were awarded funds using the template located under the "Regional Advisory Councils (RAC)" heading at the following URL: https://www.dshs.texas.gov/dshs-ems-trauma-systems/applications-forms#RAC. The EMS Provider Distribution Report will be submitted annually and will serve to delineate how the Grantee distributed funds to eligible EMS providers in the Grantee's TSA counties. This report should include any prior year EMS/COUNTY carryforward funds. All disbursements should be outlined on the EMS Provider Distribution Report. Funds not distributed and reported in the EMS Provider Distribution Report may result in disallowed costs.

8. Submit an EMS/COUNTY Eligibility List annually by November 30th of every State Fiscal Year which will contain a list of the eligible EMS providers that met the RAC's eligibility requirements, participated in performance improvement activities as requested, and utilized the RAC's regional protocols regarding patient destination

and transport. DSHS must approve the EMS/COUNTY Eligibility List prior to its distribution.

9. Comply with the reporting requirements and due dates identified under **ATTACHMENT F-4, FY27 DELIVERABLES REPORTING CALENDAR**. The Deliverables Reporting Calendar (see **ATTACHMENT F-4, FY27 DELIVERABLES REPORTING CALENDAR**) includes due dates and where to submit all identified deliverables. Any changes to **ATTACHMENT F-4, FY27 DELIVERABLES REPORTING CALENDAR**, will be documented through a formal Contract amendment and will be provided to Grantee by the assigned DSHS Contract Representative.

10. In accordance with Texas Health and Safety Code Sections 773.122(c) and 780.004(d), funds that are not able to be disbursed by a RAC to eligible recipients for approved functions by the end of the State Fiscal Year in which the funds were disbursed may be retained by the RAC for use in the following State Fiscal Year for approved functions. Funds that are not disbursed by the RAC in the following State Fiscal Year shall be returned to DSHS.

11. Use funds awarded by the 89th Texas Legislature under House Bill 1 to keep pace with increasing Grantee responsibilities, including compliance with statutory requirements. Some examples of how Grantee may use the funds awarded under House Bill 1 may include RAC approved projects, incorporating maternal and neonatal care (perinatal) committees and activities into RAC planning, developing and implementing regional perinatal and stroke transfer and system plans, and handling coordination with an increased number of trauma facilities due to Texas' increasing population. Funds that are not able to be disbursed by a RAC for approved functions by the end of the State Fiscal Year in which the funds were awarded, may be retained by the RAC for use in the following State Fiscal Year for approved functions. Funds that are not disbursed by the RAC in the following State Fiscal Year shall be returned to DSHS.

12. DSHS-approved budget may be revised by Grantee in accordance with the following requirements:
    a. For any transfer between budget categories, Grantee shall submit a revised Categorical Budget using the Budget Template to the DSHS Contract Representative, highlighting the areas affected by the budget transfer and written justification for the transfer request. After DSHS review, the designated DSHS Contract Representative will provide notification of acceptance, rejection, or the need for a Contract Amendment to the Grantee by email.
    b. For transfer of funds between direct budget categories, other than the 'Equipment' and 'Indirect Cost' categories, for less than or equal to a cumulative twenty-five (25) percent of the total value of the respective Contract budget period, Grantee shall submit timely written notification to the DSHS Contract Representative using the Revised Budget Form and request DSHS approval. If a budget revision for less than or equal to the cumulative twenty-five (25) percent is approved for transfer of funds between direct budget categories, the DSHS Contract Representative will provide notification of acceptance to Grantee by email, upon receipt of which, the funds can be utilized by the Grantee.
    c. For transfer of funds between direct budget categories, other than the 'Equipment' and 'Indirect Cost' categories, that cumulatively exceeds twenty-

five (25) percent of the total value of the respective Contract budget period, Grantee shall submit timely written notification to the DSHS Contract Representative using the Revised Budget Form and request DSHS approval. If the revision is approved, the budget revision is not authorized, and the funds cannot be utilized until an amendment is executed by the Parties.

d. Any transfer between budget categories that includes 'Equipment' and/or 'Indirect Cost' categories must be approved by amendment to the Contract. Grantee shall submit timely written notification to the DSHS Contract Representative using the Revised Budget Form and request DSHS approval. If the revision is approved, the budget revision is not authorized, and the funds cannot be utilized until an amendment is executed by the Parties.

B. EMS/RAC TRAUMA FUNDING REQUIREMENTS

Grantee will:

1. Comply with all applicable laws including Health and Safety Code Sections 241.182-185, 773.122, and 780.003-006. If DSHS determines that Grantee disbursed funds in violation of these statutes, DSHS may withhold funds from Grantee for a period of at least one (1) year, but not more than three (3) years.
2. Use funds as provided for in this Contract for the operations of the TSA and for the enhancement and delivery of patient care in the Grantee's TSA.
3. Ensure that funds are used for the following allowable costs:
   a. Direct operational expenses;
   b. RACs may recover eligible indirect costs by utilizing an approved indirect cost rate;
   c. Education and training;
   d. Equipment;
   e. Communication systems; and
   f. Food and staff travel costs that are allowed in the Grantee's travel policy and approved by DSHS. A travel expense must be incurred before it is eligible for reimbursement. DSHS may request submission of the Grantee's pay and travel policies, as applicable, to validate such expenses.

      For lodging and transportation expenses, proof of payment must be documented to validate that the expenses were actually incurred.

      Grantee may be reimbursed for meal and/or lodging expenses that are incurred on a day that the meeting or conference occurs. The reimbursement is limited to the rates set forth in the General Appropriations Act. The reimbursement limit applies without a carry-over from one day to another.
4. Ensure that funds are **not** used for the following:
   a. Vehicles;
   b. Improvements to buildings or real property without prior written approval from DSHS. Any costs related to the initial acquisition of the buildings or real property are not allowable without written pre-approval;
   c. Purchase and improvement of land;

d. Investments (such as stocks, bonds, or mutual funds);

e. Expenses associated with a person or entity that has been hired to affect the outcome of legislation; and

f. Salaries of Grantee's executive board members or executive officers, as applicable.

5. Submit a Quarterly Support Form for both RAC Systems Development and EMS/RAC. The Quarterly Support Form template is located under the "Regional Advisory Councils (RAC)" heading at the following URL: https://www.dshs.texas.gov/dshs-ems-trauma-systems/applications-forms#RAC. The Quarterly Support Form will capture monthly expenditures incurred as well as programmatic and administrative costs. Income earned from funds directly associated with the EMS/CO-RAC Program (i.e., fees or co-pays for services performed, income from the sale of items or services, registration fees collected, etc.) should also be reported. Rebates, refunds, discounts, and adjustments or credits should be treated as applicable credits and should be tracked and applied within Grantee's financial system or General Ledger and not as program income. This is the same form that is identified under the RAC Systems Development Funding Requirements at **SECTION (I)(C)(8)** of this **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**. Grantee will submit a single Quarterly Support Form for each state fiscal quarter.

6. Submit the EMS/RAC & EMS/RAC Systems Development Narrative Report biannually. A template for the EMS/RAC & EMS/RAC Systems Development Narrative Report is located under the "Regional Advisory Councils (RAC)" heading at the following URL: https://www.dshs.texas.gov/dshs-ems-trauma-systems/applications-forms#RAC. The EMS/RAC & EMS/RAC Systems Development Narrative Report must describe how Grantee's funds were utilized to enhance and improve delivery of EMS and Trauma Patient Care, as outlined within this **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**. This is the same report that is identified under the RAC Systems Development Funding Requirements at **SECTION (I)(C)(9)** of this **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**. Grantee will submit a single EMS/RAC & EMS/RAC Systems Development Narrative Report on a biannual basis.

7. Schedule general membership meetings for RAC members and stakeholders. At the general membership meetings, Grantee will provide RAC members and stakeholders a financial report, which must include, but shall not be limited to, the following information: Contract funds expended, planned Contract expenditures, and the remaining balance of funds available under the Contract. The general membership meeting(s) must be held once each state fiscal quarter during the Contract term. Note: These are the general membership meetings also identified at **SECTION (I)(C)(10)** of this **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**.

8. Maintain as part of its accounting records and prepare to submit to DSHS **upon request**, and within fourteen (14) calendar days, source documents to support expenditures identified in the Quarterly Support Forms.

9. Comply with the reporting requirements on the Deliverables Reporting Calendar located at **ATTACHMENT F-4, FY27 DELIVERABLES REPORTING CALENDAR**. The Deliverables Reporting Calendar includes due dates and reporting submission

requirements for all deliverables. Any changes to the Deliverables Reporting Calendar will be documented through a formal Contract amendment and will be provided to Grantee by the assigned DSHS Contract Representative.

10. In accordance with Texas Health and Safety Code Sections 773.122(c) and 780.004(d), have the opportunity to retain funds that are not able to be disbursed by Grantee to eligible recipients for approved functions by the end of the State Fiscal Year in which the funds were disbursed, and use such funds in the following State Fiscal Year for approved functions. Funds that are not disbursed by Grantee in the following State Fiscal Year shall be returned to DSHS.

11. Use funds awarded by the 89th Texas Legislature under House Bill 1 to keep pace with increasing Grantee responsibilities, including compliance with statutory requirements. Some examples of how Grantee may use the funds awarded under House Bill 1 may include RAC approved projects, incorporating maternal and neonatal care (perinatal) committees and activities into RAC planning, developing and implementing regional perinatal and stroke transfer and system plans, and handling coordination with an increased number of trauma facilities due to Texas' increasing population. Funds that are not used by August 31, 2027, shall be returned to DSHS within thirty (30) days of Contract end date, in accordance with the biennium (FY26 and FY27).

C. RAC SYSTEMS DEVELOPMENT FUNDING REQUIREMENTS

Grantee will:

1. Perform activities to develop, implement, and monitor a regional EMS and trauma system plan by facilitating trauma and emergency health care system networking within the Grantee's own TSA or among a group of TSAs throughout Texas.
2. Comply with all applicable laws and regulations established at federal and state levels, as these regulations now appear or may be amended during the period of this Contract. Standards and guidelines referenced are those in effect upon the effective date of this Contract and include:
   a. Texas Health and Safety Code Sections 780.003-.006;
   b. Texas Health and Safety Code Chapter 773;
   c. 25 Texas Administrative Code Sections 157.123, 157.130, and 157.131;
   d. Texas Health and Safety Code Sections 241.182-.185;
   e. 25 Texas Administrative Code Chapter 133, Subchapter J; and
   f. 25 Texas Administrative Code Chapter 133, Subchapter K.
3. Ensure that the RAC Chair, or a RAC Executive Board member, and the person completing the Supporting Documentation Reports submitted to DSHS, attend any scheduled meetings with the DSHS Program and CMS staff regarding the review of regional systems development activities and contractual requirements. DSHS may require Grantee to participate in and attend a virtual meeting.
4. Support the Perinatal Care Region ("PCR") within the Grantee's TSA for descriptive and regional planning purposes and ensure patient referral is not restricted by:
   a. Supporting the PCR; and

b. Having the PCR consider and facilitate a perinatal system plan that addresses transfer agreements.

5. Adhere to the following eligible programmatic costs:
   a. Supplies/equipment and costs of personnel for EMS and injury prevention and education programs;
   b. Costs of personnel, supplies, and equipment to conduct trauma-related courses (Trauma Nursing Core Course, Advanced Trauma Life Support, Basic Trauma Life Support, etc.);
   c. Updating and sharing the regional Trauma and Emergency Healthcare System Plan with the RAC general membership;
   d. Educating the public and trauma care providers about the regional Trauma and Emergency Healthcare System Plan;
   e. Expenditures or grants to entities related to the delivery of trauma patient care and/or expediting the implementation of the Texas EMS/Trauma System;
   f. System performance improvement meetings, newsletters, regional data needs, and regional communication systems; and
   g. Associated travel and registration fees for RAC staff to attend meetings/conferences related to EMS/Trauma Systems.

6. Comply with the following funding restrictions:
   a. Costs related to improvements to buildings or real property are not allowable without prior written approval from DSHS. Any costs related to the initial acquisition of the buildings or real property are not allowable without prior written approval; and
   b. Expenses associated with membership in business, technical, and professional organizations involved in lobbying are not allowable expenses under this Contract. However, if an organization is not involved in lobbying and the Grantee can demonstrate how membership in a professional/technical organization benefits the DSHS program(s), cost of membership may be allowed with prior approval from DSHS.

7. Comply with the following non-allowable costs:
   a. Food, except that the cost of meals for RAC staff and RAC board members attending meetings or conferences that pertain to carrying out activities under the Contract where there is dissemination of technical information is allowable. In addition, same-day meal expenses may be reimbursable if the RAC staff person or RAC board member is outside of his or her designated headquarters for at least six (6) consecutive hours;
   b. Purchase and improvement of land;
   c. Investments (stocks, bonds, mutual funds, etc.); and
   d. No more than thirty-five percent (35%) of the RAC Systems Development funds to be utilized for grant administrative costs. Costs charged directly to a state award are incurred specifically for that state award, including program-specific requirements needed to achieve the award's objectives outlined in this Statement of Work. These costs include, but may not be limited to:

i. Personnel, rent, utilities, office expenses (postage, copying, phone), leased office equipment and supplies, and mailboxes;

ii. Travel to and from required statewide meetings as required within this Statement of Work, including lodging for the Executive Director (or equivalent) and RAC executive board members;

iii. Training that directly benefits the objectives outlined in this Statement of Work;

iv. Professional services (accountant, attorney, auditor), that directly benefit and support the objectives and requirements outlined in this Statement of Work;

v. Internet access, furniture, and travel for above-mentioned costs; RAC EMS COUNTY PASS THRU Program are allowable expenses under this Contract.

vi. RACs with established indirect cost rates should recover eligible indirect costs by utilizing an approved indirect cost rate.

8. Submit a Quarterly Support Form for both RAC Systems Development and RAC TRAUMA FUNDING. The Quarterly Support Form template is located under the "Regional Advisory Councils (RAC)" heading at the following URL: https://www.dshs.texas.gov/dshs-ems-trauma-systems/applications-forms#RAC. The Quarterly Support Form will capture monthly expenditures as well as programmatic and administrative costs. Income earned from funds directly associated with the EMS/CO-RAC Program (i.e., fees or co-pays for services performed, income from the sale of items or services, registration fees collected, etc.) should also be reported. Rebates, refunds, discounts, and adjustments/credits should be treated as applicable credits and should be tracked and applied within Grantee's financial system or General Ledger and not as program income. This is the same form that is identified under the EMS/RAC Funding Requirements at **SECTION (I)(B)(5)** of this **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**. Grantee will submit a single Quarterly Support Form for each state fiscal quarter.

9. Submit the RAC TRAUMA FUNDING & EMS/RAC Systems Development Narrative Report biannually. A template for the RAC TRAUMA FUNDING & EMS/RAC Systems Development Narrative Report is located under the "Regional Advisory Councils (RAC)" heading at the following URL: https://www.dshs.texas.gov/dshs-ems-trauma-systems/applications-forms#RAC. The RAC TRAUMA FUNDING & EMS/RAC Systems Development Narrative Report must describe how Grantee's funds were utilized to enhance and improve delivery of EMS and Trauma Patient Care, as outlined within this **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**. This is the same report that is identified under the EMS/RAC Trauma Funding Requirements at **SECTION (I)(B)(6)** of this **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**. Grantee will submit a single RAC TRAUMA FUNDING & EMS/RAC Systems Development Narrative Report on a biannual basis.

10. Schedule general membership meetings for RAC members and stakeholders. At the general membership meetings, Grantee will provide RAC members and stakeholders a financial report, which must include, but shall not be limited to, the following information: Contract funds expended, planned Contract expenditures, and the

remaining balance of funds available under the Contract. The general membership meeting(s) must be held once each state fiscal quarter during the Contract term. Note: These are the general membership meetings also identified at **SECTION (I)(B)(7)** of this **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**.

11. Submit the RAC Annual Report to DSHS, Office of EMS/Trauma Systems, by October 15, 2027. The RAC Annual Report will cover FY27 (September 1, 2026, through August 31, 2027). Submission requirements are detailed within the RAC Annual Report template. The form is located under the "Regional Advisory Councils (RAC)" heading at the following URL: https://www.dshs.texas.gov/dshs-ems-trauma-systems/applications-forms#RAC.
12. Grantee shall maintain as part of its accounting records and prepare to submit to DSHS, **upon request**, and within fourteen (14) calendar days, source documents to support expenditures identified in the Quarterly Support Forms.
13. Comply with the reporting requirements on the Deliverables Reporting Calendar (see **ATTACHMENT F-4, FY27 DELIVERABLES REPORTING CALENDAR**). The Deliverables Reporting Calendar includes due dates for all deliverables and the DSHS email address(es) where to submit each deliverable. Any changes to the Deliverables Reporting Calendar will be documented through a formal Contract amendment and will be provided to Grantee by the assigned DSHS Contract Representative.

II. GENERAL RESPONSIBILITIES

Grantee will:

A. Provide DSHS with current 24/7 contact information for the RAC Chair, Vice-Chair, Executive Director or comparable staff member, and executive board members within five (5) business days of any change to the roster.

B. Serve as a point of contact for disseminating communications from DSHS to all of Grantee's RAC members.

C. Ensure Grantee's RAC Chair, executive board member, or Executive Director attends all EMS/Trauma Systems Coordination RAC Chair meetings. The RAC Chair or an executive board member is required to attend mandatory meetings scheduled by DSHS. If the Grantee is unable to provide appropriate representation at the required meetings, a waiver request with justification for not meeting this contractual requirement must be submitted in writing to DSHS at least two (2) calendar days prior to the meeting for approval. Grantee's waiver requests will be reviewed by DSHS on a case-by-case basis. Approval or denial of the waiver request will be provided to Grantee by DSHS. If denied, Grantee must ensure appropriate RAC representative attends the mandatory meeting. Failure to comply with this requirement could result in additional Contract remedies. DSHS will work with Grantee to ensure compliance with this requirement.

D. Submit a list of all board members and executive officers, including each individual's term in office, if applicable.

E. Submit a Board Responsibilities Attestation Form signed by all **new** board members that have not previously signed and submitted a form. The form is located under the "Regional Advisory Councils (RAC)" heading at the following URL:

https://www.dshs.texas.gov/dshs-ems-trauma-systems/applications-forms#RAC. The form acknowledges the board member's personal accountability for Contract funds and affirms that they viewed the DSHS online training prior to signing. Members added after the signed Board Responsibilities Attestation Form is submitted must complete the online training and submit a completed attestation form within sixty (60) calendar days of assuming office.

F. On odd years, the Grantee must complete and submit the RAC Self-Assessment with Scoring Tool. The form is located under the "Regional Advisory Councils (RAC)" heading at the following URL: https://www.dshs.texas.gov/dshs-ems-trauma-systems/applications-forms#RAC.

G. On even years, the Grantee must submit a revised Trauma and Emergency Healthcare System Plan to DSHS. The form is located under the "Regional Advisory Councils (RAC)" heading at the following URL: https://www.dshs.texas.gov/dshs-ems-trauma-systems/applications-forms#RAC.

H. Respond to all surveys requested by DSHS in the specified time frame and, if applicable, on the template provided.

I. Initiate the purchase of all EMS/RAC and RAC Systems Development equipment and supplies defined as "Controlled Assets," pre-approved in writing by DSHS, on or before July 1, 2027. Failure to timely initiate the purchase of equipment and Controlled Assets may result in disallowed costs.

J. Maintain and submit annually the cumulative DSHS Contractor's Property Inventory Report (GC-11), which contains an inventory of equipment, supplies defined as "Controlled Assets," and real property. The report should be submitted no later than October 15 each State Fiscal Year to the following email addresses: FSOequip@dshs.texas.gov and CMUReg.svcs@dshs.texas.gov. This DSHS Contractor's Property Inventory Report (GC-11) must be submitted annually regardless of whether equipment and/or assets were purchased. "Controlled Assets" are defined as follows:

1. Firearms, regardless of the acquisition cost, and assets with an acquisition cost of $500.00 or more, but less than $10,000.00; and
2. Desktop and laptop computers (including notebooks, tablets, and similar devices), non-portable printers and copiers, emergency management equipment, communication devices and systems, medical and laboratory equipment, and media equipment. Controlled Assets are considered supplies.

K. Ensure that at the expiration or termination of this Contact for any reason, ownership of any remaining equipment and supplies purchased with funds under this Contract reverts to DSHS. Title may be transferred to any other party designated by DSHS. DSHS may, at its option and to the extent allowed by law, transfer the reversionary interest in such property to Grantee.

L. Assist in the collection and reporting of data to DSHS to prepare for and respond to a public health disaster, or other outbreak of communicable disease, in the manner prescribed by DSHS, consistent with Texas Health and Safety Code Sections 81.027, 81.0443, 81.0444 and 81.0445.

III. PERFORMANCE MEASURES

A. DSHS will monitor Grantee's evidence of the RAC performance criteria compliance and the requirements in this **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK,** and its compliance with the Contract's terms and conditions.

B. Grantee shall submit additional reports, as requested by DSHS.

C. DSHS will inform the Grantee, in writing, of any changes to applicable federal and state laws, rules, regulations, standards, or guidelines. If Grantee is unable to continue its performance due to a change under this section, then Grantee shall inform DSHS, in writing, within thirty (30) calendar days of receipt. DSHS may terminate the Contract immediately or within a reasonable period after receiving such notice from Grantee.

IV. FUNDING INFORMATION

A. Grantee must establish and maintain a separate cost center or General Ledger to capture costs incurred for carrying out the FY27 activities for each allocation within this Contract as provided below. Copies of monthly statements from the cost center or General Ledger must be available to submit to DSHS upon request and as needed to review invoices submitted to DSHS for payment.

1. For FY27, Grantee will receive a single lump sum payment in the amount of $320,557.00. Grantee's lump sum payment will be allocated in the following manner:
    a. RAC EMS COUNTY PASS THRU
        a. $92,558.00
    b. RAC TRAUMA FUNDING
        a. $31,978.00
    c. RAC SYSTEMS DEVELOPMENT
        a. $46,021.00
    d. EXCEPTIONAL ITEM (EI)
        a. $150,000.00 – Exceptional item ("EI") payment in accordance with the legislative appropriations awarded under House Bill 1 for FY 2026-27.

2. Grantee's lump sum payment will occur approximately thirty (30) calendar days after September 1, 2026, and in accordance with Chapter 2251 of the Texas Government Code, also known as the Texas Prompt Payment Act.
3. Grantee must return all unexpended funds to DSHS at end of the biennium (FY26-27).

V. INVOICE AND PAYMENT

A. Grantee will request payment using the State of Texas Purchase Voucher (Form B-13) which may be found at the following URL: https://www.dshs.texas.gov/contractor-forms. Grantee shall submit a completed Form B-13 to the Claims Processing Unit via email to the following email addresses: invoices@dshs.texas.gov; CMSInvoices@dshs.texas.gov; and CMUReg.svcs@dshs.texas.gov.

B. Grantee shall return any RAC Systems Development funds not expended to DSHS no later than thirty (30) calendar days after the end of each State Fiscal Year. Contact the DSHS Contract Representative for instructions.

C. Grantee shall not receive a total not-to-exceed amount greater than what is identified in **SECTION V, BUDGET**, of this Contract without the execution of a written amendment executed by both Parties.

ATTACHMENT B-3
FY27 EMS COUNTY PASS THRU AND ADDITIONAL FUNDING INFORMATION

1. RAC EMS COUNTY PASS-THRU

THE SEVEN FLAGS REGIONAL ADVISORY COUNCIL ON TRAUMA, TRAUMA SERVICE AREA (TSA)-T

Jim Hogg	$16,702.00
Webb	$60,788.00
Zapata	$15,068.00
TOTAL DOLLAR AMOUNT	**$92,558.00**

2. RAC TRAUMA FUNDING	**$31,978.00**
3. RAC SYSTEMS DEVELOPMENT	**$46,021.00**
4. EXCEPTIONAL ITEM (EI)	**$150,000.00**
FY 27 TOTAL PAYMENT	**$320,557.00**

HEALTH AND HUMAN SERVICES
Contract Number HHS001336600020

Attachment C-3 CONTRACT AFFIRMATIONS

For purposes of these Contract Affirmations, HHS includes both the Health and Human Services Commission (HHSC) and the Department of State Health Services (DSHS). System Agency refers to HHSC, DSHS, or both, that will be a party to this Contract. These Contract Affirmations apply to all Contractors and Grantees (referred to as "Contractor") regardless of their business form (e.g., individual, partnership, corporation).

By entering into this Contract, Contractor affirms, without exception, understands, and agrees to comply with the following items through the life of the Contract:

1. Contractor represents and warrants that these Contract Affirmations apply to Contractor and all of Contractor's principals, officers, directors, shareholders, partners, owners, agents, employees, subcontractors, independent contractors, and any other representatives who may provide services under, who have a financial interest in, or otherwise are interested in this Contract and any related Solicitation.

2. **Complete and Accurate Information**

   Contractor represents and warrants that all statements and information provided to HHS are current, complete, and accurate. This includes all statements and information in this Contract and any related Solicitation Response.

3. **Public Information Act**

   Contractor understands that HHS will comply with the Texas Public Information Act (Chapter 552 of the Texas Government Code) as interpreted by judicial rulings and opinions of the Attorney General of the State of Texas. Information, documentation, and other material prepared and submitted in connection with this Contract or any related Solicitation may be subject to public disclosure pursuant to the Texas Public Information Act. In accordance with Section 2252.907 of the Texas Government Code, Contractor is required to make any information created or exchanged with the State pursuant to the Contract, and not otherwise excepted from disclosure under the Texas Public Information Act, available in a format that is accessible by the public at no additional charge to the State.

4. **Contracting Information Requirements**

   Contractor represents and warrants that it will comply with the requirements of Section 552.372(a) of the Texas Government Code. Except as provided by Section 552.374(c) of the Texas Government Code, the requirements of Subchapter J (Additional Provisions Related to Contracting Information), Chapter 552 of the Government Code, may apply to the Contract and the Contractor agrees that the Contract can be terminated if the Contractor knowingly or intentionally fails to comply with a requirement of that subchapter.

5. Assignment

A. Contractor shall not assign its rights under the Contract or delegate the performance of its duties under the Contract without prior written approval from System Agency. Any attempted assignment in violation of this provision is void and without effect.

B. Contractor understands and agrees the System Agency may in one or more transactions assign, pledge, or transfer the Contract. Upon receipt of System Agency's notice of assignment, pledge, or transfer, Contractor shall cooperate with System Agency in giving effect to such assignment, pledge, or transfer, at no cost to System Agency or to the recipient entity.

6. Terms and Conditions

Contractor accepts the Solicitation terms and conditions unless specifically noted by exceptions advanced in the form and manner directed in the Solicitation, if any, under which this Contract was awarded. Contractor agrees that all exceptions to the Solicitation, as well as terms and conditions advanced by Contractor that differ in any manner from HHS' terms and conditions, if any, are rejected unless expressly accepted by System Agency in writing.

7. HHS Right to Use

Contractor agrees that HHS has the right to use, produce, and distribute copies of and to disclose to HHS employees, agents, and contractors and other governmental entities all or part of this Contract or any related Solicitation Response as HHS deems necessary to complete the procurement process or comply with state or federal laws.

8. Release from Liability

Contractor generally releases from liability and waives all claims against any party providing information about the Contractor at the request of System Agency.

9. Dealings with Public Servants

Contractor has not given, has not offered to give, and does not intend to give at any time hereafter any economic opportunity, future employment, gift, loan, gratuity, special discount, trip, favor, or service to a public servant in connection with this Contract or any related Solicitation, or related Solicitation Response.

10. Financial Participation Prohibited

Under Section 2155.004, Texas Government Code (relating to financial participation in preparing solicitations), Contractor certifies that the individual or business entity named in this Contract and any related Solicitation Response is not ineligible to receive this Contract and acknowledges that this Contract may be terminated and payment withheld if this certification is inaccurate.

11. Prior Disaster Relief Contract Violation

Under Sections 2155.006 and 2261.053 of the Texas Government Code (relating to convictions and penalties regarding Hurricane Rita, Hurricane Katrina, and other disasters), the Contractor certifies that the individual or business entity named in this Contract and any related Solicitation Response is not ineligible to receive this Contract

and acknowledges that this Contract may be terminated and payment withheld if this certification is inaccurate.

12. Child Support Obligation

Under Section 231.006(d) of the Texas Family Code regarding child support, Contractor certifies that the individual or business entity named in this Contract and any related Solicitation Response is not ineligible to receive the specified payment and acknowledges that the Contract may be terminated and payment may be withheld if this certification is inaccurate. If the certification is shown to be false, Contractor may be liable for additional costs and damages set out in 231.006(f).

13. Suspension and Debarment

Contractor certifies that it and its principals are not suspended or debarred from doing business with the state or federal government as listed on the *State of Texas Debarred Vendor List* maintained by the Texas Comptroller of Public Accounts and the *System for Award Management (SAM)* maintained by the General Services Administration. This certification is made pursuant to the regulations implementing Executive Order 12549 and Executive Order 12689, Debarment and Suspension, 2 C.F.R. Part 376, and any relevant regulations promulgated by the Department or Agency funding this project. This provision shall be included in its entirety in Contractor's subcontracts, if any, if payment in whole or in part is from federal funds.

14. Excluded Parties

Contractor certifies that it is not listed in the prohibited vendors list authorized by Executive Order 13224, *"Blocking Property and Prohibiting Transactions with Persons Who Commit, Threaten to Commit, or Support Terrorism,"* published by the United States Department of the Treasury, Office of Foreign Assets Control.'

15. Foreign Terrorist Organizations

Contractor represents and warrants that it is not engaged in business with Iran, Sudan, or a foreign terrorist organization, as prohibited by Section 2252.152 of the Texas Government Code.

16. Executive Head of a State Agency

In accordance with Section 669.003 of the Texas Government Code, relating to contracting with the executive head of a state agency, Contractor certifies that it is not (1) the executive head of an HHS agency, (2) a person who at any time during the four years before the date of this Contract was the executive head of an HHS agency, or (3) a person who employs a current or former executive head of an HHS agency.

17. Human Trafficking Prohibition

Under Section 2155.0061 of the Texas Government Code, Contractor certifies that the individual or business entity named in this Contract is not ineligible to receive this Contract and acknowledges that this Contract may be terminated and payment withheld if this certification is inaccurate.

18. Franchise Tax Status

Contractor represents and warrants that it is not currently delinquent in the payment of any franchise taxes owed the State of Texas under Chapter 171 of the Texas Tax Code.

19. Debts and Delinquencies

Contractor agrees that any payments due under this Contract shall be applied towards any debt or delinquency that is owed to the State of Texas.

20. Lobbying Prohibition

Contractor represents and warrants that payments to Contractor and Contractor's receipt of appropriated or other funds under this Contract or any related Solicitation are not prohibited by Sections 556.005, 556.0055, or 556.008 of the Texas Government Code (relating to use of appropriated money or state funds to employ or pay lobbyists, lobbying expenses, or influence legislation).

21. Buy Texas

Contractor agrees to comply with Section 2155.4441 of the Texas Government Code, requiring the purchase of products and materials produced in the State of Texas in performing service contracts.

22. Disaster Recovery Plan

Contractor agrees that upon request of System Agency, Contractor shall provide copies of its most recent business continuity and disaster recovery plans.

23. Computer Equipment Recycling Program

If this Contract is for the purchase or lease of computer equipment, then Contractor certifies that it is in compliance with Subchapter Y, Chapter 361 of the Texas Health and Safety Code related to the Computer Equipment Recycling Program and the Texas Commission on Environmental Quality rules in 30 TAC Chapter 328.

24. Television Equipment Recycling Program

If this Contract is for the purchase or lease of covered television equipment, then Contractor certifies that it is compliance with Subchapter Z, Chapter 361 of the Texas Health and Safety Code related to the Television Equipment Recycling Program.

25. Cybersecurity Training

A. Contractor represents and warrants that it will comply with the requirements of Section 2063.104 of the Texas Government Code relating to cybersecurity training and required verification of completion of the training program.

B. Contractor represents and warrants that if Contractor or Subcontractors, officers, or employees of Contractor have access to any state computer system or database, the Contractor, Subcontractors, officers, and employees of Contractor shall complete cybersecurity training pursuant to and in accordance with Government Code, Section 2063.104.

26. Restricted Employment for Certain State Personnel

Contractor acknowledges that, pursuant to Section 572.069 of the Texas Government Code, a former state officer or employee of a state agency who during the period of state service or employment participated on behalf of a state agency in a procurement or contract negotiation involving Contractor may not accept employment from Contractor before the second anniversary of the date the Contract is signed or the procurement is terminated or withdrawn.

27. No Conflicts of Interest

A. Contractor represents and warrants that it has no actual or potential conflicts of interest in providing the requested goods or services to System Agency under this Contract or any related Solicitation and that Contractor's provision of the requested goods and/or services under this Contract and any related Solicitation will not constitute an actual or potential conflict of interest or reasonably create an appearance of impropriety.

B. Contractor agrees that, if after execution of the Contract, Contractor discovers or is made aware of a Conflict of Interest, Contractor will immediately and fully disclose such interest in writing to System Agency. In addition, Contractor will promptly and fully disclose any relationship that might be perceived or represented as a conflict after its discovery by Contractor or by System Agency as a potential conflict. System Agency reserves the right to make a final determination regarding the existence of Conflicts of Interest, and Contractor agrees to abide by System Agency's decision.

28. Fraud, Waste, and Abuse

Contractor understands that HHS does not tolerate any type of fraud, waste, or abuse. Violations of law, agency policies, or standards of ethical conduct will be investigated, and appropriate actions will be taken. Pursuant to Texas Government Code, Section 321.022, if the administrative head of a department or entity that is subject to audit by the state auditor has reasonable cause to believe that money received from the state by the department or entity or by a client or contractor of the department or entity may have been lost, misappropriated, or misused, or that other fraudulent or unlawful conduct has occurred in relation to the operation of the department or entity, the administrative head shall report the reason and basis for the belief to the Texas State Auditor's Office (SAO). All employees or contractors who have reasonable cause to believe that fraud, waste, or abuse has occurred (including misconduct by any HHS employee, Grantee officer, agent, employee, or subcontractor that would constitute fraud, waste, or abuse) are required to immediately report the questioned activity to the Health and Human Services Commission's Office of Inspector General. Contractor agrees to comply with all applicable laws, rules, regulations, and System Agency policies regarding fraud, waste, and abuse including, but not limited to, HHS Circular C-027.

A report to the SAO must be made through one of the following avenues:

- SAO Toll Free Hotline: 1-800-TX-AUDIT
- SAO website: http://sao.fraud.state.tx.us/

All reports made to the OIG must be made through one of the following avenues:

- OIG Toll Free Hotline 1-800-436-6184
- OIG Website: ReportTexasFraud.com
- Internal Affairs Email: InternalAffairsReferral@hhsc.state.tx.us
- OIG Hotline Email: OIGFraudHotline@hhsc.state.tx.us.
- OIG Mailing Address: Office of Inspector General
  Attn: Fraud Hotline
  MC 1300
  P.O. Box 85200
  Austin, Texas 78708-5200

29. Antitrust

The undersigned affirms under penalty of perjury of the laws of the State of Texas that:

A. in connection with this Contract and any related Solicitation Response, neither I nor any representative of the Contractor has violated any provision of the Texas Free Enterprise and Antitrust Act, Tex. Bus. & Comm. Code Chapter 15;

B. in connection with this Contract and any related Solicitation Response, neither I nor any representative of the Contractor has violated any federal antitrust law; and

C. neither I nor any representative of the Contractor has directly or indirectly communicated any of the contents of this Contract and any related Solicitation Response to a competitor of the Contractor or any other company, corporation, firm, partnership or individual engaged in the same line of business as the Contractor.

30. Legal and Regulatory Actions

Contractor represents and warrants that it is not aware of and has received no notice of any court or governmental agency proceeding, investigation, or other action pending or threatened against Contractor or any of the individuals or entities included in numbered paragraph 1 of these Contract Affirmations within the five (5) calendar years immediately preceding execution of this Contract or the submission of any related Solicitation Response that would or could impair Contractor's performance under this Contract, relate to the contracted or similar goods or services, or otherwise be relevant to System Agency's consideration of entering into this Contract. If Contractor is unable to make the preceding representation and warranty, then Contractor instead represents and warrants that it has provided to System Agency a complete, detailed disclosure of any such court or governmental agency proceeding, investigation, or other action that would or could impair Contractor's performance under this Contract, relate to the contracted or similar goods or services, or otherwise be relevant to System Agency's consideration of entering into this Contract. In addition, Contractor acknowledges this is a continuing disclosure requirement. Contractor represents and warrants that Contractor shall notify System Agency in writing within five (5) business days of any changes to the representations or warranties in this clause and understands that failure to so timely update System Agency shall constitute breach of contract and may result in immediate contract termination.

31. No Felony Criminal Convictions

Contractor represents that neither Contractor nor any of its employees, agents, or representatives, including any subcontractors and employees, agents, or representative of such subcontractors, have been convicted of a felony criminal offense or that if such a conviction has occurred Contractor has fully advised System Agency in writing of the facts and circumstances surrounding the convictions.

32. Unfair Business Practices

Contractor represents and warrants that it has not been the subject of allegations of Deceptive Trade Practices violations under Chapter 17 of the Texas Business and Commerce Code, or allegations of any unfair business practice in any administrative hearing or court suit and that Contractor has not been found to be liable for such practices in such proceedings. Contractor certifies that it has no officers who have served as officers of other entities who have been the subject of allegations of Deceptive Trade Practices violations or allegations of any unfair business practices in an administrative hearing or court suit and that such officers have not been found to be liable for such practices in such proceedings.

33. Entities that Boycott Israel

Contractor represents and warrants that (1) it does not, and shall not for the duration of the Contract, boycott Israel or (2) the verification required by Section 2271.002 of the Texas Government Code does not apply to the Contract. If circumstances relevant to this provision change during the course of the Contract, Contractor shall promptly notify System Agency.

34. E-Verify

Contractor certifies that for contracts for services, Contractor shall utilize the U.S. Department of Homeland Security's E-Verify system during the term of this Contract to determine the eligibility of:

1. all persons employed by Contractor to perform duties within Texas; and
2. all persons, including subcontractors, assigned by Contractor to perform work pursuant to this Contract within the United States of America.

35. Former Agency Employees – Certain Contracts

If this Contract is an employment contract, a professional services contract under Chapter 2254 of the Texas Government Code, or a consulting services contract under Chapter 2254 of the Texas Government Code, in accordance with Section 2252.901 of the Texas Government Code, Contractor represents and warrants that neither Contractor nor any of Contractor's employees including, but not limited to, those authorized to provide services under the Contract, were former employees of an HHS Agency during the twelve (12) month period immediately prior to the date of the execution of the Contract.

36. Disclosure of Prior State Employment – Consulting Services

If this Contract is for consulting services,

A. In accordance with Section 2254.033 of the Texas Government Code, a Contractor providing consulting services who has been employed by, or employs an individual who has been employed by, System Agency or another State of Texas agency at any time during the two years preceding the submission of Contractor's offer to provide services must disclose the following information in its offer to provide services. Contractor hereby certifies that this information was provided and remains true, correct, and complete:

1. Name of individual(s) (Contractor or employee(s));
2. Status;
3. The nature of the previous employment with HHSC or the other State of Texas agency;
4. The date the employment was terminated and the reason for the termination; and
5. The annual rate of compensation for the employment at the time of its termination.

B. If no information was provided in response to Section A above, Contractor certifies that neither Contractor nor any individual employed by Contractor was employed by System Agency or any other State of Texas agency at any time during the two years preceding the submission of Contractor's offer to provide services.

37. Abortion Funding Limitation

Contractor understands, acknowledges, and agrees that, pursuant to Article IX of the General Appropriations Act (the Act), to the extent allowed by federal and state law, money appropriated by the Texas Legislature may not be distributed to any individual or entity that, during the period for which funds are appropriated under the Act:

1. performs an abortion procedure that is not reimbursable under the state's Medicaid program;
2. is commonly owned, managed, or controlled by an entity that performs an abortion procedure that is not reimbursable under the state's Medicaid program; or
3. is a franchise or affiliate of an entity that performs an abortion procedure that is not reimbursable under the state's Medicaid program.

The provision does not apply to a hospital licensed under Chapter 241, Health and Safety Code, or an office exempt under Section 245.004(a)(2), Health and Safety Code. Contractor represents and warrants that it is not ineligible, nor will it be ineligible during the term of this Contract, to receive appropriated funding pursuant to Article IX.

38. Funding Eligibility

Contractor understands, acknowledges, and agrees that, pursuant to Chapter 2273 of the Texas Government Code, except as exempted under that Chapter, HHSC cannot (1) contract with (a) an abortion provider or an affiliate of an abortion provider; or (b) an abortion assistance entity for the purpose of providing an abortion or abortion assistance;

or (2) contract or appropriate or spend money to provide any person logistical support for the express purpose of assisting a woman with procuring an abortion or the services of an abortion provider. Respondent certifies that it is not ineligible to contract with System Agency under the terms of Chapter 2273 of the Texas Government Code and certifies that the contract is not a taxpayer resource transaction, appropriation, or expenditure of money prohibited by Chapter 2273 of the Texas Government Code.

39. **Gender Transitioning and Gender Reassignment Procedures and Treatments for Certain Children – Prohibited Use of Public Money; Prohibited State Health Plan Reimbursement.**

Contractor understands, acknowledges, and agrees that, pursuant to Section 161.704 of the Texas Health and Safety Code (eff. Sept. 1, 2023), public money may not directly or indirectly be used, granted, paid, or distributed to any health care provider, medical school, hospital, physician, or any other entity, organization, or individual that provides or facilitates the provision of a procedure or treatment to a child that is prohibited under Section 161.702 of the Texas Health and Safety Code. Contractor also understands, acknowledges, and agrees that, pursuant to Section 161.705 of the Texas Health and Safety Code (eff. Sept. 1, 2023), HHSC may not provide Medicaid reimbursement and the child health plan program established under Chapter 62 may not provide reimbursement to a physician or health care provider for provision of a procedure or treatment to a child that is prohibited under Section 161.702 of the Texas Health and Safety Code. Contractor certifies that it is not ineligible to contract with System Agency under the terms of Chapter 161, Subchapter Y, of the Texas Health and Safety Code.

40. **Prohibition on Certain Telecommunications and Video Surveillance Services or Equipment (2 CFR 200.216)**

Contractor certifies that the individual or business entity named in this Response or Contract is not ineligible to receive the specified Contract or funding pursuant to 2 CFR 200.216.

41. **COVID-19 Vaccine Passports**

Pursuant to Texas Health and Safety Code, Section 161.0085(c), Contractor certifies that it does not require its customers to provide any documentation certifying the customer's COVID-19 vaccination or post-transmission recovery on entry to, to gain access to, or to receive service from the Contractor's business. Contractor acknowledges that such a vaccine or recovery requirement would make Contractor ineligible for a state-funded contract.

42. **Entities that Boycott Energy Companies**

Pursuant to Section 2276.002 of the Texas Government Code (relating to prohibition on contracts with companies boycotting certain energy companies), Contractor represents and warrants that: (1) it does not, and will not for the duration of the Contract, boycott energy companies or (2) the verification required by Section 2276.002 of the Texas Government Code does not apply to the Contract. If circumstances relevant to this

provision change during the course of the Contract, Contractor shall promptly notify System Agency.

43. Entities that Discriminate Against Firearm and Ammunition Industries

In accordance with Senate Bill 19, Acts 2021, 87th Leg., R.S., pursuant to Section 2274.002 of the Texas Government Code (relating to prohibition on contracts with companies that discriminate against firearm and ammunition industries), Contractor verifies that: (1) it does not, and will not for the duration of the Contract, have a practice, policy, guidance, or directive that discriminates against a firearm entity or firearm trade association or (2) the verification required by Section 2274.002 of the Texas Government Code does not apply to the Contract. If circumstances relevant to this provision change during the course of the Contract, Contractor shall promptly notify System Agency.

44. Security Controls for State Agency Data

In accordance with Senate Bill 475, Acts 2021, 87th Leg., R.S., pursuant to Texas Government Code, Section 2054.138, Contractor understands, acknowledges, and agrees that if, pursuant to this Contract, Contractor is or will be authorized to access, transmit, use, or store data for System Agency, Contractor is required to meet the security controls the System Agency determines are proportionate with System Agency's risk under the Contract based on the sensitivity of System Agency's data and that Contractor must periodically provide to System Agency evidence that Contractor meets the security controls required under the Contract.

45. Cloud Computing State Risk and Authorization Management Program (TX-RAMP)

Pursuant to Texas Government Code, Section 2063.408, Contractor acknowledges and agrees that, if providing cloud computing services for System Agency, Contractor must comply with the requirements of the state risk and authorization management program and that System Agency may not enter or renew a contract with Contractor to purchase cloud computing services for the agency that are subject to the state risk and authorization management program unless Contractor demonstrates compliance with program requirements. If providing cloud computing services for System Agency that are subject to the state risk and authorization management program, Contractor certifies it will maintain program compliance and certification throughout the term of the Contract.

46. Contract for Professional Services of Physicians, Optometrists, and Registered Nurses

In accordance with Senate Bill 799, Acts 2021, 87th Leg., R.S., if Texas Government Code, Section 2254.008(a)(2) is applicable to this Contract, Contractor affirms that it possesses the necessary occupational licenses and experience.

47. Foreign-Owned Companies in Connection with Critical Infrastructure

If Texas Government Code, Section 2275.0102(a)(1) (relating to prohibition on contracts with certain foreign-owned companies in connection with critical infrastructure) is applicable to this Contract, pursuant to Government Code Section 2275.0102, Contractor certifies that neither it nor its parent company, nor any affiliate of Contractor or its parent company, is: (1) majority owned or controlled by citizens or governmental entities of

China, Iran, North Korea, Russia, or any other country designated by the Governor under Government Code Section 2275.0103 or (2) headquartered in any of those countries.

48. Critical Infrastructure Subcontracts

For purposes of this Paragraph, the designated countries are China, Iran, North Korea, Russia, and any countries lawfully designated by the Governor as a threat to critical infrastructure. Pursuant to Section 117.002 of the Business and Commerce Code, Contractor shall not enter into a subcontract that will provide direct or remote access to or control of critical infrastructure, as defined by Section 117.001 of the Texas Business and Commerce Code, in this state, other than access specifically allowed for product warranty and support purposes to any subcontractor unless (i) neither the subcontractor nor its parent company, nor any affiliate of the subcontractor or its parent company, is majority owned or controlled by citizens or governmental entities of a designated country; and (ii) neither the subcontractor nor its parent company, nor any affiliate of the subcontractor or its parent company, is headquartered in a designated country. Contractor will notify the System Agency before entering into any subcontract that will provide direct or remote access to or control of critical infrastructure, as defined by Section 117.001 of the Texas Business & Commerce Code, in this state.

49. Enforcement of Certain Federal Firearms Laws Prohibited

In accordance with House Bill 957, Acts 2021, 87th Leg., R.S., if Texas Government Code, Section 2.101 is applicable to Contractor, Contractor certifies that it is not ineligible to receive state grant funds pursuant to Texas Government Code, Section 2.103.

50. Prohibition on Abortions

Contractor understands, acknowledges, and agrees that, pursuant to Article II of the General Appropriations Act, (1) no funds shall be used to pay the direct or indirect costs (including marketing, overhead, rent, phones, and utilities) of abortion procedures provided by contractors of HHSC; and (2) no funds appropriated for Medicaid Family Planning, Healthy Texas Women Program, or the Family Planning Program shall be distributed to individuals or entities that perform elective abortion procedures or that contract with or provide funds to individuals or entities for the performance of elective abortion procedures. Contractor represents and warrants that it is not ineligible, nor will it be ineligible during the term of this Contract, to receive appropriated funding pursuant to Article II.

51. Hardening of State Government

Pursuant to Executive Order GA-48, relating to hardening of state government, issued November 19, 2024, Contractor certifies it is not and, if applicable, any of its holding companies or subsidiaries is not:

a. Listed in Section 889 of the 2019 National Defense Authorization Act (NDAA); or

b. Listed in Section 1260H of the 2021 NDAA; or

c. Owned by the government of a country on the U.S. Department of Commerce's foreign adversaries list under 15 C.F.R. § 791.4; or

d. Controlled by any governing or regulatory body located in a country on the U.S. Department of Commerce's foreign adversaries list under 15 C.F.R. § 791.4.

52. Artificial Intelligence Disclosure.

Contractor certifies that it has a continuing obligation to disclose in writing to System Agency each artificial intelligence system it may use to complete any deliverable or a portion of any deliverable under the Contract. "Artificial intelligence system" means a machine-based system that for explicit or implicit objectives infers from provided information a method to generate outputs, such as predictions, content, recommendations, or decisions, to influence a physical or virtual environment with varying levels of autonomy and adaptiveness after deployment. Contractor certifies that it is in compliance with all applicable laws and regulations regarding the use of artificial intelligence systems.

53. Surveillance, Intimidation, and Related Acts.

Contractor certifies that it (and its subcontractors) have not, and if awarded a contract, will not, either directly or indirectly through a third party, engage in surveillance targeting or engage in an act of intimidation, coercion, extortion, undue influence, or other similar conduct intended to influence, silence, or retaliate against:

(1) a member of the state legislature or person employed to support the state legislature in any capacity;

(2) a family member of a person described by (1);

(3) a state agency employee; or

(4) an individual making a complaint or raising concerns regarding state agency operations or contracting.

Contractor certifies that it and its subcontractors have not, and if awarded a contract will not, either directly or indirectly through a third party, use private or confidential information to manipulate or influence a state contracting decision or proceeding. Contractor acknowledges that it, its executives and directors, and other associated entities and individuals could be terminated, barred from state contracts, and penalized up to $2 million for a violation of Government Code, Section 2261.302.

54. False Representation

Contractor understands, acknowledges, and agrees that any false representation or any failure to comply with a representation, warranty, or certification made by Contractor is subject to all civil and criminal consequences provided at law or in equity including, but not limited to, immediate termination of this Contract.

55. False Statements

Contractor represents and warrants that all statements and information prepared and submitted by Contractor in this Contract and any related Solicitation Response are current, complete, true, and accurate. Contractor acknowledges any false statement or material misrepresentation made by Contractor during the performance of this Contract or any related Solicitation is a material breach of contract and may void this Contract. Further, Contractor understands, acknowledges, and agrees that any false representation or any failure to comply with a representation, warranty, or certification made by Contractor is subject to all civil and criminal consequences provided at law or in equity including, but not limited to, immediate termination of this Contract.

56. Permits and License

Contractor represents and warrants that it will comply with all applicable laws and maintain all permits and licenses required by applicable city, county, state, and federal rules, regulations, statutes, codes, and other laws that pertain to this Contract.

57. Equal Employment Opportunity

Contractor represents and warrants its compliance with all applicable duly enacted state and federal laws governing equal employment opportunities.

58. Federal Occupational Safety and Health Law

Contractor represents and warrants that all articles and services shall meet or exceed the safety standards established and promulgated under the Federal Occupational Safety and Health Act of 1970, as amended (29 U.S.C. Chapter 15).

59. Signature Authority

Contractor represents and warrants that the individual signing this Contract Affirmations document is authorized to sign on behalf of Contractor and to bind the Contractor.

Signature Page Follows

Authorized representative on behalf of Contractor must complete and sign the following:

Seven Flags Regional Advisory Council

Legal Name of Contractor

Seven Flags Regional Advisory Council

Assumed Business Name of Contractor, if applicable (d/b/a or 'doing business as')

NA

Texas County(s) for Assumed Business Name (d/b/a or 'doing business as')
Attach Assumed Name Certificate(s) filed with the Texas Secretary of State and Assumed Name Certificate(s), if any, for each Texas County Where Assumed Name Certificate(s) has been filed.

Signed by:
233BF41BF02E4DA...

Signature of Authorized Representative

June 18, 2026

Date Signed

Jorge Delgado

Printed Name of Authorized Representative First, Middle Name or Initial, and Last Name

Chairman

Title of Authorized Representative

1216 Santa Maria Ave.

Physical Street Address

Laredo, TX 78040

City, State, Zip Code

PO Box 450094

Mailing Address, if different

Laredo, TX 78045

City, State, Zip Code

956 722 3995

Phone Number

956 575 0065

Fax Number

admin@SevenFlagsRAC.org

Email Address

17429154937

DUNS Number

74-2915493

Federal Employer Identification Number

17429154937

Texas Identification Number (TIN)

TTY: 7-1-1 DOC: 154325300000

Texas Franchise Tax Number

Texas Secretary of State Filing Number

DLCQJ4V4PSP4

SAM.gov Unique Entity Identifier (UEI)

ATTACHMENT F-4
FY27 DELIVERABLES REPORTING CALENDAR

Grantee shall submit reports for Fiscal Year 2027 as identified in the table below, and as outlined in **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**, by the due dates and submission methods specified therein. DSHS may add contractual requirements and revise reporting due dates throughout the term of this Grant Agreement as necessary.

REPORT	FREQUENCY	FY 2027 DUE DATE(S)	DSHS EMAIL OR SYSTEM TO SUBMIT REPORT
B-13 for EMS/CO, EMS/RAC, and RAC Systems Development Lump Sum Payment(s) - Annually (See **SECTION V, INVOICE AND PAYMENT**, of **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**)	Once per State Fiscal Year	September 1, 2026	invoices@dshs.texas.gov; CMSinvoices@dshs.texas.gov; and CMUReg.svcs@dshs.texas.gov
EMS/COUNTY Eligibility List – Annually (See **SECTION I(A)(8)** of **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**)	Once per State Fiscal Year	The due date for completing this review must not extend beyond November 30th of every State Fiscal Year.	CMUReg.svcs@dshs.texas.gov
Quarterly Support Form – Quarterly (See **SECTION I(B)(5)** and **SECTION I(C)(8)** of **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**)	The last business day of the month following the end of the first, second, and third state fiscal quarters AND forty-five (45) calendar days following the end of the fourth state fiscal quarter.	December 31, 2026 March 31, 2027 June 30, 2027 October 15, 2027	CMUReg.svcs@dshs.texas.gov
Board Responsibilities Attestation Form (New Board Members only) - Annually (See **SECTION II(E)** of **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**)	Once per State Fiscal Year	February 26, 2027	CMUReg.svcs@dshs.texas.gov
EMS/RAC & EMS/RAC Systems Development Narrative Report - Biannually (See **SECTION I(B)(6)** and **SECTION I(C)(9)** of **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**)	The last business day of the month following the end of the second state fiscal quarter AND forty-five (45) calendar days following the end of the fourth state fiscal quarter.	March 31, 2027 October 15, 2027	CMUReg.svcs@dshs.texas.gov
RAC Self-Assessment with Scoring Tool (Self-Assessment will include Trauma and Emergency Healthcare System) (See **SECTION II(F)** of **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**)	On odd years, Grantee will submit the completed RAC Self-Assessment with Scoring Tool to DSHS.	August 31, 2027	CMUReg.svcs@dshs.texas.gov

Trauma and Emergency Healthcare System Plan (Based on the RAC Self-Assessment with Scoring) (See **SECTION II(G)** of **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**)	On even years, Grantee will submit a revised Trauma and Emergency Healthcare System Plan to DSHS.	N/A for State Fiscal Year 2027	CMUReg.svcs@dshs.texas.gov
EMS Provider Expenditure Report - Annually (See **SECTION I(A)(6)** of **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**)	Once per State Fiscal Year	October 15, 2027	CMUReg.svcs@dshs.texas.gov
EMS Provider Distribution Report - Annually (See **SECTION I(A)(7)** of **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**)	Once per State Fiscal Year	October 15, 2027	CMUReg.svcs@dshs.texas.gov
DSHS Contractor's Property Inventory Report (GC-11) - Annually (See **SECTION II(J)** of **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**)	Once per State Fiscal Year	October 15, 2027	FSOequip@dshs.texas.gov; and CMUReg.svcs@dshs.texas.gov
RAC Annual Report (RAC Systems Development) - Annually (See **SECTION I(C)(11)** of **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**)	Once per State Fiscal Year	October 15, 2027	CMUReg.svcs@dshs.texas.gov

All programmatic report templates are located at: https://www.dshs.texas.gov/dshs-ems-trauma-systems/applications-forms#RAC

docusign

Certificate Of Completion

Envelope Id: 457A0C2F-0C5A-8217-8065-D49E83C8F402
Status: Completed
Subject: Please DocuSign: HHS001336600020; THE SEVEN FLAGS REGIONAL ADVISORY COUNCIL; Amendment No. 5
Source Envelope:
Document Pages: 34
Signatures: 3
Certificate Pages: 2
Initials: 0
AutoNav: Enabled
EnvelopeId Stamping: Enabled
Time Zone: (UTC-06:00) Central Time (US & Canada)

Envelope Originator:
CMS Internal Routing Mailbox
11493 Sunset Hills Road
#100
Reston, VA 20190
CMS.InternalRouting@dshs.texas.gov
IP Address: 167.137.1.18

Record Tracking

Status: Original
5/29/2026 7:35:00 AM
Holder: CMS Internal Routing Mailbox
CMS.InternalRouting@dshs.texas.gov
Location: DocuSign

Signer Events	Signature	Timestamp
Jorge Delgado admin@priorityemstx.com Chairman Security Level: Email, Account Authentication (None)	Signed by:  233BF41BF02E4DA... Signature Adoption: Drawn on Device Using IP Address: 71.42.125.42	Sent: 5/29/2026 7:37:21 AM Viewed: 5/30/2026 7:05:27 AM Signed: 6/18/2026 4:15:51 PM
Electronic Record and Signature Disclosure: Not Offered via Docusign		
Helen Whittington helen.whittington@dshs.texas.gov Contract Specialist Security Level: Email, Account Authentication (None)	**Completed** Using IP Address: 167.137.1.16	Sent: 6/18/2026 4:15:54 PM Viewed: 6/18/2026 4:17:51 PM Signed: 6/18/2026 4:21:49 PM
Electronic Record and Signature Disclosure: Not Offered via Docusign		
PATTY MELCHIOR Patty.Melchior@dshs.texas.gov Patricia Melchior, Director, DSHS CMS Security Level: Email, Account Authentication (None)	**Completed** Using IP Address: 167.137.1.16	Sent: 6/18/2026 4:21:51 PM Viewed: 6/19/2026 9:40:34 AM Signed: 6/19/2026 9:40:46 AM
Electronic Record and Signature Disclosure: Not Offered via Docusign		
Christy Havel Burton christy.havelburton@dshs.texas.gov Chief Financial Officer DSHS Security Level: Email, Account Authentication (None)	Signed by:  3A9AA1FD9B20448... Signature Adoption: Pre-selected Style Using IP Address: 136.226.12.205	Sent: 6/19/2026 9:40:48 AM Viewed: 6/19/2026 1:47:58 PM Signed: 6/19/2026 1:49:32 PM
Electronic Record and Signature Disclosure: Not Offered via Docusign		

In Person Signer Events	Signature	Timestamp

Editor Delivery Events	Status	Timestamp

Agent Delivery Events	Status	Timestamp

Intermediary Delivery Events	Status	Timestamp

Certified Delivery Events	Status	Timestamp

Carbon Copy Events	Status	Timestamp
Adrian Esparza aresparza@ci.laredo.tx.us Security Level: Email, Account Authentication (None) **Electronic Record and Signature Disclosure:** Not Offered via Docusign	COPIED	Sent: 5/29/2026 7:37:21 AM Viewed: 5/30/2026 5:15:32 PM
John Keiser jrkeiser@stdc.cog.tx.us Security Level: Email, Account Authentication (None) **Electronic Record and Signature Disclosure:** Not Offered via Docusign	COPIED	Sent: 6/3/2026 2:19:25 PM Viewed: 6/3/2026 3:01:08 PM
CMS Internal Routing Mailbox CMS.InternalRouting@dshs.texas.gov DSHS Contract Management Section Security Level: Email, Account Authentication (None) **Electronic Record and Signature Disclosure:** Not Offered via Docusign	COPIED	Sent: 6/19/2026 1:49:34 PM
Kimberly Royal kimberly.royal@dshs.texas.gov Security Level: Email, Account Authentication (None) **Electronic Record and Signature Disclosure:** Not Offered via Docusign	COPIED	Sent: 6/19/2026 1:49:35 PM

Witness Events	Signature	Timestamp

Notary Events	Signature	Timestamp

Envelope Summary Events	Status	Timestamps
Envelope Sent	Hashed/Encrypted	5/29/2026 7:37:22 AM
Envelope Updated	Security Checked	6/3/2026 2:19:24 PM
Certified Delivered	Security Checked	6/19/2026 1:47:58 PM
Signing Complete	Security Checked	6/19/2026 1:49:32 PM
Completed	Security Checked	6/19/2026 1:49:35 PM

Payment Events	Status	Timestamps

ITEM 26-53 (TAB 9)

ADMINISTRATIVE/MANAGERIAL SERVICE AGREEMENT

BETWEEN SEVEN FLAGS REGIONAL ADVISORY

COUNCIL (SFRAC) AND

SOUTH TEXAS DEVELOPMENT COUNCIL (STDC)

This agreement ("Agreement") is entered into by the Seven Flags Regional Advisory Council, TSA " T" ("SFRAC") and the South Texas Development Council ("STDC") located at 1002 Dicky Lane, Laredo, TX 78043, together referred to as the "Parties".

WHEREAS, the Parties agree to execute this Agreement with the South Texas Development Council to carry out the tasks defined in the Scope of Work (SOW) being services and technical support as deemed necessary; and

WHEREAS, the Attachments to this Agreement referred to and included herein as Attachment-I: (Attachment A-5, FY27 Fifth Revised Statement of Work of DSHS Contract No. HHS001336600020, Amendment No. 5., between the Texas Department of State Health Services [DSHS] and the Seven Flags Regional Advisory Council [SFRAC]), constitute an integral part to this Agreement, the attached Attachment-I hereto is expressly incorporated herein and made a part of this Agreement, and all references to this Agreement shall include Attachment-I. In the eventof any inconsistency between this Agreement and Attachment-I, this Agreement shall govern, provided that adhering to such provisions will not stand to misconstrue or diminish the integrity and sovereignty of Attachment A-5 as it relates and pertains to the original Contract between the Texas Department of State Health Services (DSHS) and the SFRAC, solely and in its entirety.

NOW THEREFORE, IN CONSIDERATION of the mutual agreements and covenants contained herein, it is agreed as follows:

1. **Establishment of Agreement.** The recitals herein above are true and correct and incorporated herein, and there is hereby established the Seven Flags Administrator, for the purpose as described below and subject to the terms and conditions herein.

2. **Purpose.** The purpose of this Agreement is to provide Grant Management and Administration Services for the Seven Flags Regional Advisory Council in fulfilling the delineated needs of the organization during fiscal year 2027.

3. **Scope of Work (SOW).** Except as limit ed by federal, state, and local laws, regulations, codes, or ordinances of the STDC, and as incorporated into this Agreement by reference herein as Attachment-I, STDC shall perform the following functions herein consider ed as Scope of Work (SOW) activities accepted and approved by both parties within this Agreement to be performed by STDC for compensation by SFRAC:

As Stipulated Under Provisions of Attachment-I and Incorporated by Reference:

Refer to Attachment-I.

As Directed by the Seven Flags Regional Advisory Council Board of Directors:

- Prepare letters, emails, memos, copies, invoices, receipts, etc., and process requests by DSHS, RAC Membership and other partners and/or regulatory agencies via email, mail or in person.
- Prepare and maintain check register and expenditures for SFRAC funding sources.
- Prepare and complete bank deposits.
- Assist with the coordination of meeting space and email notification of various meetings.
- Maintain all files for SFRAC pertaining to grant compliance and grant requirements.
- Develop annual program goals and budget preparations, monitoring and reporting in collaboration with the Executive Board.
- Review and process payments for grant disbursement and reimbursement to eligible RAC member entities.
- Calculate payables and submit to RAC chair and treasurer for timely deposits or distribution.
- Act as liaison with DSHS financial auditors and for appropriate fiscal review (as directed, needed, or required).
- Act as liaison with independent Certified Public Accountant for submittal of annual tax return (as directed, needed, or required).
- Assist the SFRAC Secretary with transcribing meeting minutes related to SFRAC business, committees, and Board meetings.
- Maintain files for Trauma Service Area plan and committees.
- Assist with annual coordination of By-Law review and updates.
- Act as the purchasing agent for SFRAC as directed and authorized by the Executive Board.
- Responsible for reviewing and approving purchases for eligible RAC entities requesting SFRAC to purchase grant medical equipment/ supplies on their behalf.
- Coordinate annual review components and file reports with DSHS.
- Ensure compliance with DSHS, IRS, Texas Secretary of State, Webb County Appraisal District and other regulatory agencies.
- Maintain an asset inventory system for SFRAC assets, as applicable.
- Facilitate communication with local, regional, and state programs and partners related to preparedness, as needed.
- Maintain current knowledge of emergency management via literature review and/or conferences and make information available to the appropriate RAC members.

Meetings Expected to Attend:

- RAC T Board Meetings
- RAC T Committee Meetings
- DSHS called and/or scheduled meetings statewide, as needed
- GETAC Quarterly meetings as needed and/or as the budget allows
- GDEM preparedness meetings when appropriate
- EMTF Meetings as needed and/ or as the budget allows TETAF Meetings as needed and/or as the budget allows
- Public and/or Health Care partner meetings when appropriate
- Other meetings/workshops where SFRAC presence is required (as needed and/ or as the budget allows)
- Coordinate the implementation of the RAC Self-Assessment Program as required under DSHS rule (TAC 157.123).

4. **Term.** The term of this Agreement shall be for a twelve (12) month period beginning on the effective date of September 1, 2026, and shall terminate on August 31, 2027.

5. **Termination.** This Agreement may be terminated by either party hereto, for its convenience,on sixty (60) days written notice from the terminating party to the non-terminating party.

6. **Compensation.** SFRAC shall pay STDC a total of $31,978 for a period of twelve (12) months as compensation for the services to be performed and reimburse for travel expenses incurred for activities approved by SFRAC in the performance of such services under this Agreement on a quarterly basis with payment to be made at the end of the first quarter after the effective date and each subsequent quarter thereafter. In the event of a change in the scope of services, additional complexity, or a different character of work from that originally anticipated and authorized by SFRAC, the amount may be renegotiated by agreement of both Parties.

7. **Travel.** For the purpose of this Agreement, SFRAC agrees to reimburse STDC for travel including mileage, meals, and lodging associated with the performance of services outlined in this Agreement' s SOW. Travel costs shall be in accordance with State of Texas approved rates and shall be accounted for and submitted for reimbursement or payment on travel forms approved by SFRAC. Costs associated with air travel shall be considered an allowable expense whenever travel time and cost to a particular location using ground travel exceeds the time and cost, and therefore, the practicality and benefits of faster and in the long run less costly air travel. Such air travel, however, should be limited to coach fares. First class travel rates are not considered an allowable le expense, and therefore, will not be reimbursed under this Agreement.

   Travel-related costs shall conform to the following rate schedules:

   Mileage paid for use of a personal vehicle for out-of-town trips related to the completion of tasks associated with this Agreement shall not exceed the most current approved state rate per mile, or that which is deemed approved by the State of Texas at the time of travel. Use

of a City or Company vehicle for local or out of town trips shall not qualify as a reimbursable mileage expense. Cost in the use of a rental vehicle by a Board member for out-of-town trips shall be reimbursed based on the lowest standard rates available and actual gasoline cost based on receipt submittal. Cost in the use of a rental vehicle by the SFRAC Administrator for out-of-town trips shall be incurred and paid by STDC under its Enterprise Corporate Account based on the lowest standard rates available, and actual gasoline cost based on receipt submittal to be paid by the SFRAC on a reimbursable basis.

Lodging per night and meals per day including breakfast, lunch, and dinner (i.e., per diem) shall not exceed the current approved Texas State Rat e for government employees as listed in the U.S. General Services Administration (i.e., GSA) for respective cities travel destinations.

8. **General Provisions.** This Agreement contains all the Agreement s of the parties with respect to any matter covered or mention ed in this Agreement, and no prior Agreement shall be effective for any purpose. No provisions of the Agreement may be amended or modified except by written Agreement signed by the Parties.

9. **Limitation of Liability.** In no event shall the parti es to this Agreement be liable to the other party for any special, consequential, incidental, or punitive damages on any claim arising outof or concerning this Agreement.

10. **Indemnity.** To the extent permitted by the laws and Constitution of the State of Texas, SFRAC shall indemnify and hold harmless STDC and STDC' s officers, agents, employees, and assignees from all suits, actions, costs during Administrator conducting and executing deliverables under this agreement covenant to faithful performance of duty, or other claims brought forth or on account of injury to a person or property arising under performance of this agreement.

11. **Force Majeure.** Neither party shall be liable for any default or delay in the performance of its obligations under this Agreement if, while and to the extent such default or delay is caused by acts of God, unusual weather conditions, fire, riots, sabot age, acts of domestic or foreign terrorism, or any other cause beyond the reasonable control of such Part y ("Force Majeure"). Force Majeure does not include economic or market conditions, which affect a party' s cost, but not its ability to perform. The party invoking Force Majeure shall give prompt, timely and adequate notice to the other party in writing and shall use due diligence to remedy the event of ForceMajeure, as soon as reasonably possible. In the event of default or delay in Agreement performance due to any of the foregoing causes, then the time for completion of the services will be extended by a mutually agreeable period reason ably necessary to overcome the effect of such failure to perform.

12. **Independent Contractor**. This Agreement shall not be construed as creating an employer/ employee relationship, partnership, joint enterprise, or a joint venture between the parties. SFRAC and STDC are independent contractors.

13. **Survival of Obligations**. All provisions of this Agreement that impose continuing obligations on the parties, including but not limited to indemnity, confidentiality, and release shall survive the expiration or termination of this Agreement.

14. **Designation of Administrator.** STDC designates John R. Keiser as Administrator or his successor and is the designated point of contact for S T D C. STDC has within its sole discretion the right to designate or re-designate the Administrator at any time it so deems appropriate.

15. **Severability.** Each paragraph and provision hereof are severable from the entire Agreement and if any pro vision is declared invalid, the remaining provisions shall nevertheless remain in effect.

16. **Prohibition against Assignment.** There shall be no assignment or transfer within the contractual term of this Agreement without the prior written consent of both parties hereto.

17. **Law of Texas.** This Agreement shall be governed by and construed in accordance with the laws of the State of Texas and shall be enforced in Webb County, Texas.

18. **Notices.** All notices called for or contemplated hereunder shall be in writing and shall be deemed to have been duly given when personally delivered or forty-eight (48) hours after mailed to each party by certified mail, return receipt requested, or post age prepaid.

To STDC: John R. Keiser, SFRAC Administrator
South Texas Development Council (STDC)
1216 Santa Maria Ave.
Laredo, Texas, 78040
P.O. Box 450094
Laredo, Texas 78045

To SFRAC: Jose Gonzalez, Jr. SFRAC Chairman
C/O: Seven Flags Regional Advisory Council
6419 McPherson Rd., Suite D.
Laredo, Texas, 78045

19. **Entire Agreement.** This Agreement incorporates all the agreements, covenants, and understandings between the parties hereto concerning the subject matter hereof, and all such covenants, agreements, and understandings have been merged into this written Agreement. No other prior agreement or understandings, verbal or otherwise, of the parties or their agents shall be valid or enforceable unless signed by both parties and attached hereto and/or embodied herein.

20. **Amendment.** Any amendments to this agreement shall be in writing and in signed agreement by both parties.

21. **Confidentiality.** Any confidential information provided to or developed by the Parties in the performance of this Agreement shall be kept confidential, unless otherwise provided by law, and shall not be made available to any individual or organization without the prior written approval of the Parties.

22. **Relinquishment.**
Upon the termination of this Agreement for any reason, or at any time upon the reasonable request of the SFRAC, the STDC shall immediately relinquish and return to the SFRAC all property, equipment, assets, and documents belonging to the SFRAC then in the STDC's possession, custody, or control.

23. **Terminology and Definitions.** All personal pronouns used herein, whether used in the masculine, feminine, or neutral, shall include all other genders; the singular shall include the plural, and the plural shall include the singular.

24. **Legal Compliance.** The parties hereto agree to comply fully with all applicable federal, state, and local statutes, ordinances, rules, and regulations in connection with the programs contemplated under this agreement. If any of the parties hereto are required by law or regulation to perform any act inconsistent with this agreement, or to cease performing any act required by this agreement, this agreement shall be deemed to have been modified to conform to the requirements of such law, regulation, or rule.

25. **Debarment.** As required by Executive Order 12549, Debarment and Suspension, and Implementation at 28C.F.R. Part 67, for prospective participants in primary covered transactions, as defined at 28 C.F.R. Part 67, Section 67.510 (Federal Certification), the Entity certifies that it and its principals and vendors:

26-1. Are not debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of Federal benefits by a State or Federal court or voluntary excluded from covered transactions by any Federal department or agency; access to debarment information can be made by going to www.epls.gov and the State Debarred Vendor List http:// www .window .state.tx.us., or http:// www .window.state.tx.us/ procurement/prog/vendorperformance/debarred.

26-2. Have not within a three-year period preceding this agreement been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining attempting to obtain, or performing a public (Federal, State,or local) transaction or contract which resulted in a violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records making false statements, or receiving stolen property. Are not presently indicted for or otherwise civilly charged by a governmental entity (Federal, State, local) with commission of any of the offenses aforementioned; and

26-3. Within a three-year period preceding this agreement have not had one or more public transactions (Federal, State, or local) terminated for cause or default; and

26-4. Where the Entity can certify to any of the statements in this certification, he or she shall attach an explanation to this agreement.

IN WITNESS WHEREOF, the Seven Flags Regional Advisory Council acting by and through its chairman, and the South Texas Development Council, acting by and through its Executive Director, have executed this agreement in duplicate originals.

SEVEN FLAGS REGIONAL ADVISORY COUNCIL
Jorge Delgado, Chairman

X _____

Date: _____

SOUTH TEXAS DEVELOPMENT COUNCIL
Juan E. Rodriguez, Executive Director

X _____

Date: _____

ATTACHMENT - I

DEPARTMENT OF STATE HEALTH SERVICES
CONTRACT NO. HHS001336600020
AMENDMENT NO. 5

The **DEPARTMENT OF STATE HEALTH SERVICES** ("DSHS" or "System Agency") and **THE SEVEN FLAGS REGIONAL ADVISORY COUNCIL ON TRAUMA, TRAUMA SERVICE AREA (TSA)-T** ("Grantee"), each a "Party" and collectively the "Parties" to that certain Emergency Medical Services/County Regional Advisory Council (EMS/CO-RAC) grant agreement, effective September 1, 2023, and denominated DSHS Contract No. HHS001336600020 ("Contract"), as amended, now desire to further amend the Contract.

WHEREAS, the Parties desire to exercise their option to renew the Contract for an additional one-year term for the period beginning September 1, 2026, through August 31, 2027 ("FY27"), representing the third of four one-year extension options;

WHEREAS, the Parties desire to add funds to the Contract for FY27 in support of services to be provided by Grantee and update the not-to exceed amount of the Contract;

WHEREAS, the Parties desire to update the Contract Representative information and the Contract Affirmations; and

WHEREAS, the Parties desire to revise the Statement of Work, the EMS Trauma Care System Account (County Detail) and the Deliverables Reporting Calendar; and

WHEREAS, for the avoidance of doubt, the parties desire to clarify that the contract includes the Statement of Work for FY24 - FY26; and

WHEREAS, for the avoidance of doubt, the parties desire to clarify that the contract includes the EMS Trauma Care System Account (County Detail) for FY25; and

WHEREAS, for the avoidance of doubt, the parties desire to clarify that the contract includes the Deliverables Reporting Calendar for FY25.

WHEREAS, for the avoidance of doubt, the parties desire to clarify that **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK** includes a requirement to return all unexpended funds to DSHS at end of the biennium (FY26-27).

NOW, THEREFORE, the Parties hereby amend and modify the Contract as follows:

1. **SECTION III, DURATION**, of the Contract is amended to reflect a revised termination date of **August 31, 2027**, unless extended or terminated sooner pursuant to the terms and conditions of the Contract.
2. **SECTION V, BUDGET**, of the Contract is amended to add funds for FY27 in the amount of **$320,557.00**. Accordingly, the total not-to-exceed amount of the Contract is increased to **$1,282,043.00.** All expenditures for FY27 will be in accordance with **ATTACHMENT A-5,**

FIFTH REVISED STATEMENT OF WORK, and **ATTACHMENT B-3, FY27 RAC EMS COUNTY PASS-THRU AND ADDITIONAL FUNDING INFORMATION.**

3. **SECTION VII, CONTRACT REPRESENTATIVES,** of the Contract is hereby amended to replace the System Agency contact information as follows:

   System Agency
   Department of State Health Services
   1100 West 49th Street, MC 1990
   Austin, Texas 78756
   Attention: Kimberly Royal
   kimberly.royal@dshs.texas.gov

4. **ATTACHMENT A-4, FOURTH REVISED STATEMENT OF WORK**, of the Contract is supplemented with **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**, which is attached to this Amendment No. 5 and incorporated into and made part of this Contract for all purposes.

5. **ATTACHMENT A, A-1, A-2 AND A-3, THE PREVIOUS STATEMENTS OF WORK**, are added and incorporated back into and made part of this Contract for all purposes.

6. **ATTACHMENT B-2, FY26 EMS TRAUMA CARE SYSTEM ACCOUNT (COUNTY DETAIL),** of the Contract is supplemented with **ATTACHMENT B-3, FY27 RAC EMS COUNTY PASS-THRU AND ADDITIONAL FUNDING INFORMATION**, which is attached to this Amendment No. 5 and incorporated into and made part of the Contract for all purposes.

7. **ATTACHMENT B-1, FY25 EMS TRAUMA CARE SYSTEM ACCOUNT (COUNTY DETAIL),** is added and incorporated back into and made part of this Contract for all purposes.

8. **ATTACHMENT C-2, HHS CONTRACT AFFIRMATIONS – V. 2.5, NOVEMBER 2024,** of the Contract is deleted in its entirety and replaced with **ATTACHMENT C-3, HHS CONTRACT AFFIRMATIONS – V. 2.9, MARCH 2026,** which is attached to this Amendment No. 5 and incorporated into and made part of the Contract for all purposes.

9. **ATTACHMENT F-3, FY26 DELIVERABLES REPORTING CALENDAR**, of the Contract is supplemented with **ATTACHMENT F-4, FY27 DELIVERABLES REPORTING CALENDAR**, which is attached to this Amendment No. 5 and incorporated into and made part of the Contract for all purposes.

10. **ATTACHMENT F-2, REVISED FY25 DELIVERABLES REPORTING CALENDAR**, is added and incorporated back into and made part of this Contract for all purposes.

11. This Amendment No. 5 shall be effective on August 31, 2026.

12. Except as modified by this Amendment, all terms and conditions of the Contract, as previously amended, shall remain in full force and effect.

13. Any further revision to the Contract shall be by written agreement of the Parties.

14. Each Party represents and warrants that the individual executing this Amendment on its respective behalf has full power and authority to enter into this Amendment.

SIGNATURE PAGE FOLLOWS

SIGNATURE PAGE FOR AMENDMENT NO. 5
DSHS CONTRACT NO. HHS001336600020

DEPARTMENT OF STATE HEALTH SERVICES

By: Signed by: Christy Havel Burton 3A9AA1FD9B20448...

Printed Name: Christy Havel Burton

Title: Chief Financial Officer

Date of Signature: June 19, 2026

THE SEVEN FLAGS REGIONAL ADVISORY COUNCIL ON TRAUMA, TRAUMA SERVICE AREA (TSA)-T

By: Signed by: 233BF41BF02E4DA...

Printed Name: Jorge Delgado

Title: Chairman

Date of Signature: June 18, 2026

THE FOLLOWING DOCUMENTS ARE ATTACHED TO THIS AMENDMENT NO. 5 AND INCORPORATED INTO AND MADE PART OF THE CONTRACT:

ATTACHMENT A-5	FIFTH REVISED STATEMENT OF WORK
ATTACHMENT B-3	FY27 RAC EMS COUNTY PASS-THRU AND ADDITIONAL FUNDING INFORMATION
ATTACHMENT C-3	HHS CONTRACT AFFIRMATIONS – V. 2.9, MARCH 2026
ATTACHMENT F-4	FY27 DELIVERABLES REPORTING CALENDAR

ATTACHMENT A-5
FIFTH REVISED STATEMENT OF WORK

I. GRANTEE RESPONSIBILITIES & REQUIREMENTS

A. EMS/COUNTY FUNDING REQUIREMENTS

The Department of State Health Services (DSHS) shall contract with each eligible Grantee to distribute the county shares of the Emergency Medical Service allocation to eligible EMS providers providing EMS emergency response within counties which are aligned with the Regional Advisory Council jurisdiction.

Grantee will:

1. Distribute funds directly to eligible EMS providers. DSHS will provide allocations by county; however, actual eligibility will be based upon meeting the RAC's participation requirements and holding an EMS provider licensure for the reporting year. If an EMS provider is no longer considered eligible or is no longer operational, these funds may be redirected to provide additional allocations to eligible EMS providers within the same county to which funds were allocated. If there are no additional eligible EMS providers within the same county, the funds may be distributed to EMS providers providing emergency transports in adjacent counties that meet the requirements and provide emergency transports within this county. If an alternate EMS provider cannot be identified, the funds will be returned to DSHS. Grantee should contact the DSHS Contract Management Section ("CMS") for instructions if funds will be returned to DSHS. Funds distributed to EMS providers as an advance may not be reduced by the Grantee for the cost of dues, fees, or services provided by the Grantee and that are billed to the EMS providers.
2. Evaluate its distribution plan based on the following:
   a. Fair distribution process to all eligible EMS providers, taking into account all eligible providers participating in contiguous Trauma Service Areas ("TSAs");
   b. Needs of the EMS providers; and
   c. Evidence of EMS providers' consensus and their written approval for any separate distribution plan funding proposed by the Grantee for shared county projects or costs that impact the eligible county entities listed on **ATTACHMENT B-3, FY27 EMS TRAUMA CARE SYSTEM ACCOUNT (COUNTY DETAIL).**
3. Ensure the county portion of the EMS allocation is distributed directly to eligible recipients without any reduction in the total amount allocated by DSHS and that these funds are used to supplement the current county EMS funding of eligible recipients. Grantee will prioritize EMS provider reimbursements to ensure the continuation of EMS services by the EMS provider, including reimbursement for:
   a. EMS operational expenses used to maintain the EMS services provided by the EMS provider;
   b. EMS supplies;
   c. EMS education and training:
      i. Cost of meals during overnight travel may be reimbursed only if EMS personnel are attending meetings or conferences that relate to the

EMS/COUNTY Grant Program and technical information is being disseminated; and

ii. EMS providers must have travel policies that specify maximum reimbursement limits for meals, lodging, and the mileage rate. Otherwise, the State of Texas travel policies and reimbursement rates will apply;

d. EMS equipment;

e. EMS ambulances (other vehicles may be considered upon request and prior approval by DSHS); and

f. EMS communication systems.

4. Ensure Contract funds **are not** used for the following:

   a. Buildings or real property unless Grantee obtains prior written approval from DSHS. Any costs related to the initial acquisition of the buildings or real property are not allowable without written pre-approval;

   b. Purchase and improvement of land;

   c. Food (other than as specified under **SECTION I(A)(3)(C)(I)** of this **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**);

   d. Investments (such as stocks, bonds, or mutual funds); and

   e. Expenses associated with a person or entity that has been hired to affect the outcome of legislation.

5. If necessary, utilize EMS/RAC or RAC SYSTEMS DEVELOPMENT funds to administer the EMS/COUNTY deliverables.

6. Submit an EMS Provider Expenditure Report that records funds distributed to EMS providers as an advance or reimbursement. The EMS Provider Expenditure Report records how the EMS providers spent their allocated funds. Grantee should ensure the report is complete, reconciled, and verified to be accurate. The EMS Provider Expenditure Report will be submitted using the template located under the "Regional Advisory Councils (RAC)" heading at the following URL: https://www.dshs.texas.gov/dshs-ems-trauma-systems/applications-forms#RAC. Grantee will submit the EMS Provider Expenditure Report annually. Supporting documentation may be required as requested by DSHS.

7. Submit an EMS Provider Distribution Report that outlines the final list of eligible EMS providers that were awarded funds using the template located under the "Regional Advisory Councils (RAC)" heading at the following URL: https://www.dshs.texas.gov/dshs-ems-trauma-systems/applications-forms#RAC. The EMS Provider Distribution Report will be submitted annually and will serve to delineate how the Grantee distributed funds to eligible EMS providers in the Grantee's TSA counties. This report should include any prior year EMS/COUNTY carryforward funds. All disbursements should be outlined on the EMS Provider Distribution Report. Funds not distributed and reported in the EMS Provider Distribution Report may result in disallowed costs.

8. Submit an EMS/COUNTY Eligibility List annually by November 30th of every State Fiscal Year which will contain a list of the eligible EMS providers that met the RAC's eligibility requirements, participated in performance improvement activities as requested, and utilized the RAC's regional protocols regarding patient destination

and transport. DSHS must approve the EMS/COUNTY Eligibility List prior to its distribution.

9. Comply with the reporting requirements and due dates identified under **ATTACHMENT F-4, FY27 DELIVERABLES REPORTING CALENDAR**. The Deliverables Reporting Calendar (see **ATTACHMENT F-4, FY27 DELIVERABLES REPORTING CALENDAR**) includes due dates and where to submit all identified deliverables. Any changes to **ATTACHMENT F-4, FY27 DELIVERABLES REPORTING CALENDAR**, will be documented through a formal Contract amendment and will be provided to Grantee by the assigned DSHS Contract Representative.

10. In accordance with Texas Health and Safety Code Sections 773.122(c) and 780.004(d), funds that are not able to be disbursed by a RAC to eligible recipients for approved functions by the end of the State Fiscal Year in which the funds were disbursed may be retained by the RAC for use in the following State Fiscal Year for approved functions. Funds that are not disbursed by the RAC in the following State Fiscal Year shall be returned to DSHS.

11. Use funds awarded by the 89th Texas Legislature under House Bill 1 to keep pace with increasing Grantee responsibilities, including compliance with statutory requirements. Some examples of how Grantee may use the funds awarded under House Bill 1 may include RAC approved projects, incorporating maternal and neonatal care (perinatal) committees and activities into RAC planning, developing and implementing regional perinatal and stroke transfer and system plans, and handling coordination with an increased number of trauma facilities due to Texas' increasing population. Funds that are not able to be disbursed by a RAC for approved functions by the end of the State Fiscal Year in which the funds were awarded, may be retained by the RAC for use in the following State Fiscal Year for approved functions. Funds that are not disbursed by the RAC in the following State Fiscal Year shall be returned to DSHS.

12. DSHS-approved budget may be revised by Grantee in accordance with the following requirements:
    a. For any transfer between budget categories, Grantee shall submit a revised Categorical Budget using the Budget Template to the DSHS Contract Representative, highlighting the areas affected by the budget transfer and written justification for the transfer request. After DSHS review, the designated DSHS Contract Representative will provide notification of acceptance, rejection, or the need for a Contract Amendment to the Grantee by email.
    b. For transfer of funds between direct budget categories, other than the 'Equipment' and 'Indirect Cost' categories, for less than or equal to a cumulative twenty-five (25) percent of the total value of the respective Contract budget period, Grantee shall submit timely written notification to the DSHS Contract Representative using the Revised Budget Form and request DSHS approval. If a budget revision for less than or equal to the cumulative twenty-five (25) percent is approved for transfer of funds between direct budget categories, the DSHS Contract Representative will provide notification of acceptance to Grantee by email, upon receipt of which, the funds can be utilized by the Grantee.
    c. For transfer of funds between direct budget categories, other than the 'Equipment' and 'Indirect Cost' categories, that cumulatively exceeds twenty-

five (25) percent of the total value of the respective Contract budget period, Grantee shall submit timely written notification to the DSHS Contract Representative using the Revised Budget Form and request DSHS approval. If the revision is approved, the budget revision is not authorized, and the funds cannot be utilized until an amendment is executed by the Parties.

d. Any transfer between budget categories that includes 'Equipment' and/or 'Indirect Cost' categories must be approved by amendment to the Contract. Grantee shall submit timely written notification to the DSHS Contract Representative using the Revised Budget Form and request DSHS approval. If the revision is approved, the budget revision is not authorized, and the funds cannot be utilized until an amendment is executed by the Parties.

B. EMS/RAC TRAUMA FUNDING REQUIREMENTS

Grantee will:

1. Comply with all applicable laws including Health and Safety Code Sections 241.182-185, 773.122, and 780.003-006. If DSHS determines that Grantee disbursed funds in violation of these statutes, DSHS may withhold funds from Grantee for a period of at least one (1) year, but not more than three (3) years.
2. Use funds as provided for in this Contract for the operations of the TSA and for the enhancement and delivery of patient care in the Grantee's TSA.
3. Ensure that funds are used for the following allowable costs:
   a. Direct operational expenses;
   b. RACs may recover eligible indirect costs by utilizing an approved indirect cost rate;
   c. Education and training;
   d. Equipment;
   e. Communication systems; and
   f. Food and staff travel costs that are allowed in the Grantee's travel policy and approved by DSHS. A travel expense must be incurred before it is eligible for reimbursement. DSHS may request submission of the Grantee's pay and travel policies, as applicable, to validate such expenses.

      For lodging and transportation expenses, proof of payment must be documented to validate that the expenses were actually incurred.

      Grantee may be reimbursed for meal and/or lodging expenses that are incurred on a day that the meeting or conference occurs. The reimbursement is limited to the rates set forth in the General Appropriations Act. The reimbursement limit applies without a carry-over from one day to another.
4. Ensure that funds are **not** used for the following:
   a. Vehicles;
   b. Improvements to buildings or real property without prior written approval from DSHS. Any costs related to the initial acquisition of the buildings or real property are not allowable without written pre-approval;
   c. Purchase and improvement of land;

d. Investments (such as stocks, bonds, or mutual funds);

e. Expenses associated with a person or entity that has been hired to affect the outcome of legislation; and

f. Salaries of Grantee's executive board members or executive officers, as applicable.

5. Submit a Quarterly Support Form for both RAC Systems Development and EMS/RAC. The Quarterly Support Form template is located under the "Regional Advisory Councils (RAC)" heading at the following URL: https://www.dshs.texas.gov/dshs-ems-trauma-systems/applications-forms#RAC. The Quarterly Support Form will capture monthly expenditures incurred as well as programmatic and administrative costs. Income earned from funds directly associated with the EMS/CO-RAC Program (i.e., fees or co-pays for services performed, income from the sale of items or services, registration fees collected, etc.) should also be reported. Rebates, refunds, discounts, and adjustments or credits should be treated as applicable credits and should be tracked and applied within Grantee's financial system or General Ledger and not as program income. This is the same form that is identified under the RAC Systems Development Funding Requirements at **SECTION (I)(C)(8)** of this **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**. Grantee will submit a single Quarterly Support Form for each state fiscal quarter.

6. Submit the EMS/RAC & EMS/RAC Systems Development Narrative Report biannually. A template for the EMS/RAC & EMS/RAC Systems Development Narrative Report is located under the "Regional Advisory Councils (RAC)" heading at the following URL: https://www.dshs.texas.gov/dshs-ems-trauma-systems/applications-forms#RAC. The EMS/RAC & EMS/RAC Systems Development Narrative Report must describe how Grantee's funds were utilized to enhance and improve delivery of EMS and Trauma Patient Care, as outlined within this **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**. This is the same report that is identified under the RAC Systems Development Funding Requirements at **SECTION (I)(C)(9)** of this **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**. Grantee will submit a single EMS/RAC & EMS/RAC Systems Development Narrative Report on a biannual basis.

7. Schedule general membership meetings for RAC members and stakeholders. At the general membership meetings, Grantee will provide RAC members and stakeholders a financial report, which must include, but shall not be limited to, the following information: Contract funds expended, planned Contract expenditures, and the remaining balance of funds available under the Contract. The general membership meeting(s) must be held once each state fiscal quarter during the Contract term. Note: These are the general membership meetings also identified at **SECTION (I)(C)(10)** of this **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**.

8. Maintain as part of its accounting records and prepare to submit to DSHS **upon request**, and within fourteen (14) calendar days, source documents to support expenditures identified in the Quarterly Support Forms.

9. Comply with the reporting requirements on the Deliverables Reporting Calendar located at **ATTACHMENT F-4, FY27 DELIVERABLES REPORTING CALENDAR**. The Deliverables Reporting Calendar includes due dates and reporting submission

requirements for all deliverables. Any changes to the Deliverables Reporting Calendar will be documented through a formal Contract amendment and will be provided to Grantee by the assigned DSHS Contract Representative.

10. In accordance with Texas Health and Safety Code Sections 773.122(c) and 780.004(d), have the opportunity to retain funds that are not able to be disbursed by Grantee to eligible recipients for approved functions by the end of the State Fiscal Year in which the funds were disbursed, and use such funds in the following State Fiscal Year for approved functions. Funds that are not disbursed by Grantee in the following State Fiscal Year shall be returned to DSHS.

11. Use funds awarded by the 89th Texas Legislature under House Bill 1 to keep pace with increasing Grantee responsibilities, including compliance with statutory requirements. Some examples of how Grantee may use the funds awarded under House Bill 1 may include RAC approved projects, incorporating maternal and neonatal care (perinatal) committees and activities into RAC planning, developing and implementing regional perinatal and stroke transfer and system plans, and handling coordination with an increased number of trauma facilities due to Texas' increasing population. Funds that are not used by August 31, 2027, shall be returned to DSHS within thirty (30) days of Contract end date, in accordance with the biennium (FY26 and FY27).

C. RAC SYSTEMS DEVELOPMENT FUNDING REQUIREMENTS

Grantee will:

1. Perform activities to develop, implement, and monitor a regional EMS and trauma system plan by facilitating trauma and emergency health care system networking within the Grantee's own TSA or among a group of TSAs throughout Texas.
2. Comply with all applicable laws and regulations established at federal and state levels, as these regulations now appear or may be amended during the period of this Contract. Standards and guidelines referenced are those in effect upon the effective date of this Contract and include:
   a. Texas Health and Safety Code Sections 780.003-.006;
   b. Texas Health and Safety Code Chapter 773;
   c. 25 Texas Administrative Code Sections 157.123, 157.130, and 157.131;
   d. Texas Health and Safety Code Sections 241.182-.185;
   e. 25 Texas Administrative Code Chapter 133, Subchapter J; and
   f. 25 Texas Administrative Code Chapter 133, Subchapter K.
3. Ensure that the RAC Chair, or a RAC Executive Board member, and the person completing the Supporting Documentation Reports submitted to DSHS, attend any scheduled meetings with the DSHS Program and CMS staff regarding the review of regional systems development activities and contractual requirements. DSHS may require Grantee to participate in and attend a virtual meeting.
4. Support the Perinatal Care Region ("PCR") within the Grantee's TSA for descriptive and regional planning purposes and ensure patient referral is not restricted by:
   a. Supporting the PCR; and

b. Having the PCR consider and facilitate a perinatal system plan that addresses transfer agreements.

5. Adhere to the following eligible programmatic costs:
   a. Supplies/equipment and costs of personnel for EMS and injury prevention and education programs;
   b. Costs of personnel, supplies, and equipment to conduct trauma-related courses (Trauma Nursing Core Course, Advanced Trauma Life Support, Basic Trauma Life Support, etc.);
   c. Updating and sharing the regional Trauma and Emergency Healthcare System Plan with the RAC general membership;
   d. Educating the public and trauma care providers about the regional Trauma and Emergency Healthcare System Plan;
   e. Expenditures or grants to entities related to the delivery of trauma patient care and/or expediting the implementation of the Texas EMS/Trauma System;
   f. System performance improvement meetings, newsletters, regional data needs, and regional communication systems; and
   g. Associated travel and registration fees for RAC staff to attend meetings/conferences related to EMS/Trauma Systems.
6. Comply with the following funding restrictions:
   a. Costs related to improvements to buildings or real property are not allowable without prior written approval from DSHS. Any costs related to the initial acquisition of the buildings or real property are not allowable without prior written approval; and
   b. Expenses associated with membership in business, technical, and professional organizations involved in lobbying are not allowable expenses under this Contract. However, if an organization is not involved in lobbying and the Grantee can demonstrate how membership in a professional/technical organization benefits the DSHS program(s), cost of membership may be allowed with prior approval from DSHS.
7. Comply with the following non-allowable costs:
   a. Food, except that the cost of meals for RAC staff and RAC board members attending meetings or conferences that pertain to carrying out activities under the Contract where there is dissemination of technical information is allowable. In addition, same-day meal expenses may be reimbursable if the RAC staff person or RAC board member is outside of his or her designated headquarters for at least six (6) consecutive hours;
   b. Purchase and improvement of land;
   c. Investments (stocks, bonds, mutual funds, etc.); and
   d. No more than thirty-five percent (35%) of the RAC Systems Development funds to be utilized for grant administrative costs. Costs charged directly to a state award are incurred specifically for that state award, including program-specific requirements needed to achieve the award's objectives outlined in this Statement of Work. These costs include, but may not be limited to:

i. Personnel, rent, utilities, office expenses (postage, copying, phone), leased office equipment and supplies, and mailboxes;
ii. Travel to and from required statewide meetings as required within this Statement of Work, including lodging for the Executive Director (or equivalent) and RAC executive board members;
iii. Training that directly benefits the objectives outlined in this Statement of Work;
iv. Professional services (accountant, attorney, auditor), that directly benefit and support the objectives and requirements outlined in this Statement of Work;
v. Internet access, furniture, and travel for above-mentioned costs; RAC EMS COUNTY PASS THRU Program are allowable expenses under this Contract.
vi. RACs with established indirect cost rates should recover eligible indirect costs by utilizing an approved indirect cost rate.

8. Submit a Quarterly Support Form for both RAC Systems Development and RAC TRAUMA FUNDING. The Quarterly Support Form template is located under the "Regional Advisory Councils (RAC)" heading at the following URL: https://www.dshs.texas.gov/dshs-ems-trauma-systems/applications-forms#RAC. The Quarterly Support Form will capture monthly expenditures as well as programmatic and administrative costs. Income earned from funds directly associated with the EMS/CO-RAC Program (i.e., fees or co-pays for services performed, income from the sale of items or services, registration fees collected, etc.) should also be reported. Rebates, refunds, discounts, and adjustments/credits should be treated as applicable credits and should be tracked and applied within Grantee's financial system or General Ledger and not as program income. This is the same form that is identified under the EMS/RAC Funding Requirements at **SECTION (I)(B)(5)** of this **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**. Grantee will submit a single Quarterly Support Form for each state fiscal quarter.

9. Submit the RAC TRAUMA FUNDING & EMS/RAC Systems Development Narrative Report biannually. A template for the RAC TRAUMA FUNDING & EMS/RAC Systems Development Narrative Report is located under the "Regional Advisory Councils (RAC)" heading at the following URL: https://www.dshs.texas.gov/dshs-ems-trauma-systems/applications-forms#RAC. The RAC TRAUMA FUNDING & EMS/RAC Systems Development Narrative Report must describe how Grantee's funds were utilized to enhance and improve delivery of EMS and Trauma Patient Care, as outlined within this **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**. This is the same report that is identified under the EMS/RAC Trauma Funding Requirements at **SECTION (I)(B)(6)** of this **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**. Grantee will submit a single RAC TRAUMA FUNDING & EMS/RAC Systems Development Narrative Report on a biannual basis.

10. Schedule general membership meetings for RAC members and stakeholders. At the general membership meetings, Grantee will provide RAC members and stakeholders a financial report, which must include, but shall not be limited to, the following information: Contract funds expended, planned Contract expenditures, and the

remaining balance of funds available under the Contract. The general membership meeting(s) must be held once each state fiscal quarter during the Contract term. Note: These are the general membership meetings also identified at **SECTION (I)(B)(7)** of this **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK**.

11. Submit the RAC Annual Report to DSHS, Office of EMS/Trauma Systems, by October 15, 2027. The RAC Annual Report will cover FY27 (September 1, 2026, through August 31, 2027). Submission requirements are detailed within the RAC Annual Report template. The form is located under the "Regional Advisory Councils (RAC)" heading at the following URL: https://www.dshs.texas.gov/dshs-ems-trauma-systems/applications-forms#RAC.
12. Grantee shall maintain as part of its accounting records and prepare to submit to DSHS, **upon request**, and within fourteen (14) calendar days, source documents to support expenditures identified in the Quarterly Support Forms.
13. Comply with the reporting requirements on the Deliverables Reporting Calendar (see **ATTACHMENT F-4, FY27 DELIVERABLES REPORTING CALENDAR**). The Deliverables Reporting Calendar includes due dates for all deliverables and the DSHS email address(es) where to submit each deliverable. Any changes to the Deliverables Reporting Calendar will be documented through a formal Contract amendment and will be provided to Grantee by the assigned DSHS Contract Representative.

II. GENERAL RESPONSIBILITIES

Grantee will:

A. Provide DSHS with current 24/7 contact information for the RAC Chair, Vice-Chair, Executive Director or comparable staff member, and executive board members within five (5) business days of any change to the roster.

B. Serve as a point of contact for disseminating communications from DSHS to all of Grantee's RAC members.

C. Ensure Grantee's RAC Chair, executive board member, or Executive Director attends all EMS/Trauma Systems Coordination RAC Chair meetings. The RAC Chair or an executive board member is required to attend mandatory meetings scheduled by DSHS. If the Grantee is unable to provide appropriate representation at the required meetings, a waiver request with justification for not meeting this contractual requirement must be submitted in writing to DSHS at least two (2) calendar days prior to the meeting for approval. Grantee's waiver requests will be reviewed by DSHS on a case-by-case basis. Approval or denial of the waiver request will be provided to Grantee by DSHS. If denied, Grantee must ensure appropriate RAC representative attends the mandatory meeting. Failure to comply with this requirement could result in additional Contract remedies. DSHS will work with Grantee to ensure compliance with this requirement.

D. Submit a list of all board members and executive officers, including each individual's term in office, if applicable.

E. Submit a Board Responsibilities Attestation Form signed by all **new** board members that have not previously signed and submitted a form. The form is located under the "Regional Advisory Councils (RAC)" heading at the following URL:

https://www.dshs.texas.gov/dshs-ems-trauma-systems/applications-forms#RAC. The form acknowledges the board member's personal accountability for Contract funds and affirms that they viewed the DSHS online training prior to signing. Members added after the signed Board Responsibilities Attestation Form is submitted must complete the online training and submit a completed attestation form within sixty (60) calendar days of assuming office.

F. On odd years, the Grantee must complete and submit the RAC Self-Assessment with Scoring Tool. The form is located under the "Regional Advisory Councils (RAC)" heading at the following URL: https://www.dshs.texas.gov/dshs-ems-trauma-systems/applications-forms#RAC.

G. On even years, the Grantee must submit a revised Trauma and Emergency Healthcare System Plan to DSHS. The form is located under the "Regional Advisory Councils (RAC)" heading at the following URL: https://www.dshs.texas.gov/dshs-ems-trauma-systems/applications-forms#RAC.

H. Respond to all surveys requested by DSHS in the specified time frame and, if applicable, on the template provided.

I. Initiate the purchase of all EMS/RAC and RAC Systems Development equipment and supplies defined as "Controlled Assets," pre-approved in writing by DSHS, on or before July 1, 2027. Failure to timely initiate the purchase of equipment and Controlled Assets may result in disallowed costs.

J. Maintain and submit annually the cumulative DSHS Contractor's Property Inventory Report (GC-11), which contains an inventory of equipment, supplies defined as "Controlled Assets," and real property. The report should be submitted no later than October 15 each State Fiscal Year to the following email addresses: FSOequip@dshs.texas.gov and CMUReg.svcs@dshs.texas.gov. This DSHS Contractor's Property Inventory Report (GC-11) must be submitted annually regardless of whether equipment and/or assets were purchased. "Controlled Assets" are defined as follows:

1. Firearms, regardless of the acquisition cost, and assets with an acquisition cost of $500.00 or more, but less than $10,000.00; and
2. Desktop and laptop computers (including notebooks, tablets, and similar devices), non-portable printers and copiers, emergency management equipment, communication devices and systems, medical and laboratory equipment, and media equipment. Controlled Assets are considered supplies.

K. Ensure that at the expiration or termination of this Contact for any reason, ownership of any remaining equipment and supplies purchased with funds under this Contract reverts to DSHS. Title may be transferred to any other party designated by DSHS. DSHS may, at its option and to the extent allowed by law, transfer the reversionary interest in such property to Grantee.

L. Assist in the collection and reporting of data to DSHS to prepare for and respond to a public health disaster, or other outbreak of communicable disease, in the manner prescribed by DSHS, consistent with Texas Health and Safety Code Sections 81.027, 81.0443, 81.0444 and 81.0445.

III. PERFORMANCE MEASURES

A. DSHS will monitor Grantee's evidence of the RAC performance criteria compliance and the requirements in this **ATTACHMENT A-5, FIFTH REVISED STATEMENT OF WORK,** and its compliance with the Contract's terms and conditions.

B. Grantee shall submit additional reports, as requested by DSHS.

C. DSHS will inform the Grantee, in writing, of any changes to applicable federal and state laws, rules, regulations, standards, or guidelines. If Grantee is unable to continue its performance due to a change under this section, then Grantee shall inform DSHS, in writing, within thirty (30) calendar days of receipt. DSHS may terminate the Contract immediately or within a reasonable period after receiving such notice from Grantee.

IV. FUNDING INFORMATION

A. Grantee must establish and maintain a separate cost center or General Ledger to capture costs incurred for carrying out the FY27 activities for each allocation within this Contract as provided below. Copies of monthly statements from the cost center or General Ledger must be available to submit to DSHS upon request and as needed to review invoices submitted to DSHS for payment.

1. For FY27, Grantee will receive a single lump sum payment in the amount of $320,557.00. Grantee's lump sum payment will be allocated in the following manner:
    a. RAC EMS COUNTY PASS THRU
        a. $92,558.00
    b. RAC TRAUMA FUNDING
        a. $31,978.00
    c. RAC SYSTEMS DEVELOPMENT
        a. $46,021.00
    d. EXCEPTIONAL ITEM (EI)
        a. $150,000.00 – Exceptional item ("EI") payment in accordance with the legislative appropriations awarded under House Bill 1 for FY 2026-27.

2. Grantee's lump sum payment will occur approximately thirty (30) calendar days after September 1, 2026, and in accordance with Chapter 2251 of the Texas Government Code, also known as the Texas Prompt Payment Act.
3. Grantee must return all unexpended funds to DSHS at end of the biennium (FY26-27).

V. INVOICE AND PAYMENT

A. Grantee will request payment using the State of Texas Purchase Voucher (Form B-13) which may be found at the following URL: https://www.dshs.texas.gov/contractor-forms. Grantee shall submit a completed Form B-13 to the Claims Processing Unit via email to the following email addresses: invoices@dshs.texas.gov; CMSInvoices@dshs.texas.gov; and CMUReg.svcs@dshs.texas.gov.

ITEM 26-54 (TAB 10)

AGREEMENT

This Professional Services Provider contract (Agreement) is made and entered into as of the 1st day of September 2026 (the "Effective Date"), by and between Seven Flags Regional Advisory Council (the SFRAC) and Health Access, LLC., (Professional Services Provider).

WHEREAS, the SFRAC wishes to receive services from said Professional Services Provider to coordinate and implement the Regional Advisory Council (RAC) Self-Assessment Program for the Seven Flags Regional Advisory Council; and,

WHEREAS, the Professional Services Provider has the knowledge, skill and capability to perform such services for the SFRAC.

THEREFORE, in consideration of the foregoing, the parties, intending to be legally bound, hereby agree to the following:

TERMS OF AGREEMENT

In consideration of the recital, the receipt and sufficiency of which are hereby acknowledge, the parties agree as follows:

1. Professional Services Provider Responsibilities. Professional Services Provider will perform the Services to the satisfaction of the SFRAC. Assuming such satisfactory performance, the SFRAC shall remunerate the Service Provider the amount set forth on **Exhibit A**, by check on a monthly basis. The Professional Services Provider shall be solely and personally responsible for all federal, state and local taxes, contributions and other liabilities with regard to such payments.

2. Term. The term of this Agreement shall be September 1, 2026, through August 31, 2027. Except for material breach of this Agreement by the other party, this Agreement may be terminated by either party given 30-day notice in writing.

3. Ownership of Work Product. Service Provider hereby relinquishes, assigns, grants and transfers to the SFRAC all right, title and interest in any reports, documents, performances or other copyrighted materials authored or created by the Professional Services Provider for the SFRAC pursuant to this Agreement, including all copyrights, renewals and extensions thereof.

4. Relationship. The parties hereto willingly and mutually agree to enter into this agreement pursuant respective considerations. Nothing in this Agreement shall be understood or construed to create or imply any relationship between the parties in the nature of any joint venture, employer/employee, principal/agent or partnership. Professional Services Provider shall in no way become an employee of the SFRAC pursuant to this Agreement. Neither party shall have the authority to nor shall either party attempt to create or assume any obligation by or on behalf of the other party.

5. Expenses. Except as expressly provided to the contrary in this Agreement, all expenses incurred by the Professional Services Provider shall be the sole responsibility of the Professional Services Provider who ordered the service or incurred the particular expense associated with operational expenses such as supplies, rent/leases, supplies, utilities, subscriptions, internet/wi-fi fees, communications (i.e., phone/cellular), printing, postage, and travel expenses including but not limited to mileage, lodging, meals, transportation costs (air/ground/car rental) while in the process of completing any of the tasks associated with this Agreement.

6. Miscellaneous. This Agreement may not be assigned without the written consent of the other party. The Professional Services Provider's services are professional in nature and may not be assigned or delegated to any other person. This Agreement represents the entire Agreement between the parties and supersedes any prior oral or written understandings with respect to the Services. This Agreement may only be amended by an agreement signed in writing by all of the parties hereto. Upon execution, this Agreement will be a valid and binding obligation of each party and enforceable in accordance with its terms.

7. Improper Use of Information and Conflict of Interest with Prior or Current Employers. Professional Services Provider assures that the Professional Services Provider's engagement by the SFRAC pursuant this Agreement does not and will not breach any agreement or be in conflict of interest with any former or current employer or other third party, including any position held on any agency or organization Board of Directors, or during the performance of this agreement would stand to gain on any interest held in a for-profit venture such as a self-proprietorship or partnership. Furthermore, Professional Services Provider assures to keep in confidence or refrain from using proprietary information acquired or held pertinent to the SFRAC, without expressed acknowledgement and approval of the SFRAC. Service Provider further assures that Professional Services Provider has not entered into, and agrees not enter into, any agreement, either written or oral, to be in conflict with Professional Services Provider's upholding obligations under this Agreement. During Professional Services Provider's acquired engagement by the SFRAC, Professional Services Provider will not improperly make use, or disclose of, any confidential information of the SFRAC or of any former or current employer or other third party, which otherwise would be in violation of any former or existing lawful agreements.

SERVICE PROVIDER:

By: Rhonda Stewart

Title: Vice-President, Health Access, LLC.

Signature: _____

SEVEN FLAGS REGIONAL ADVISORY COUNCIL:

By: Jorge Delgado

Title: SFRAC Chairman

Signature _____

EXHIBIT A

I. PROFESSINAL SERVICE PROVIDER RESPONSIBILITIES AND REQUIREMENTS

Professional Service Provider shall:

A. Together with the SFRAC Committee workgroup chairs, Boards members and interested stakeholders, facilitate a process for targeted committee workgroup meetings to facilitate participative discussion during the self-assessment phase III; draft and issue agendas and materials for SFRAC Committee workgroup meetings.

B. In accordance with the Work Plan incorporated as part of this agreement, implement the FY27 self-assessment Phase III SMART Goals Systems Improvement Plan towards meeting a minimum score of three (3) or higher for each applicable performance measure using the DSHS developed Self-Assessment Tool, (V2024.2).

C. As needed, use the Texas State EMS Trauma Registry (EMSTR), or when needed, the National Emergency Medical Services Information System (NEMSIS), to gather and track epidemiological/demographic data for SFRAC Regional Trauma Systems Plan development and revisions, quantitative data analysis metrics, quality improvement analysis benchmarks, and self-assessment compliance measures.

II. PAYMENTS AND SCHEDULE

A. If at no fault of the SFRAC, the total costs of performing this Agreement are greater than the amount of consideration mutually agreed upon by both parties, the Professional Services Provider shall be responsible for any additional cost overruns.

E. The SFRAC may recoup funds from the Professional Services Provider to fulfill any work or obligations left unfinished or incomplete by the Professional Services Provider as it pertains to accomplishing tasks prescribed in the program Scope of Work and work plan and associated timeline.

III. PAYMENT FOR SERVICES

A. In consideration of the services to be rendered pursuant to this Agreement, and upon the timely and satisfactory performance of the services and providing deliverables as required in the SMART Goals Action Plan (**Exhibit B**) and Work Plan (**Exhibit C**), Professional Service Provider shall be paid a total of Seventy-Two Thousand Dollars ($72,000) as follows:

B. PAYMENT SCHEDULE

Payment Period #1:	September 30, 2026	$6,000.00
Payment Period #2:	October 31, 2026	$6,000.00
Payment Period #3.	November 30, 2026	$6,000.00
Payment Period #4.	December 31, 2026	$6,000.00
Payment Period #5.	January 31, 2027	$6,000.00

Payment Period #6.	February 28, 2027	$6,000.00
Payment Period #7.	Marh 31, 2027	$6,000.00
Payment Period #8.	April 30, 2027	$6,000.00
Payment Period #9.	May 31, 2027	$6,000.00
Payment Period #10.	June 30, 2027	$6,000.00
Payment Period #11.	July 31, 2027	$6,000.00
Payment Period #12.	August 31, 2027	$6,000.00

Total: $72,000.00

Note: Payments shall be made within ten working days following the end of each payment period.

Date(s) for Services: Effective date September 1, 2026, through August 31, 2027.

Date for Final Completion of Services: August 31, 2027

EXHIBIT B.

EXHIBIT B

SEVEN FLAGS REGIONAL ADVISORY COUNCIL (SFRAC)

S.M.A.R.T. GOALS ACTION PLAN /FY2027 EMS AND TRAUMA PHASE III)

SFRAC Self-Assessment Process

SFRAC Workgroup meetings were held on July 24, 2025, August 1, 2025, and August 8, 2025, to review all Indicators within the Department of State Health Services (DSHS) Scoring Tool determining the appropriate score and defining the S.M.A.R.T. goal/action plan for those indicators that scored a "0", "1", or "2".

A crosswalk was developed with the workgroup to define the resources used to determine the score, adding notes for items that needed improvement. S.M.A.R.T. goals were designed to begin integration in the SFRAC Fiscal Year (FY) System Plan and incorporate, as applicable, relevant activities in the field. S.M.A.R.T. goals are outlined below for the respective indicators that the SFRAC will achieve in implementing both in the FY System Plan and in the field.

Throughout FY2026 the following activities were conducted in response to the S.M.A.R.T. goals outlined below. The Performance Improvement (PI) Committee was created and designed with RAC members. The PI Committee met and reviewed data sets in alignment with the DSHS initiative for improving transfer times for critical need patients. Initiatives were developed within the system of care to address possible solutions for improving this measure. Continued activity in FY2027 for initiatives are planned for the PI committee and the RAC will incorporate additional S.M.A.R.T. goals for consideration to align with the GETAC initiatives.

Bylaws and the FY2027 System Plan have and will continue to be revised and updated per the S.M.A.R.T. goals below. The PI Committee was added to the Bylaws in FY2026 with a descriptor of the committee role. The FY2027 System Plan will be presented to the RAC Board members to review and approve for all measures listed below that pertain to the improvement of the System Plan, including updates to all sections as relevant. Bylaws will be updated in FY2027 in relation to additional items required to meet the DSHS standard.

The following pages provide the DSHS Section, Indicator, and the relative S.M.A.R.T. goal/action planned for the next fiscal year for continued implementation from the self-assessment. In addition, the SFRAC FY2027 Self-Assessment will be conducted per the GETAC/DSHS guidance provided.

EPIDEMIOLOGY -- Surveillance

2. There is an established regional systems of care surveillance process that can, in part, be used to support performance measures. The data available is integrated into the regional system plan.

S - Implement a Performance Improvement Committee responsible for reviewing regional data and designing quality improvement processes;

M - Performance measures (at a minimum two (2) each) would be selected by PI committee to design quality improvement processes. PMs selected would include base-line data from DSHS annual report for EMS and Trauma measures, with committee design of QI project activities to measure progress;

A - PI committee included as standing committee and integrated into Bylaws; committee meetings would focus on data reviews with reports to Board during quarterly meetings on progress of QI projects selected; requires participation of committee members and would include QI project designs using driver diagrams, process maps, and other QI tools;

R - PI measures are noted in FY22 System Plan under both short- and long-term goals to be developed with committee; this implementation in FY26 would meet the design of the committee, include PMs that are relevant to the goals of RAC for EMS and Trauma specifically;

T - Committee to be developed within three (3) months of initiative of this goal, included in FY System Plan updates and added to Bylaws for standing committee. Committee work to continue in each meeting with review of data and required report of PM progress at four (4) SFRAC Board meetings in a 12-month period.

SYSTEM PLAN --

4. A regional EMS, trauma, systems of care, and emergency health care system plan is in place and based on an analysis of the regional demographics and regional self-assessment and provides opportunities for collaborative stakeholder participation. The regional plan reflects, at a minimum, the regional activities specific to each of the self-assessment criteria and includes the regional guidelines. The regional system plan and all associated documents are available to RAC members and stakeholders. in a secure location.

S - Board Committees will review FY System Plan annually and incorporate revisions based on regional demographics, the completed self-assessment, resources available, and data analyses that align with the RAC performance criteria (performance measures);

M - Complete and document the revisions to the FY System Plan with demographic data, maps, system utilization trends, resources, and assessments of performance measure outcomes annually;

A - Use hybrid meeting formats for RAC committees with designated facilitators to promote active participation in the review and revisions of the FY System Plan; revise Bylaws to ensure this responsibility is indoctrinated into the roles/responsibilities of each committee;

R - Revision of the FY System Plan annually allows the Board and committees to review and reflect on successes and challenges and incorporates data reviews to assess additional access needs, trainings, etc. that may be required in the RAC service area;

T - Conduct at least four (4) planning sessions with committees over a 12-month period (FY) to analyze data from performance measures; annually review FY System Plan and incorporate/implement recommended revisions.

SYSTEM PLAN --

5. The RAC trauma and emergency health care system plan clearly describes how the regional stakeholders will implement and manage the RAC performance criteria and contract requirements to ensure there is documented evidence that the performance criteria are met and includes data analysis when appropriate. The regional system plan is available to RAC members and stakeholders.

S - Develop and distribute a standardized performance criteria document outlining benchmarks, timelines, reporting formats, and compliance expectations for performance measures selected by PI committee;

M – Ensure 100% of participating stakeholders receive and acknowledge the criteria and contract requirements within the SFRAC System Plan;

A – Utilize electronic communication and stakeholder meetings to complete dissemination (PI committee meeting minutes and shared on website);

R – Clear, shared performance expectations are essential for consistent, measurable implementation across the region;

T – Complete dissemination and stakeholder acknowledgment within 60 days of System Plan updates annually approved by Board.

SYSTEM PLAN --

6. The RAC trauma and emergency health care system plan defines a process to assist in sharing the regional and state all-hazard emergency response and preparedness activities with stakeholders. Information is shared as appropriate.

S - Incorporate a standardized protocol for RAC that details how it will disseminate all-hazard emergency preparedness and response information to regional stakeholders;

M - Incorporate language in System Plan with protocol created by RAC for disseminating information to stakeholders; ensure report from HPP is included on website for stakeholders; add HPP or EMT tabletop drills to Appendices of System Plan annually at minimum;

A - Use of existing communication platforms, RAC website, and integrate this into the protocol within the System Plan; review annually for successes and challenges;

R - Clear and consistent information sharing enhances readiness, reduces duplication, and improves coordination during emergencies;

T - Finalize and implement the protocol within 90 days of EMS and Trauma sections of FY System Plan are reviewed and revised to include HPP report/plan.

SYSTEM PLAN --

7. As new evidence-based guidelines are developed, the regional system disseminates the information to the stakeholders and, when needed, has the appropriate committee review the guidelines for regional integration. If regional integration is recommended, the regional committee will develop an implementation plan in collaboration with stakeholders. All stakeholders must have an opportunity to attend an educational overview of the guidelines to ensure they are knowledgeable of the new practice guidelines prior to implementation, including any elements that will be integrated into the system performance improvement process. If approved, new guidelines are shared with appropriate RAC members and stakeholders and integrated into the regional system plan.

S - RAC to define standardized high-level protocol for review and implementation design for new evidence-based guidelines as applicable to the regional EMS and Trauma systems. As new evidence-based guidelines are shared within the Region, RAC will determine which can be achieved and sustained with current systems and will use protocol to implement design and share information with stakeholders for implementation;

M - Protocol development within first 90 days of this self-assessment for EMS/Trauma, incorporate protocol into Bylaws and FY System Plan with 90 days of Board approval;

A - Protocol development will be assigned to existing RAC committees (EMS/Pre-hospital Committee and Trauma/Injury Prevention Committee) with timeline for final protocol to be reviewed with Board for approval at Aug/Sept meeting. Upon approval of Board, protocol incorporated into FY System Plan and reviewed annually thereafter. New evidence-based guidelines approved by RAC for implementation will be incorporated into FY System Plan in appendices;

R - Timely access to updated clinical standards for stakeholders in region improves care quality and system consistency and ensures stakeholders are informed of regional system clinical practice updates/changes;

T - Development of protocol for reviewing new evidence-based guidelines to be completed in 90 days; implemented protocol into FY System Plan upon Board approval; as new evidence-based guidelines are shared by HPP or GETAC, Board will disseminate guidelines for RAC review with committees. Upon implementation/approval of any new evidence-based guideline, RAC will provide stakeholders with designed implementation plan, will include this in the FY System Plan, and disseminate all relevant information through communication portals (meetings, website, etc.)

SYSTEM PLAN –

8. The regional trauma and emergency health care system plan includes the capabilities and capacity for EMS and designated facilities in the RAC. This information is included in the system plan. The regional system plan is available to RAC members and stakeholders.

S - Define in FY System Plan how report from HPP is used to monitor the capabilities and capacity for EMS and designated facilities in the RAC. Include protocol for review in M-track system locally when HPP report is not available. Incorporate this monitoring activity in roles/responsibilities of RAC committees for dissemination of information/data analysis to Board;

M - Review of HPP and/or M-track local data to monitor capabilities and capacity for EMS and designated facilities to occur quarterly by committees for reporting to Board;

A - Communication with Coastal Bend HPP for report access and where applicable, pull local data from M-track to review/monitor capabilities at least four (4) times per year;

R - Regular review of system capacity builds operational readiness and exposes gaps in planning; allows stakeholder awareness of system issues and challenges to determine workarounds and increase capacity as applicable;

T - Include HPP report in FY System Plan annually; committees to review M-track data at least four (4) times per year for reporting issues/successes to Board.

SYSTEM INTEGRATION --

9. There is a clearly defined, cooperative, and ongoing relationship between the regional EMS, trauma, systems of care, and emergency health care system specialty physician leaders. This is written into the system plan. The regional system plan is available to RAC members and stakeholders.

S - Include RAC medical advisory structure in the bylaws with integration of specialty services and provide updated list of members in FY System Plan by Nov 2025. Include review of structure and member listing with specialties noted at least four (4) times per year;

M - Inclusion of RAC medical advisory structure in bylaws with updated list of members in FY System Plan. Review of structure and member listing in FY System Plan will be done at least four (4) times per year;

A - Incorporation into bylaws provides accountability for medical advisory structure and review and updates to FY System Plan RAC members is designed to ensure representation of various specialties;

R - Multidisciplinary input ensures system plans reflect the full spectrum of clinical expertise across the continuum of care;

T - Medical advisory group structure within bylaws and incorporating review of members list to be completed starting Nov 2025; four (4) times per year reviews thereafter with revisions made as applicable.

SYSTEM INTEGRATION --

10. The regional trauma and emergency health care system plan integrates designated facilities with other acute care facilities, extended care facilities, rehabilitation facilities, and 9-1-1 EMS providers into regional committees and projects. This includes facilities for specialty care such as burn care. This element of system integration is written into the system plan. The regional system plan is available to RAC members and stakeholders.

S - Incorporate language into FY System Plan to include how RAC integrates other healthcare

systems into regional committees and projects as applicable by Dec 2025;

M - Added language into System Plan by Dec. 2025, with minimal review of action steps to ensure protocol is still valid in region at least four (4) times per year thereafter;

A - Use of existing regional health systems and incorporating other healthcare systems through HPP assistance provides additional structure and success as projects are identified; increases RAC relationships with other healthcare organizations;

R - Ensures system planning is inclusive and reflects the full continuum of care;

T - Establish language into System Plan by Dec. 2025 with reviews conducted to ensure other healthcare organizations are identified and listed in resources at least four (4) times per year.

EMS/PREHOSPITAL –

12. The regional trauma and emergency health care system plan defines an EMS Medical Director Committee or medical advisory process that is actively involved with the local and state advisory council initiatives focusing on the development, implementation, and ongoing evaluation of the EMS system guidelines. These guidelines include but are not limited to prehospital triage criteria to establish appropriate destination and transport criteria for patients with acute trauma, systems of care, or other time-sensitive disease processes; which resources to dispatch, such as Advanced Life Support (ALS) versus Basic Life Support (BLS) and First Responder Organizations (FRO); air-ground coordination; early notification of the receiving health care facility; prearrival instructions; EMS-Time Out guidelines; facility patient feedback to EMS; and other EMS regional procedures. These are elements of the regional trauma, and emergency health care system plan. The regional system plan is available to RAC members and stakeholders.

S - Create resource list in FY System Plan to include the protocol that medical directors are included in the planning;

M - The resource list will be developed by the EMS prehospital RAC committee with medical directors incorporated in the planning and report will happen at each board meeting;

A - Based on input from directors, data review, and leadership direction;

R - Ensure the committee is focused on high-impact initiatives;

T - Timebound lists are finalized within 90 days and reviewed at each RAC committee meeting at least four (4) times per 12-month period.

EMS/PREHOSPITAL --

13. There are recommended regional prehospital triage criteria to establish appropriate destination and transport of patients with acute trauma, systems of care, or other time-sensitive disease processes. The regional EMS Medical Director Committee or medical advisory process, EMS providers, and designated facilities regularly evaluate prehospital triage criteria to identify system gaps. The regional prehospital triage criteria are included in the EMS guidelines of the

regional trauma and emergency health care system plan. The regional system plan is available to RAC members and stakeholders.

S - Incorporate language and appendix to the FY System Plan that provides the criteria in place for the MCI and tabletops and will incorporate a training calendar of events as part of the appendix;

M - RAC committee will look at the criteria working with the stakeholders to ensure all is updated and reported to the Board at four (4) meetings in a 12-month period;

A - Training wide events are currently occurring; incorporate language into FY System Plan and annual report;

R - Ensure a safe and accurate application of the new criteria;

T - Incorporate into FY System Plan and report to the board within six (6) months.

SYSTEM COORDINATION and PATIENT FLOW --

15. Regional guidelines and processes to expedite interfacility transfers of patients with acute trauma or systems of care events, individuals with life-threatening or limb-threatening injuries or disease, and other time-sensitive disease processes are included in the regional trauma and emergency health care system plan. The regional system plan is available to RAC members and stakeholders.

S - Actively review and develop new criteria based on September 1st new rules;

M - Add as project improvement plan for PI committee review;

A - Led by trauma program director or quality team with ED support;

R - Provides data to target systemic delays and bottlenecks;

T - Review completed criteria within 60 days of the September 1st new rules and PI committee will review data set.

SYSTEM COORDINATION and PATIENT FLOW –

16. Specific regional populations that may have defined needs are identified for trauma, systems of care, and other time-sensitive disease processes in the regional system plan. Examples of unique populations include bariatric, homeless, behavioral health, and the non-English speaking population in all geographic areas of the region, including the rural and remote areas. The regional trauma and emergency health care system plan identifies resources for these populations. The regional system plan is available to RAC members and stakeholders.

S - Incorporate all current readiness information/protocols for bariatric, homeless housing, behavioral health, and non-English Speaking into the FY System Plan;

M - The committee will review the current readiness protocol for each in their meetings and

report to the board;

A - Collect all regional guidelines for all unique populations in the region, including all case management opportunities to add to the protocol;

R - Maintain the protocols annually;

T - Complete at each of the four (4) RAC committee meetings in a 12-month period.

PREVENTION and OUTREACH –

17. Written injury and disease prevention and outreach guidelines that utilize evidence-based practices are implemented. Implementation includes collaboration with other agencies and community partners. The specific prevention and outreach programs are data-driven and aimed at high-risk injuries that produce the "top five" injury reasons for trauma facility admission or trauma deaths for the region's systems of care and time sensitive diseases guided by regional data, with consideration to shared risk and protective factors. Specific goals with measurable objectives are incorporated into the prevention and outreach guidelines and monitored quarterly. This information is disseminated to regional stakeholders. Outcome data of the prevention and outreach guidelines are included in the regional annual report.

S - EMS and prehospital committee will gather and review all existing top five (5) injury guidelines; review existing and new guidelines at every meeting;

M - RAC Committee will meet four (4) times in a 12-month period to review existing guidelines with stakeholder input;

A - Use RAC Committee existing meetings and involve existing advisory structures for guideline updates;

R - Ensures guidelines reflect local needs and addresses community health priorities;

T - Incorporate using an appendix into the FY System Plan within nine (9) months. Each board meeting and RAC committee will provide as applicable.

PREVENTION and OUTREACH –

18. The region conducts at least one interdisciplinary EMS, trauma, systems of care, or acute emergency health care conference or educational case review annually, designed to engage regional stakeholders, disseminate evidence-based practices, and focus on the system approach to patient care and improving regional outcomes. Information on this conference or case presentation must be shared with the appropriate regional stakeholders. Regional participant attendance is documented. This information is included in the regional annual report. The regional annual report is available to RAC members and stakeholders.

S - Incorporate current system improvement case study protocols into FY System Plan, with inclusion of case reviews completed annually in the SFRAC Annual Report;

M - Include peer-reviewed protocols, QI project results, or clinical guideline updates in the FY

System Plan and Annual Report;

A - RAC Committee members are participating in case reviews and will now include these in committee reports to the Board;

R - Enhances clinical decision-making and supports consistent standards of care;

T - Case reviews will be reported during committee reports at board meetings four (4) times in a 12-month period.

REHABILITATION --

19. The regional system has integrated rehabilitation resource capabilities into the regional trauma and emergency health care system plan. The regional system plan is available to RAC members and stakeholders.

S - Review and update current resource list of regional protocols and incorporate into System Plan as an appendix;

M - Resource list is updated at every meeting, at least four (4) times within a 12-month period;

A - RAC Committee will work with EMS and hospital case management teams for inclusion of additional available resources;

R - Continues to identify existing resources and identify any gaps;

T - Protocol resource list will be finalized and included in System Plan within three (3) months. Resource list will be reviewed and updated at all board meetings at least four (4) times in a 12-month period to maintain a current list at all times.

EMERGENCY RESPONSE --

20. The RAC leaders and stakeholders assist with sharing and disseminating local, regional, and state emergency response and preparedness initiatives and priorities within the RAC. Stakeholders are integrated into the emergency response training and educational opportunities.

S - Incorporate current protocol information into the SFRAC FY System Plan to coordinate and prepare for disaster plans every three (3) years and tabletops annually;

M - Ensure that all plans and tabletops are reported to SFRAC members and submitted to SFRAC leadership for inclusion in the SFRAC FY System Plan annually through the connection with HPP, or as required;

A - The SFRAC will leverage existing committees and Board of Director meetings, sharing availability of SFRAC and HPP meeting schedules and agendas;

R - Ensures consistent messaging and priority alignment across the system;

T - Framework finalized and distributed within 90 days.

EMERGENCY RESPONSE –

21. The RAC leaders share information with regional stakeholders to assist in completing a resource assessment of the system's capabilities and capacity to surge for mass casualty incidents (MCIs) in an all-hazards approach. This information is documented in a regional internal document.

S - Incorporate current HPP Resource Assessment into the SFRAC FY System Plan for MCIs;

M - Ensure that the contact list is added to the appendix for the SFRAC System Plan, to ensure communication and sharing availability of SFRAC and HPP meeting schedules and agendas;

A - SFRAC will use Board of Director meetings and existing committees to report updates provided by HPP;

R - Ensures comprehensive and inclusive assessment of response assets;

T - Stakeholder engagement within 60 days.

EMERGENCY RESPONSE –

22. The RAC leaders and stakeholders establish and implement reliable system communications that are effectively coordinated for an all-hazards response or a major EMS incident. This information is included in a separate document from the regional system plan.

S - Ensure that the current HPP communications for an all-hazard response is incorporated into the SFRAC FY System Plan and PI Plan;

M – Updates by HPP will be reported during each of the four (4) SFRAC Board meetings in a 12-month period;

A - Use tabletop, hybrid, or live field exercise formats;

R - Tests and validates communication readiness under stress;

T - Make sure this is completed within 30 days of coordination with HPP.

REGIONAL SYSTEM PERFORMANCE IMPROVEMENT --

23. The regional trauma and emergency health care system plan has defined processes to

support a regional system performance improvement plan that is supported by regional stakeholders through committee participation, sharing of requested data, and review of specific regional referrals. The system performance improvement plan defines the review process, including identifying opportunities for improvement. If the event has not been reviewed by a facility or EMS provider, the level of harm and level of review are defined. All regional opportunities for improvement have a defined action plan, and the action plan is implemented and monitored to reach event resolution. An annual summary of the regional performance improvement process is shared with the regional stakeholders. The retrospective regional Medical Director Committee/medical advisory process of the established patient field triage and destination, communication, treatment, and transport are integrated with the regional performance improvement process. The outcomes of the regional performance improvement process are included in the regional annual report. The regional annual report is available to RAC members and stakeholders.

S - Design and implement a regional system Performance Improvement Plan;

M - Performance Improvement Plan will include review process, level of harm, level of review (process mapping) with identified performance measure goals and objectives for measuring success in QI projects planned per performance measure. Measures will be reviewed using data-driven informed metrics;

A - Selection of no more than two (2) Performance Measures for EMS and Trauma each with goals designed for achievability and objectives/action items noted using QI process mapping to determine successes and challenges. Reviewed at each PI committee meeting with stakeholder dedication to provide data from their internal systems to show successes/challenges in relation to DSHS annual data sets for baseline outcomes;

R - PI projects are noted to be defined in the FY22 System Plan; PI committee will define relevant performance improvement projects for EMS and Trauma based on data;

T - Review of data sets for selected QI projects will be conducted at each PI committee meeting with changes noted to objectives as applicable; data reported for regional/stakeholder participants to show results of QI activities in relation to PM goal; all data reported to Board for successes, challenges, and innovative activities being conducted. As goals are achieved for QI projects, new PMs are selected by PI committee. Outcomes included in regional annual report.

REGIONAL SYSTEM PERFORMANCE IMPROVEMENT –

24. The RAC system performance improvement plan has standardized guidelines for the review of EMS, trauma, and systems of care aggregate outcomes for all ages and all areas of the region that align with the State System Performance Improvement Plan. These outcomes are compared and measured against known national outcomes when available. The aggregate outcomes of the regional performance improvement plan are included in the regional annual report. The regional annual report is available to RAC members and stakeholders.

S - Develop/Implement PI Committee and standardize committee responsibilities for reviewing EMS, trauma, and system of care outcomes. PI Committee to determine at least two (2) performance measure metrics for EMS and Trauma each with baseline data and set performance goals with objectives to track success;

M - PMs selected will include baseline data with goals for regional EMS and Trauma to achieve using annual DSHS data; regional area support of EMS and Trauma stakeholders to provide local data sets to show success/challenges in achieving goal with objectives/activities measured/reviewed each PI committee meeting;

A - Objectives for PMs will be designed by EMS and Trauma stakeholders to ensure achievability and design of improvement processes will be supported by data provided;

R - Short- and long-term goals in FY22 System Plan will be achieved by creation of PI committee; continued relevance will be supported by PMs selected and measured through PI committee for EMS and Trauma starting;

T - PI Committee implemented within first three (3) months of this SMART objective; PMs selected will be measured and reported at each PI committee with actionable items changed as challenges are noted. All PM goals will be designed with times defined (e.g., Wall times will be increased by 2% annually). PMs with outcomes will be reported at four (4) Board meetings in a 12-month period.

DATA MANAGEMENT --

25. Data collection by the region through the State EMS and Trauma Registry, regional databases, or other data sources are utilized to develop data driven regional goals with objectives that correlate with the regional system performance improvement plan. The data management plan and system performance improvement plan are included in the regional trauma and emergency health care system plan. The regional system plan is available to RAC members and stakeholders.

S - Develop Regional Performance Improvement Plan incorporating data management plan and system performance improvement plan processes;

M - Regional Performance Improvement Plan to incorporate the performance measures selected for EMS and Trauma with clear measurable metrics and data process reporting outlined for use by the PI committee;

A - Regional Performance Improvement Plan will be a living document updated with outcomes for each PM selected for EMS and Trauma, will be updated as new goals/PMs are selected and as PMs are reporting trends of outcomes;

R - Goals of RAC are to incorporate this into Regional System Plan and incorporate Improvement Plan with outcomes reported at least four (4) Board meetings in a 12-month period by PI committee;

T - Regional PI Plan to be developed by PI committee within first three (3) months of committee implementation; PI Plan will be reviewed no less than annually and will be included in annual report and updated in System Plan.

REGIONAL RESEARCH & PUBLICATIONS --

26. The regional EMS, trauma, systems of care, and emergency health care system has

developed mechanisms to engage the regional general membership and other system stakeholders in systems of care regional research or performance improvement projects. This process is included in the regional trauma and emergency health care system plan. The regional system plan is available on request.

S - Performance Improvement (PI) Committee will be implemented to review regional data and quality improvement processes; responsible for reviewing regional data and designing quality improvement processes;

M - Performance measures (at a minimum two (2) each) will be reviewed using QI project activities to measure progress;

A - PI committee will be comprised of stakeholders and will focus on data reviews with reports to Board during at least four (4) meetings in a 12-month period on progress of QI projects;

R - Implementation of FY 26 PI measures will be developed by committee and will include PMs that are relevant to the goals of RAC for EMS and Trauma specifically;

T - Committee will review first data set within three (3) months of initiative of this goal and continue to review and report PM progress at no less than four (4) SFRAC Board meetings in a 12-month period.

EXHIBIT C.

Exhibit C
Work Plan for Health Access, LLC
September 1, 2026 – August 31, 2027

Goal #1: Assist SFRAC Board with Implementation and Enhancement of all RAC Committees.		
Health Access Goal: Enhance all RAC Committees through support of meetings and development of committee charters/plans with SFRAC chairs, Board members, and interested stakeholders.		
TASKS	**HEALTH ACCESS PROPOSED ACTIVITIES/ INTERVENTIONS**	**ESTIMATEDTIMELINE**
1. Meet with SFRAC Chair and Administrator for project planning. 2. Work with SFRAC Board members and interested stakeholders to implement/enhance each committee. 3. Develop roles/responsibilities of each committee. 4. Create timeline and protocols for data analysis, standing agenda topics, and meeting consistency.. 5. Create quality improvement tools for implementation of community objectives for actions/system changes noted based on improving outcomes, as applicable to the committee responsibilities.	1. HA team will set up initial meetings with SFRAC Board Chairs for each committee and SFRAC Administrator for project planning. Goal in this meeting is to determine Committee design and to assist HA in reaching out to all Board members and interested stakeholders for inclusion in each respective committee. 2. HA will work with SFRAC Board members and interested stakeholders with the assistance of the Administrator and Board Chairs and selected Committee members to design roles/responsibilities of each committee. 3. HA will assist each Committee in developing protocols and processes for each respective committees required tasks. Development of standing agenda topics and a timeline for committee meetings will be conducted with the committee members. 4. HA will assist each Committee with development of protocols and timeline for committee data analysis, as applicable. Data analysis will occur every committee meeting as needed, with baseline data reported in first meeting for any GETAC/DSHS current PI activities in place. HA will provide assistance to each Committee for selection of at least two (2) goals based on data analysis conducted. 5. HA will assist each Committee in design and development of quality improvement tools to help determine root cause analysis, design system and/or actionable items/activities to improve outcomes and develop continuous monitoring of performance in quality improvement for the projects selected each fiscal year..	Health Access, LLC anticipates completing the set up and calendar of meetings for the RAC committees within the first three months of FY2027. HA to work with SFRAC Board for membership nominations, selection, and inclusion for each RAC committee. This should happen in first three months. HA to work with RAC committee members to design roles/responsibilities of said committee. Roles and responsibilities designed in first two committee meetings. HA to help each committee create timeline and standing agendas for their respective topics. Focus will be placed on any GETAC and/or DSHS required improvement processes as applicable to the respective committee. Protocols will be designed for each committee within first 2-3 meetings..

Goal #2: Assist SFRAC Board with Implementation of Action Items for Bylaws and System Plan per results of 2025 DSHS Self-Assessment.		
Health Access Goal: Assist SFRAC in implementation of SMART goals from 2025 DSHS Self-Assessment.		
TASKS	**HEALTH ACCESS PROPOSED ACTIVITIES/INTERVENTIONS**	**ESTIMATED TIMELINE**
1. With the SMART goals designed and submitted for each indicator within the DSHS Self-Assessment, HA will work with the SFRAC Board to design, develop, revise, refine, etc. the FY System Plan and Bylaws to implement actions/protocols needed for compliance with requirements.	1. HA will facilitate and work with each committee of the SFRAC Board to design, develop, revise, and refine the FY System Plan and Bylaws to implement actions and protocols needed for compliance with the SMART goals approved by DSHS for EMS/Trauma based on self-assessment. Committees will report their progress each Board meeting in FY2027. 2. Each Board meeting, the most updated System Plan will be reviewed for changes made per the SMART goals/objectives with protocols included and reviewed annually. 3. Bylaws will be revised and refined to include the PI committee, will define roles/responsibilities of each standing committee, and any additional revisions will be made to submit to the Board for final approval within the first 2 meetings of the FY. Bylaws will be reviewed annually thereafter and revisions approved by Board as needed.	HA will continue facilitating the work objectives with the SFRAC Board in the first meeting of FY2027. Each meeting thereafter will have representation of committee report outs of successes completed in development/ revision/refinement of FY System Plan and Board Bylaws as applicable.

Goal #3: Complete the 2027 DSHS Self-Assessment for the DSHS pre-determined scope for the SFRAC.		
Health Access Goal: Assist SFRAC in the comprehensive assessment of the pre-determined scope per DSHS for the 2027 Self Assessment year with defined SMART goals.		
TASKS	**HEALTH ACCESS PROPOSED ACTIVITIES/INTERVENTIONS**	**ESTIMATED TIMELINE**
1. Per the DSHS requirements (to be determined) for the 2027 Self-Assessment, HA will complete the comprehensive review and develop SMART goals for the SFRAC Board for approval and submission for the RAC compliance.	1. HA will facilitate the comprehensive review with the SFRAC Board based on the DSHS pre-determined scope for the Self-Assessment anticipated in 2027. 2. HA will work with the SFRAC Board members and RAC Administrator in workgroups to determine scoring criteria decisions and develop SMART goals that align with the compliance needs determined in the assessment. 3. HA will complete all SMART goals and scoring criteria with the RAC Administrator to submit to DSHS. In addition, we will work with the SFRAC Boad to determine the timeline for implementation of SMART goals for compliance needs.	HA will facilitate the comprehensive self-assessment for the SFRAC Boad and RAC Administrator based on the DSHS pre-determined scope/area chosen for FY2027.

Health Access, LLC Key Personnel for the HA Team:

Rhonda Stewart, Vice President will lead the Health Access team with oversight of all components of the project and will be the primary contact for the SFRAC Board Chair, SFRAC Administrator, and the workgroup points of contact. Ms. Stewart brings over 20 years of healthcare administration, program development/implementation, organizational assessment, and strategic planning experience to this team. She has worked with State, County, and local agencies in assessing systems of care and providing strategic recommendations for improving outcomes for various programs.

Stacy Cuzick, RN Director of Operations, will co-facilitate the project. Ms. Cuzick brings over 25 years of career experience working in hospitals, skilled nursing facilities, and various other clinical organizations leading their programs, clinic operations, and assessing systems of care to report to entities such as JCAHO and the State Department of Aging. Her experience working in hospitals and facilities that required assistance in transporting populations to emergency departments will be valuable in assisting the SFRAC Board with the SMART goals and objectives implementation in the FY System Plan and relevant Bylaws.

Shawne Patterson, RN Senior RN Consultant, will co-facilitate the project as well. Mrs. Patterson, prior to her work in healthcare consulting, was a former firefighter/paramedic and is well-versed in the world of EMS and Trauma systems. Her experience in healthcare consulting has expanded her review of systems of care and her experience allows her to provide insightful and manageable recommendations for improving health outcomes. Mrs. Patterson will assist with development, revision, and refinement of the SMART goals/objectives designed for EMS/Trauma with implementation assistance within the FY System Plan and relevant Bylaws.

ITEM 26-55 (TAB 11)

Seven Flags Regional Advisory Council
Trauma Service Area "T"

SFRAC Request for Action

The following Bylaws edits are presented for review and approval.

Action Item	Recommendation	Action	Approved/Not Approved
Action Item: Clean up SFRAC Bylaws document	a. Add current year to title on the title page b. Add footers to document c. Correct any misspellings d. Correct alignment of document	1. All applicable corrections and edits to be made.	
Action Item: Realign Bylaws to more closely mirror the DSHS-recommended set of RAC Bylaws	a. Rename and rearrange Articles (sections) with all included information to more closely mirror the DSHS-recommended Bylaws Articles. Definitions and required	1. Current SFRAC Bylaws Article I – "Authority;" change to "Name and Authority" 2. Add new Article II as "Definitions,"	

	information for each will be maintained.	along with DSHS-required information, found elsewhere in the existing SFRAC Bylaws 3. Current SFRAC Bylaws Article II – "Mission, Designated Jurisdiction and Purpose;" move title and all information within to Article III 4. Current SFRAC Bylaws Article III – "Membership;" move title and all information within to Article IV 5. Current SFRAC Bylaws Article IV – Board of Directors -- move title and all information within to Article VII 6. Create a new Article VI – "Executive Committee" and include EC	

		information found elsewhere in the Bylaws. 7. Current SFRAC Bylaws Article VI – "Meetings" --move title and all information within to Article VIII 8. Current SFRAC Bylaws Article VII – "Committees" -- move title and all information within to Article IX 9. Current SFRAC Bylaws Article VIII – "Fiscal Policies" --move title and all information within to Article X 10. Current SFRAC Bylaws Article IX – "Administrator" – move information into Article VI – "Executive Committee" 11. Current SFRAC Article X – "Corporate Records, Reports, and Seal" – move information	

		12. Current SFRAC Article XI – "Dissolution Clause – move information as final subsection to proposed Article IV "Membership" 13. Current SFRAC Article XIII – "Amended Bylaws" – move information as last section of current SFRAC Article XII – "Amendment of Bylaws" 14. SFRAC current section 13.01 – statement/date should be changed each time; adopt verbiage like "refer to dates listed below" 15. Rename Article XIII as "Proxies" with applicable information 16. Create new Article XIV – "Financial	

		Books and Records" with DSHS-required information 17. Create new Article XV – "Transactions of the Organization" with DSHS-required information 18. Current SFRAC Article XVII – "Signatory" move with all information to Article XVI 19. Rename current Article XVII to "Signatures" and move all applicable information here	
Action Item: Missing information in Article XIII – "Proxies" -- per required DSHS documentation	a. Define proxies and if used by the RAC. b. If proxies may be used, define process of voting by proxy and process of transferring voting rights.	1. Add statement: "The RAC does not utilize proxies, but alternate voters can be used." 2. Will pair with statement currently in the Bylaws, section 4.01 -- "An Alternate representative may	

		vote on behalf of a Board member. The presence of an Alternate meets attendance requirements."	
Action Item: Missing information in Article XV – "Transactions of the Organization" -- per required DSHS documentation	a. Define gifts the RAC may offer.	1. Add statement: "The RAC does not offer gifts of any kind."	
Action Item: Resolution and certification statement needed	a. Per DSHS-required documentation	1. Article XVI -- "Signatory" -- The board of directors should pass a resolution that formally grants a specific person (e.g., the CEO or CFO) the authority to sign certain documents on behalf of the entity; the resolution should clearly state the scope of the authority, including any monetary thresholds, types of documents, or other conditions;	

		2. Create a certification statement that can be appended to the bylaws, certifying that they were adopted by the board as of a specific date and are in full effect.	
Action Item: Article V – Officers -- add information regarding who has the authority to postpone meetings	a. This is a DSHS required component of the Bylaws	1. By law already states that a meeting may be rescheduled by the group if there is not a quorum, but additional information is needed (below): 2. Revise Article V of the Bylaws by adding verbiage that this primarily falls under the authority of the Chair, and the Administrator with the approval from the Chair to do so, when needed.	

Action Item: Article V – Officers -- add verbiage that minimally the Executive Committee must consist of the RAC Chair, RAC Vice-Chair, RAC Secretary, and RAC Treasurer.	a. This is a DSHS required component of the Bylaws	1. Revise Article V of the Bylaws by adding verbiage that minimally the Executive Committee must consist of the RAC Chair, RAC Vice-Chair, RAC Secretary, and RAC Treasurer.	
Action Item: Article VII (current) – Standing Committees -- add new PI Committee along with purpose, roles, responsibilities	a. All committees must be listed	1. Add PI Committee to list of committees 2. Revise Bylaws to include PI Committee purpose, role, responsibilities as written by the committee	
Action Item: Article VII (current) – Standing Committees – change name of Neonatal Committee to Perinatal Committee and add purpose, roles, responsibilities	a. Per DSHS Guidance	1. Change "Neonatal Committee" to "Perinatal Committee" 2. Revise Bylaws to include the Perinatal Committee purpose, role, responsibilities as	

		written by the committee	

ITEM 26-56 (TAB 12)

Seven Flags Regional Advisory Council
Trauma Service Area "T"

SFRAC Request for Action

Based on the SMART goals submitted to Texas DSHS in response to the SFRAC Self-Assessment, the following system plan edits are presented for review and approval. Other recommendations not based on SMART goals will be presented for review and approval in August 2026.

SMART Goal and Action Item	Recommendation	Actions	Approved/Not Approved
Smart Goal – Epidemiology - Surveillance ***Action Item***: PI committee included as standing committee and integrated into Bylaws; committee meetings would focus on data reviews with reports to Board during quarterly meetings on progress of QI projects selected.	a. This implementation in FY26 would meet the design of the committee, include PMs that are relevant to the goals of RAC for EMS and Trauma specifically b. Committee to be developed within three (3) months of initiative of this goal, included in FY System Plan updates	1. The PI committee will be included in the system plan, with a description of its functions and responsibilities.	

	and added to Bylaws for standing committee. Committee work to continue in each meeting with review of data and required report of PM progress at four (4) SFRAC Board meetings in a 12-month period.		
SMART Goal – System Plan ***Action Item***: Board Committees will review FY System Plan annually and incorporate revisions based on regional demographics, the completed self-assessment, resources available, and data analyses that align with the RAC performance criteria (performance measures)responsibility is indoctrinated into the roles/responsibilities of each committee. Revision of the FY System Plan annually allows the Board and committees to review and reflect on successes and challenges and incorporates data reviews to assess additional access needs, trainings, etc. that may be required in the RAC service area	a. Complete and document the revisions to the FY System Plan with demographic data, maps, system utilization trends, resources, and assessments of performance measure outcomes annually b. Use hybrid meeting formats for RAC committees with designated facilitators to promote active participation in the review and revisions of the FY System Plan; revise Bylaws to ensure this responsibility is indoctrinated into the roles/responsibilities of each committee c. Conduct at least four (4) planning sessions with committees over a 12-month period (FY) to analyze data from performance measures;	1. Revise Bylaws to ensure this responsibility is indoctrinated into the roles/responsibilities of each committee. 2. Conduct four planning sessions to review System Plan and incorporate/implement recommended revisions.	

	annually review FY System Plan and incorporate/implement recommended revisions		
SMART Goal – System Plan ***Action Item***: Develop and distribute a standardized performance criteria document outlining benchmarks, timelines, reporting formats, and compliance expectations for performance measures selected by PI committee. Complete dissemination and stakeholder acknowledgment within 60 days of System Plan updates annually approved by Board.	a. Utilize electronic communication and stakeholder meetings to complete dissemination (PI committee meeting minutes and shared on website)	1. Disseminate committee meeting minutes on shared website.	
SMART Goal: System Plan ***Action Item***: Incorporate a standardized protocol for RAC that details how it will disseminate all-hazard emergency preparedness and response information to regional stakeholders. Finalize and implement the protocol within 90 days of EMS and Trauma sections of FY System Plan are reviewed and revised to include HPP report/plan.	a. Use of existing communication platforms, RAC website, and integrate this into the protocol within the System Plan; review annually for successes and challenges.	1. Incorporate a standardized protocol for RAC that details how it will disseminate all-hazard emergency preparedness and response information to regional stakeholders.	

SMART Goal: System Plan **Action Item**: RAC to define standardized high-level protocol for review and implementation design for new evidence-based guidelines as applicable to the regional EMS and Trauma systems. As new evidence-based guidelines are shared within the Region, RAC will determine which can be achieved and sustained with current systems and will use protocol to implement design and share information with stakeholders for implementation. Development of protocol for reviewing new evidence-based guidelines to be completed in 90 days; implemented protocol into FY System Plan upon Board approval; as new evidence-based guidelines are shared by HPP or GETAC, Board will disseminate guidelines for RAC review with committees. Upon implementation/approval of any new evidence-based guideline, RAC will provide stakeholders with designed implementation plan, will include this in the FY System Plan, and disseminate all relevant information through communication portals (meetings, website, etc.)	a. Protocol development will be assigned to existing RAC committees (EMS/Pre-hospital Committee and Trauma/Injury Prevention Committee) with timeline for final protocol to be reviewed with Board for approval at Aug/Sept meeting. Upon approval of Board, protocol incorporated into FY System Plan and reviewed annually thereafter. New evidence-based guidelines approved by RAC for implementation will be incorporated into FY System Plan in appendices.	1. Approval in Aug/Sept of protocol development to incorporate into FY System Plan and review annually thereafter.	
SMART Goal: System Plan ***Action Item***: Define in FY System Plan how report from HPP is used to	a. Communication with Coastal Bend HPP for report access and where applicable, pull local data from M-track to	1. Pull local data from M-track to review/monitor capabilities at	

monitor the capabilities and capacity for EMS and designated facilities in the RAC. Include protocol for review in M-track system locally when HPP report is not available. Incorporate this monitoring activity in roles/responsibilities of RAC committees for dissemination of information/data analysis to Board. Include HPP report in FY System Plan annually; committees to review M-track data at least four (4) times per year for reporting issues/successes to Board.	review/monitor capabilities at least four (4) times per year. b. Review of HPP and/or M-track local data to monitor capabilities and capacity for EMS and designated facilities to occur quarterly by committees for reporting to Board.	least four (4) times per year.	
SMART Goal: System Integration ***Action Item***: Include RAC medical advisory structure in the bylaws with integration of specialty services and provide updated list of members in FY System Plan by Nov 2025. Include review of structure and member listing with specialties noted at least four (4) times per year. Medical advisory group structure within bylaws and incorporating review of members list to be completed starting Nov 2025; four (4) times per year reviews thereafter with revisions made as applicable.	a. Review of structure and member listing in FY System Plan will be done at least four (4) times per year. b. RAC members are designed to ensure representation of various specialties.	1. Review of structure and ensure representation of various specialties.	
SMART Goal: System Integration ***Action Item***: Incorporate language into FY System Plan to include how RAC	a. Added language into System Plan by Dec. 2025, with minimal review of action steps to ensure protocol is still valid	1. Develop this language (done?) 2. Possibly add info into System Plan	

integrates other healthcare systems into regional committees and projects as applicable by Dec 2025. Establish language into System Plan by Dec. 2025 with reviews conducted to ensure other healthcare organizations are identified and listed in resources at least four (4) times per year.	in region at least four (4) times per year thereafter. b. Ensure system plan is inclusive and reflects the full continuum of care.		
SMART Goal: EMS/Prehospital ***Action Item***: Create resource list in FY System Plan to include the protocol that medical directors are included in the planning. Timebound lists are finalized within 90 days and reviewed at each RAC committee meeting at least four (4) times per 12-month period	a. The resource list will be developed by the EMS prehospital RAC committee with medical directors incorporated in the planning and report will happen at each board meeting; b. Based on input from directors, data review, and leadership direction c. Ensure the committee is focused on high-impact initiatives	1. Develop the language and add.	
SMART Goal: EMS/Prehospital ***Action Item***: Incorporate language and appendix to the FY System Plan that provides the criteria in place for the MCI and tabletops and will incorporate a training calendar of events as part of the appendix. Incorporate into FY System Plan and report to the board within six (6) months.	a. RAC committee will look at the criteria working with the stakeholders to ensure all is updated and reported to the Board at four (4) meetings in a 12-month period. b. Training wide events are currently occurring; incorporate language into FY System Plan and annual report.	1. Update criteria for MCI and tabletops and report to Board. 2. Incorporate language of training wide events into FY System Plan and annual report.	

SMART Goal: System Coordination and Patient Flow ***Action Item***: Actively review and develop new criteria based on September 1st new rules. Review completed criteria within 60 days of the September 1st new rules and PI committee will review data set.	a. Add as project improvement plan for PI committee review. b. Led by trauma program director or quality team with ED support.	1. Review and complete any new criteria based on Sept 1st new rules.	
SMART Goal: System Coordination and Patient Flow ***Action Item***: Incorporate all current readiness information/protocols for bariatric, homeless housing, behavioral health, and non-English Speaking into the FY System Plan. Complete at each of the four (4) RAC committee meetings in a 12-month period.	a. The committee will review the current readiness protocol for each in their meetings and report to the board. b. Collect all regional guidelines for all unique populations in the region, including all case management opportunities to add to the protocol.	1. Incorporate all current readiness information/protocols for bariatric, homeless housing, behavioral health, and non-English Speaking into the FY System Plan.	
SMART Goal: Prevention and Outreach ***Action Item***: EMS and prehospital committee will gather and review all existing top five (5) injury guidelines; review existing and new guidelines at every meeting. Incorporate using an appendix into the FY System Plan within nine (9) months. Each board meeting and RAC committee will provide as applicable.	a. RAC Committee will meet four (4) times in a 12-month period to review existing guidelines with stakeholder input. b. Use RAC Committee existing meetings and involve existing advisory structures for guideline updates.	1. Update guidelines	
SMART Goal: Prevention and Outreach	a. Include peer-reviewed protocols, QI project results,	1. Include peer-reviewed protocols	

Action Item: Incorporate current system improvement case study protocols into FY System Plan, with inclusion of case reviews completed annually in the SFRAC Annual Report. Case reviews will be reported during committee reports at board meetings four (4) times in a 12-month period.	or clinical guideline updates in the FY System Plan and Annual Report.		
SMART Goal: Rehabilitation ***Action Item***: Review and update current resource list of regional protocols and incorporate into System Plan as an appendix. Protocol resource list will be finalized and included in System Plan within three (3) months. Resource list will be reviewed and updated at all board meetings at least four (4) times in a 12-month period to maintain a current list at all times	a. Review and update current resource list of regional protocols and incorporate into System Plan as an appendix. b. Resource list is updated at every meeting, at least four (4) times within a 12-month period.	1. Update resource list of regional protocols and incorporate into SP.	
SMART Goal: Emergency Response ***Action Item***: Incorporate current protocol information into the SFRAC FY System Plan to coordinate and prepare for disaster plans every three (3) years and tabletops annually. Framework finalized and distributed within 90 days.	a. Ensure that all plans and tabletops are reported to SFRAC members and submitted to SFRAC leadership for inclusion in the SFRAC FY System Plan annually through the connection with HPP, or as required.	1. Report plans and tabletops	
SMART Goal: Emergency Response	a. Ensure that the contact list is added to the appendix for the	1. Add contact list to appendix	

Action Item: Incorporate current HPP Resource Assessment into the SFRAC FY System Plan for MCIs. Stakeholder engagement within 60 days.	SFRAC System Plan, to ensure communication and sharing availability of SFRAC and HPP meeting schedules and agendas. b. SFRAC will use Board of Director meetings and existing committees to report updates provided by HPP.	2. Report updates to Board of Director meetings	
SMART Goal: Emergency Response ***Action Item***: Ensure that the current HPP communications for an all-hazard response is incorporated into the SFRAC FY System Plan and PI Plan. Make sure this is completed within 30 days of coordination with HPP	a. Updates by HPP will be reported during each of the four (4) SFRAC Board meetings in a 12-month period. b. Use tabletop, hybrid, or live field exercise formats.	1. Ensure current HPP communications is incorporated into the FY System Plan.	
SMART Goal: Regional System Performance Improvement ***Action Item***: Design and implement a regional system Performance Improvement Plan. Review of data sets for selected QI projects will be conducted at each PI committee meeting with changes noted to objectives as applicable; data reported for regional/stakeholder participants to show results of QI activities in relation to PM goal; all data reported to Board for successes, challenges, and innovative activities being conducted. As goals are achieved	a. Selection of no more than two (2) Performance Measures for EMS and Trauma each with goals designed for achievability and objectives/action items noted using QI process mapping to determine successes and challenges. Reviewed at each PI committee meeting with stakeholder dedication to provide data from their internal systems to show successes/challenges in	1. Select two performance measures using QI process mapping to determine successes and challenges.	

for QI projects, new PMs are selected by PI committee. Outcomes included in regional annual report.	relation to DSHS annual data sets for baseline outcomes. b. PI projects are noted to be defined in the FY22 System Plan; PI committee will define relevant performance improvement projects for EMS and Trauma based on data.		
SMART Goal: Regional System Performance Improvement ***Action Item***: Develop/Implement PI Committee and standardize committee responsibilities for reviewing EMS, trauma, and system of care outcomes. PI Committee to determine at least two (2) performance measure metrics for EMS and Trauma each with baseline data and set performance goals with objectives to track success. PI Committee implemented within first three (3) months of this SMART objective; PMs selected will be measured and reported at each PI committee with actionable items changed as challenges are noted. All PM goals will be designed with times defined (e.g., Wall times will be increased by 2% annually). PMs with outcomes will be reported at four (4) Board meetings in a 12-month period.	a. PMs selected will include baseline data with goals for regional EMS and Trauma to achieve using annual DSHS data; regional area support of EMS and Trauma stakeholders to provide local data sets to show success/challenges in achieving goal with objectives/activities measured/reviewed each PI committee meeting. b. Objectives for PMs will be designed by EMS and Trauma stakeholders to ensure achievability and design of improvement processes will be supported by data provided. c. Short- and long-term goals in FY22 System Plan will be achieved by creation of PI	1. Develop/Implement PI Committee and standardize committee responsibilities 2. Determine at least two (2) performance measure metrics for EMS and Trauma each with baseline data and set performance goals with objectives to track success 3. Short and long term goals for FY System Plan.	

	committee; continued relevance will be supported by PMs selected and measured through PI committee for EMS and Trauma starting.		
SMART Goal: Data Management ***Action Item***: Develop Regional Performance Improvement Plan incorporating data management plan and system performance improvement plan processes. Regional PI Plan to be developed by PI committee within first three (3) months of committee implementation; PI Plan will be reviewed no less than annually and will be included in annual report and updated in System Plan.	a. Regional Performance Improvement Plan to incorporate the performance measures selected for EMS and Trauma with clear measurable metrics and data process reporting outlined for use by the PI committee. b. Regional Performance Improvement Plan will be a living document updated with outcomes for each PM selected for EMS and Trauma, will be updated as new goals/PMs are selected and as PMs are reporting trends of outcomes. c. Goals of RAC are to incorporate this into Regional System Plan and incorporate Improvement Plan with outcomes reported at least four (4) Board meetings in a 12-month period by PI committee.	1. Incorporate performance measures. 2. Update outcomes for Regional Performance Improvement Plan.	

SMART Goal: Regional Research & Publications ***Action Item***: Performance Improvement (PI) Committee will be implemented to review regional data and quality improvement processes; responsible for reviewing regional data and designing quality improvement processes. Committee will review first data set within three (3) months of initiative of this goal and continue to review and report PM progress at no less than four (4) SFRAC Board meetings in a 12-month period.	a. Performance measures (at a minimum two (2) each) will be reviewed using QI project activities to measure progress. b. PI committee will be comprised of stakeholders and will focus on data reviews with reports to Board during at least four (4) meetings in a 12-month period on progress of QI projects. c. Implementation of FY 26 PI measures will be developed by committee and will include PMs that are relevant to the goals of RAC for EMS and Trauma specifically.	1. Use QI project to measure performance. 2. Focus on data reviews and report to Board 3. Implement FY26 PI measures	

ITEM 26-57 (TAB 13)

ITEM 26-57-a. (TAB 13)

FY26 SFRAC Membership Summary

TSA	Entity Name	County	Application submitted	EMS Affidavit Submitted	Needs Assessment Submitted	Date Paid/Date Deposited	Check Number	Amount Due/Paid	Board Meeting (9/24/2025)	No Board Meeting (10/2025)	No Board Meeting (11/2025)	No Board Meeting (12/2025)	Board Meeting (1/29/2026)	No Board Meeting (2/2026)	No Board Meeting (3/2026)	Board Meeting (4/30/2026)	No Board Meeting (5/2026)	No Board Meeting (6/2026)	No Board Meeting 07/2026	Board Meeting (08/28/2026)
T	Primary Care Ambulance (Fully Vested)	Webb	Yes	Yes	Yes	10-29-2025/ 10-29-2025	#1438	FY26 Membership Fees: $750/Paid: $7500/Bal. $0	P				P			P				
T	Angel Care Ambulance, LCC (Fully Vested)	Webb	Yes	Yes	Yes	10-30-2025/ 10-31-2025	#2225	FY265 Membership Fees: $750/Paid: $750 Bal/ $0	P				P			P				
T	Bronze Star Ambulance Service, LLC (Fully Vested)	Webb	Yes	Yes	Yes	10-21-2025/ 10-22-2025	#6457	FY26 Membership Fees: $750/Paid: $750.00 / Bal. $0	P				P			A				
T	City of Laredo Fire Department (Fully Vested)	Webb	Yes	Yes	Yes	10-22-2025/ 10-22-2025	#671266	FY26 Membership Fees: $750/Paid: $750/Bal. $0	P				P			P				
T	Doctors Hospital of Laredo (Fully Vested)	Webb	Yes	N/A	Yes	10-2-2025 / 10-14-2025	#062136168	FY26 Membership Fees: $1,950/Paid: $1950/Bal. $0	P				P			P				
T	Lalitas Ambulance Care (Membership Initiated (Fully Vested)	Webb	Yes	Yes	Yes	02-09-2026/ 02-19-2026	#1592	FY26 Membership Fees: $750 / Paid: $7500/ Bal. $0	P				P			P				
T	Laredo Lifeline, LLC (Fully Vested)	Webb	Yes	Yes	Yes	9-24-2025/ 10 6-2025	#20252	FY26 Membership Fees: $750/Paid: $750/Bal. $0	P				P			A				
T	Texas Superior Ambulance (Fully Vested)	Webb	Yes	Yes	Yes	12-12-2025/ 12-16-2025	#4075	FY26 Membership Fees: $750 /Paid: $750/Bal. $0	P				P			P				
T	Laredo Medical Center (Fully Vested)	Webb	Yes	N/A	Yes	11-1-2025/ 11/1-2025	#5000222784	FY26 Membership Fees: $1,950/Paid: $1,950/Bal $0	P				P			P				
T	Priority EMS (Fully Vested)	Webb	Yes	Yes	Yes	10-1-2025/ 10 14-2025	#837	FY26 Membership Fees: $750/Paid: $750/Bal. $0	P				P			P				
T	Medpoint Ambulance, Inc. (Fully Vested)	Webb	Yes	Yes	Yes	02-25-2026/ 02-26-2026	#5000	FY26 Membership Fees: $750/Paid: $7500/ Bal. $0	P				P			P				
T	Victorious Care Ambulance (Fully Vested)	Webb	Yes	Yes	Yes	02-09-2026/ 02-12-2026	#6195	FY26 Membership Fees: $750/Paid: $750/ Bal. $0	P				P			P				

FY26 SFRAC Membership Summary

T	Webb County Volunteer Fire/EMS (Fully Vested)	Webb	Yes	Yes	Yes	10-31-2025/ 11-1-2025	#71294	FY26 Membership Fees: $750/Paid: $7500/ Bal. $0	A				P			P				
T	Skyline EMS, (Fully Vested)	Jim Hogg	Yes	Yes	Yes	09-08-2025/ 09-22-2025	#13164	FY26 Membership Fees: $750/Paid: $750/ Bal. $0	P				P			P				
T	Zapata County Fire/EMS (Fully Vested)	Zapata	Yes	Yes	Yes	10-8-2025/ 10 27-2025	#14241	FY26 Membership Fees: $750/Paid: $0/750 Bal. $0	P				P			P				
T	Villa Ambulance Service (Fully Vested)	Webb	Yes	Yes	Yes	10-30-2025/ 10-31-2025	#2646	FY26 Membership Fees: $750/ Paid: 750/ Bal. $0	P				P			A				
T	Digni Care Ambulance (Joined: April 30, 2024/Fully Vested May 1, 2025)	Webb	Yes	Yes	Yes	9/11/2025/ 9-11-2025	#1270	FY26 Membership Fees: $750/ Paid: $750/ Bal. $0	P				P			P				
T	United Med Care Ambulance (Joined: September 30, 2024/Fully Vested September 30, 2025)	Webb	Yes	Yes	Yes	09-16-2025/ 9 16-2025		FY26 Membership Fees: $750/ Paid: $750/ Bal. $0	A				P			P				
T	Texas Ambulance Response Team (Joined: September 24, 2025)	Webb	Yes	Yes	Yes	9-24-2025/ 10 6-2025	#1464	FY26 Membership Fees: $687.50/ Paid: $687.50/ Bal. $0	P				P			P				
T	Gateway Ambulance (Joined as a Non-Participating Entity)	Webb	N/A	N/A	N/A	N/A	N/A	N/A	P				P			P				
	(a) ***Payment of Membership Dues:*** All members must be current in the payment of their membership dues. Members who remain delinquent in the payment of SFRAC dues by the 1st of March of any given fiscal year will be considered a Member Not in Good Standing and, therefore, will not be eligible for funding for the following fiscal year.																		

ITEM 25-58 (TAB 14)

Seven Flags Regional Advisory Council
Trauma Service Area - T

May 6, 2026

Elizabeth Stevenson, R.N.
Designation Program Manager
Texas Department of State Health Services EMS/Trauma Systems
PO Box 149347 MC 1876
Austin, TX 78714-9347

Re: Laredo Medical Center RAC Participation Confirmation Letter (PCR/Maternal).

Dear Ms. Stevenson:

This letter is to confirm that Laredo Medical Center is an active participant with the Seven Flags Advisory Council (SFRAC) and in good standing with the organization. Attendance of the SFRAC Board meetings by Laredo Medical Center's representatives is in compliance with SFRAC attendance rules, as well as the submittal of required documentation and payment of SFRAC membership dues. All documentation associated with Laredo Medical Center's active participation, and "Good Standing" status are on file with the Seven Flags RAC and available for your review at any time.

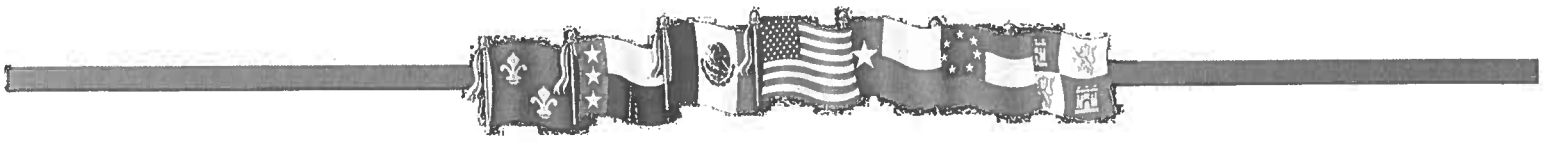
Furthermore, Laredo Medical Center's involvement with the Seven Flags RAC includes active participation among the SFRAC's various committees, inclusive of the Maternal Committee, in which Ms. Maria Santillan BSN, RN, Laredo Medical Center's Maternal Program Manager, serves as chairman of this committee.

Should you have any questions or require additional information please feel free to contact me at your earliest convenience at 956-722-3995 or via email at admin@sevenflagsrac.org

Sincerely,

John R. Keiser
SFRAC Administrator (TSA-T)

Encl: Attendance Record
Cc: SFRAC File



Seven Flags Regional Advisory Council
Trauma Service Area - T

May 6, 2026

Elizabeth Stevenson, R.N.
Designation Program Manager
Texas Department of State Health Services EMS/Trauma Systems
PO Box 149347 MC 1876
Austin, TX 78714-9347

Re: Doctors Hospital of Laredo RAC Participation Confirmation Letter (Trauma).

Dear Ms. Stevenson:

This letter is to confirm that Doctors Hospital of Laredo is an active participant with the Seven Flags Advisory Council (SFRAC) and in good standing with the organization. Attendance of the SFRAC Board meetings by Doctors Hospital's representatives is in compliance with SFRAC attendance rules, as well as the submittal of required documentation and payment of SFRAC membership dues. All documentation associated with Doctors Hospital's active participation, and "Good Standing" status are on file with the Seven Flags RAC and available for your review at any time.

Furthermore, Doctors Hospital's involvement with the Seven Flags RAC includes active participation among the SFRAC's various committees, inclusive of the Trauma/Injury Prevention Committee, in which Ms. Letisia Colon BSN, RN, Doctors Hospital's Trauma and Emergency Coordinator, serves as chairman of this committee.

Should you have any questions or require additional information please feel free to contact me at your earliest convenience at 956-722-3995 or via email at admin@sevenflagsrac.org

Sincerely,

John R. Keiser
SFRAC Administrator (TSA-T)

Cc: SFRAC File