



**HUMANE SOCIETY
VETERINARY MEDICAL
ASSOCIATION.**

October 21, 2021

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Honorable Julie Alexander, Chair
House Agriculture Committee
N-998 House Office Building
PO BOX 30014
Lansing, MI 48909-7514

Honorable Jim Lilly, Chair
House Rules and Competitiveness Committee
374 Capitol Building
PO BOX 30014
Lansing, MI 48909-751

RE: HSVMA VETERINARY OPPOSITION to House Bill 4912, UNLESS AMENDED

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Derry, NH

Dear Chairs Alexander and Lilly:

On behalf of our more than 250 Michigan veterinary professional members, the Humane Society Veterinary Medical Association (HSVMA) is writing to express our opposition to House Bill 4912 unless amended. More specifically, we are requesting the inclusion of an amendment aligning the term "sufficient knowledge of the patient" with the rules adopted by the Michigan Board of Veterinary Medicine on April 15, 2021.

House Bill 4912, as written, Section 18818(1)(b) stands in direct conflict with the landmark rules (R 338.4901A) issued in April 2021 by the Licensing and Regulatory Affairs Board of Veterinary Medicine regarding telehealth services. Prior to the rules being adopted in April, the Michigan Veterinary Medical Association had reported the success that some veterinary practices had had in offering telehealth services, which prompted the Board to update the code and clarify the rules relating to the use of telemedicine to care for Michigan pets. Rolling back this important option may cause unnecessary harm to companion animals across the state.

We estimate that at minimum more than 630,000 pets are living with their families in poverty across Michigan—pets that could benefit greatly from access to quality veterinary care. This immense number accounts only for those living at or below the federal poverty line; it doesn't account for the thousands more hovering just above that line and still facing financial challenges. Additionally, our country is experiencing a widespread veterinary professional shortage.



Together, limited access and sparse availability of appointments has intensified an already difficult situation for people living in rural areas or in underserved communities without access to personal transportation.

Removing barriers to veterinary services will help create equity in access to pet resources and information for people living in underserved, and often overlooked, communities. With the average cost of a preventative veterinary care visit estimated at approximately \$250 and emergency visits often running upwards of \$500, it is no surprise that families struggling financially often have difficulty accessing pet medical services, especially if their pet becomes sick or injured unexpectedly. By expanding access to telemedicine, more families will be able to obtain important veterinary services, particularly families living in communities, both rural and urban, where there are no neighborhood veterinary hospitals or clinics.

Veterinarians have undergone rigorous education and training, and we should be trusted to exercise good judgement in our practice, including in the utilization of telemedicine. Telemedicine and the use of electronically transmitted images and medical records can help increase access to veterinary services and allow for more flexibility in treating patients, especially those whose caregivers may have limited mobility or other transportation challenges. While we acknowledge that a legitimate need exists for routine veterinary consultation and treatment of non-emergent pet medical issues in person, allowing virtual care means that more pet owners, no matter their circumstances, will be able to access vital services and help assure the health and wellbeing of their companion animals.

Given these many benefits, we support allowing veterinarians to use their professional judgement to determine whether a patient can be diagnosed and/or treated through telemedicine. However, we also recommend the committee considering requiring safeguards for establishing a VCPR through electronic means, including:

1. Require the veterinarian to establish a relationship with the client/patient via real-time video (visual) exchange.
2. Require the veterinarian to give clients the option to alternatively have an in-person visit.
3. Require the veterinarian to obtain written consent from clients to use telemedicine.
4. Require the clinic to be available for in-person follow up if needed.
5. Establish controls/restrictions on writing prescriptions for controlled substances.
6. Maintain or establish physical examination/in-person veterinary visitation requirements for commercial enterprises, including any entity operating as a Large-scale Dog Breeding Kennel under Michigan Penal Code Act 287 and Regulation 151.



These provisions will help ensure that all parties are protected, and that their best interests are considered. Most importantly, it will be left to veterinarians' discretion as to whether or not we choose to use telemedicine as a tool to reach more people and pets. **We are not advocating for any mandate by the legislature or the Board to require veterinarians to offer telemedicine services.**

We thank the committee for your attention to this important issue and urge the committee to consider amending H.B. 4912 to reflect the language promulgated by the Michigan Board of Veterinary Medicine on April 15, 2021, regarding the definition of 'sufficient knowledge of the patient.' There are a variety of reasons why increasing the flexibility of telehealth services can expand critical care to people and their pets, and the outcomes have proven to be lifesaving without causing undue harm to animal patients. These changes will bring greater access to veterinary care to Michigan pet owners for their companion animals and allow veterinarians to better serve Michigan communities.

Sincerely,

Barbara Hodges, DVM, MBA
HSVMA Program Director, Advocacy and Outreach

cc. Members of the House Agriculture Committee and House Rules and Competitiveness Committee

