

September 23, 2020

Rep. Hank Vaupel
Chair, House Health Policy Committee
Members of the House Health Policy Committee
House of Representatives
P.O. Box 30014
Lansing, MI 48909-7514

RE: House Bill 6195

Dear Rep. Vaupel and Members of the House Health Policy Committee:

Michigan Humane is submitting this testimony in regard to House Bill 6195. We are grateful to you for introducing the bill, scheduling it for a hearing, and for allowing us to share the following information.

Michigan Humane is the largest and oldest animal welfare organization in the state with hundreds of thousands of constituents and supporters statewide. Michigan Humane works to improve and save lives through compassionate care, community engagement, and advocacy for animals. Michigan Humane is a private, nonprofit organization and is not affiliated with any national humane organizations nor any local or regional humane societies or SPCAs.

The initial draft of HB 6195 was the product of a collaboration between Michigan Humane and the Michigan Veterinary Medical Association to update Michigan's Veterinary Medical Practice Act (VMPA). Of primary importance to Michigan Humane is the amendment related to veterinarian mobility.

Veterinarian Mobility

One of the proposed amendments to the VMPA would allow a veterinarian or veterinarian technician in good standing in another state to obtain a temporary license to practice in Michigan within 48 to 72 hours.

One of the many lessons from our current global crisis is the importance of being prepared. When it comes to preparing for a situation where a large number of animals are suffering – be it from a disease outbreak, a natural disaster, or a case of cruelty or neglect – one of the most important resources would be a team of veterinarians trained to handle the situation. However, there is no guarantee that the location of a crisis impacting animals would have enough veterinarians available and trained to respond to the challenge. For that reason, a key aspect of a state's preparation for dealing with an animal-related disaster is a statute that provides for veterinarian license mobility.

The importance of license mobility was reinforced during Michigan Humane's response to Hurricane Harvey in 2017 in Houston, Texas. Dr. Robert Fisher, who has experience and special training in responding to disasters involving animals, was part of the Michigan Humane team deployed to assist in the wake of Hurricane Harvey. He was able to complete a straightforward online application and obtain a temporary license to practice veterinary medicine in Texas before leaving Michigan.

There may not be a sufficient number of local veterinarians who have the necessary training and experience in shelter medicine, FEMA emergency management protocols, and emergency medicine who are able to leave their practices for days or weeks to work without pay to assist in an emergency. For that reason, a statute that provides access to out-of-state veterinarians qualified and available to help is critical to effective disaster response. The responding veterinarians in no way displace local practitioners, and in fact, they typically work together in some capacity.

In addition to Texas, which was noted above as providing temporary veterinarian licensure, other states, including California, Illinois, and New York, also allow out-of-state veterinarians to obtain a temporary license to assist with cruelty cases, disaster relief, or both. Michigan should be similarly prepared.

Other Amendments to the VMPA

Michigan Humane does have some concerns with the other amendments to the VMPA, which differ significantly from the original draft and would be very detrimental in the context of providing veterinary medicine in a shelter or on behalf of a rescue. We have previously shared those concerns and have attached our requested changes and feedback.

Michigan Humane respectfully requests that the House Health Policy Committee adopt our requested changes to HB 6195 and vote to send it to the House floor.

Thank you very much for your time and consideration.

Very truly yours,

Ann M. Griffin Director, Advocacy

Michigan Humane - Feedback on HB 6195 (September 22, 2020)

Sec. 16215

(5) (b) The supervision required under subsection (1) includes that degree of close physical proximity necessary for the supervising veterinarian to observe and monitor the performance of the individual to whom the performance of the act, task, or function is delegated.

The delegating veterinarian shall observe and monitor the performance of the delegated procedures to the extent necessary to ensure that the activities of the delegatee are within the scope of the orders, assignments, or prescriptions of the veterinarian.

(c) A licensed veterinarian who in good faith engages in the practice of veterinary medicine by rendering or attempting to render emergency or urgent care to a patient when a client cannot be identified or provides care to a patient in the custody of a shelter or rescue when a client cannot be identified, and a veterinarian-client-patient relationship is not established, may delegate the performance of an act, task, or function and should not be subject to penalty based solely on the veterinarian's inability to establish a veterinarian-client-patient relationship.

Sec. 18802

(4) "Direct supervision" – defined in the context of supervising a student; this was not part of the original draft.

Sec. 18805

(3) "Supervision" includes that degree of close physical proximityobservation and monitoring necessary for the supervising veterinarian to observe and monitorensure that the performance of a veterinary technician delegatee is within the scope of the orders, assignments, or prescriptions of the veterinarian.

(Veterinary technician is not defined. Tasks could be delegated to a person who is not an LVT.)

Sec. 18817

- (1) Except as otherwise provided in subsections (3) and (X), ...
- (X) A licensed veterinarian who in good faith engages in the practice of veterinary medicine by rendering or attempting to render emergency or urgent care to a patient when a client cannot be identified or provides care to a patient in the custody of a shelter or rescue when a client cannot be identified, and a veterinarian-client-patient relationship is not established, may engage in the practice of veterinary medicine and should not be subject to penalty based solely on the veterinarian's inability to establish a veterinarian-client-patient relationship.

Telehealth/telemedicine:

Here is the MVMA's current guidance on telemedicine in the absence of a vcpr rule in Michigan: https://www.michvma.org/resources/Documents/COVID-19/FAQ%202%20Final%20Telehealth%20Opinion%20SLB%20NF%203.25.20.pdf

If Michigan establishes a vcpr rule and we have another statewide emergency like COVID-19, the Governor would have to specifically suspend the restrictions on telehealth in veterinary medicine by executive order.

Section 18817(b) specifically disallows telehealth by saying that "sufficient knowledge" of the patient can't be determined by telehealth (i.e. it has to be in person). While the emergency provision and the drafted shelter/rescue exemption above are designed to create specific exemptions, there is a growing sentiment in favor of telehealth in light of the current pandemic and also because of access to care issues nationally due to owner economic hardship, a shortage of veterinarians, geographic disadvantage etc. This may not be the time to restrict telehealth, given that this draft was initiated long before the pandemic.