# Legislative Analysis



## VETERINARIAN-CLIENT-PATIENT RELATIONSHIP

Phone: (517) 373-8080 http://www.house.mi.gov/hfa

House Bill 4220 (H-3) as reported from committee

Sponsor: Rep. Joseph A. Aragona

Analysis available at http://www.legislature.mi.gov

House Bill 4221 as reported from committee

Sponsor: Rep. Laurie Pohutsky

Committee: Regulatory Reform 2nd Committee (HB 4221): Rules

**Complete to 11-12-25** 

## **SUMMARY:**

<u>House Bill 4220</u> would amend the Public Health Code to provide that engaging in the *practice* of veterinary medicine can take place only in the context of a veterinarian-client-patient relationship. The bill would prescribe the elements that must be met for that relationship to be established and would allow for the use of telehealth visits under certain conditions.

## The *practice of veterinary medicine*<sup>1</sup> means:

- Prescribing or administering a drug, medicine, treatment, or method of procedure; performing an operation or manipulation; applying an apparatus or appliance; or giving an instruction or demonstration designed to alter an animal from its normal condition.
- Curing, ameliorating, correcting, reducing, or modifying a disease, deformity, defect, wound, or injury in or to an animal.
- Diagnosing or prognosing, or both, a disease, deformity, or defect in an animal by a test, procedure, manipulation, technique, autopsy, biopsy, or other examination.

Subject to federal law, the bill would provide that all the following requirements must be met for a *veterinarian-client-patient relationship* to be established:

- The veterinarian must assume responsibility for making clinical judgments regarding the health of the animal and the need for medical treatment.
- The veterinarian must have current knowledge of the animal to initiate, at a minimum, a general or preliminary diagnosis of its medical condition. This knowledge could be obtained by any of the following means:
  - o Conducting an in-person examination of the animal.
  - o Conducting an examination of the animal through *telehealth* using real-time interactive audio and visual electronic technology.
  - O Making a medically appropriate and timely visit to the premises where the animal or a group of animals is kept.

Telehealth would mean the use of electronic information and telecommunication technologies to support or promote long-distance clinical health care, patient and

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<sup>&</sup>lt;sup>1</sup> Section 18814 includes exemptions. <a href="https://www.legislature.mi.gov/Laws/MCL?objectName=mcl-333-18814">https://www.legislature.mi.gov/Laws/MCL?objectName=mcl-333-18814</a>

professional health-related education, public health, or health administration. It could include telemedicine as defined in the Insurance Code.<sup>2</sup>

A veterinarian could not conduct a telehealth examination if either of the following applies:

- The animal is *not* a companion animal (that is, it is not a service animal<sup>3</sup> or an animal commonly considered to be, or considered by its owner to be, a pet), unless the veterinarian has current knowledge of the animal as described above (through an inperson or telehealth examination or a medically appropriate and timely visit to the applicable premises).
- The veterinarian is performing the examination to issue an interstate certificate of veterinary inspection or a *pet health certificate*.

Pet health certificate would mean a certificate in a form prescribed by the director of the Michigan Department of Agriculture (MDARD) in which a veterinarian attests to the species, age, sex, breed, and description of an animal; any medical conditions of the animal; any medical treatment and vaccinations that the animal received while under the control of a pet shop or large-scale dog breeding kennel; and the fact that at the time of the preparation of the certificate the veterinarian examined the animal and found the animal free from visual evidence of communicable disease.

All the following would apply to a telehealth examination of an animal:

- When conducting an examination through telehealth, the veterinarian must use instrumentation and diagnostic equipment through which an image and a medical record can be transmitted electronically.
- The veterinarian must be readily available, or arrange for emergency coverage, if the animal experiences an adverse reaction or the treatment regimen for the animals fails.
- If the veterinarian, the owner, or a *qualified individual* has concerns about the animal's health that cannot be addressed through telehealth, the veterinarian must encourage the animal's owner to schedule an in-person follow-up exam to be conducted within 90 days.
- The owner of the animal or the qualified individual may request an in-person followup evaluation with the veterinarian conducting the telehealth examination.

If the veterinarian cannot perform an in-person follow-up examination as described above, they would have to provide the animal's owner or qualified individual with a list of other veterinarians who are geographically accessible to the owner or qualified individual.

Qualified individual would mean an individual who is in possession of the animal and who does not know the owner of the animal.

<sup>&</sup>lt;sup>2</sup> Section 3476 of the Insurance Code defines telemedicine as the use of an electronic media to link patients with health care professionals in different locations. The health care professional must be able to examine the patient via a HIPAAcompliant, secure interactive audio, video, or audio/video telecommunications system or through the use of store and forward online messaging. ("HIPAA" means the federal Health Insurance Portability and Accountability Act of 1996.) <sup>3</sup> Service animal means a dog or miniature horse that is individually trained to do work or perform tasks for the benefit of an individual with a disability, including a physical, sensory, psychiatric, intellectual, or other mental disability. See https://www.ecfr.gov/current/title-28/chapter-I/part-36/subpart-A/section-36.104

A veterinarian that establishes a veterinarian-client-patient relationship through telehealth could prescribe the examined animal a drug subject to all of the following conditions:

- If the only examination of the animal is the telehealth examination, the animal cannot be prescribed more than a 14-day supply of the drug with no refills. If an additional telehealth examination is conducted, the animal can be prescribed another 14-day supply, but no additional renewals can be prescribed without an in-person examination.
- The veterinarian must notify the animal's owner or qualified individual that some prescription drugs may be available at a pharmacy and, upon request, send the prescription to the pharmacy of their choice.
- The veterinarian cannot prescribe a controlled substance without first performing an in-person examination of the animal or has current knowledge of the animal gained through a medically appropriate and timely visit to the relevant premises as described above.
- The veterinarian must comply with federal law and any other Michigan laws relating to the prescribing of the drug, including section 16285 of the Public Health Code.<sup>4</sup>

MCL 333.16287 and 333.18811

<u>House Bill 4221</u> would require rules addressing telehealth that are developed and issued by the Department of Licensing and Regulatory Affairs (LARA) in consultation with the Michigan Board of Veterinary Medicine to be subject to the provisions of House Bill 4220.

Proposed MCL 333.18818

## **BACKGROUND AND DISCUSSION:**

Taken together, the bills are similar to House Bill 4980 of the 2023-24 legislative session as it was reported from the House Agriculture committee.<sup>5</sup>

Veterinarians are currently allowed to perform telemedicine examinations of an animal in accordance with R 338.4901a of the Michigan Administrative Code,<sup>6</sup> which allows the examination as long as the veterinarian has recently examined the animal in person. In the event of an emergency, this requirement is waived. A veterinarian also may prescribe a drug for an animal via a telehealth visit in accordance with section 16285 of the Public Health Code.

According to committee testimony, the requirement to first have an in-person examination was temporarily waived under executive orders issued during the COVID-19 pandemic.

Supporters of the bill say that telehealth has been a successful part of health care for humans for years, and that expanding the flexibility to pet care visits can be done without sacrificing quality of care. For individuals whose veterinarian is located too far for convenient visits, who lack access to transportation, or who have pets that are especially anxious when taken into an office setting, the ability to virtually conduct a visit with a veterinarian on short notice, or on

<sup>&</sup>lt;sup>4</sup> https://www.legislature.mi.gov/Laws/MCL?objectName=mcl-333-16285

<sup>&</sup>lt;sup>5</sup> https://www.legislature.mi.gov/Bills/Bill?ObjectName=2023-HB-4980

<sup>&</sup>lt;sup>6</sup> https://ars.apps.lara.state.mi.us/AdminCode/DownloadAdminCodeFile?FileName=R%20338.4901%20to%20R%20338.4933.pdf&ReturnHTML=True

an annual basis with no interim in-person visits, would add convenience to being able to ensure the continued well-being of their pets.

They also argued that the bill's limits on the length of prescriptions without an in-person examination would increase access to important care, while limiting opportunities for abuse.

Opponents of the bill say that the current guidelines are adequate and necessary for ensuring that veterinarians can stay current with an animal's condition and well-being. In-person visits, some argue, are needed to ensure accurate assessments of an animal's physical condition because, unlike humans, animals cannot answer a doctor's questions about their ailments. They pointed to examples such as when a prescription offered only over telehealth could miss certain complicating factors that make the prescribed treatment dangerous for the animal.

### **FISCAL IMPACT:**

The bills would have an indeterminate fiscal impact on the Department of Licensing and Regulatory Affairs. The bills would establish new requirements and restrictions for veterinary practice, which would create potential violations that LARA may investigate and issue disciplinary actions for. To the extent that violations of the new provisions occur, additional fine revenue may be realized and enforcement costs incurred.

The bills would also have an indeterminate fiscal impact on the Department of Corrections and on local units of government. Violations could lead to convictions, but the number of convictions that would result under provisions of the bill is not known. Violations under the Public Health Code could be either misdemeanors or felonies and would depend on the circumstances. New misdemeanor convictions would increase costs related to county jails and/or local misdemeanor probation supervision. Costs of local incarceration in county jails and local misdemeanor probation supervision, and how those costs are financed, vary by jurisdiction. New felony convictions would result in increased costs related to state prisons and state probation supervision. In fiscal year 2024, the average cost of prison incarceration in a state facility was roughly \$46,200 per prisoner, a figure that includes various fixed administrative and operational costs. State costs for parole and felony probation supervision averaged about \$5,500 per supervised offender in the same year. Those costs are financed with state general fund/general purpose revenue. The fiscal impact on local court systems would depend on how provisions of the bill affected court caseloads and related administrative costs. It is difficult to project the actual fiscal impact to courts due to variables such as law enforcement practices, prosecutorial practices, judicial discretion, case types, and complexity of cases. Any increase in penal fine revenue would increase funding for public and county law libraries, which are the constitutionally designated recipients of those revenues.

#### **POSITIONS:**

Representatives of the following entities testified in support of the bills (5-15-25):

- Michigan Pet Alliance
- Dearborn Family Pet Care
- Humane Society of Huron Valley
- American Society for the Prevention of Cruelty to Animals
- Alliance for Contraception in Cats and Dogs

The following entities indicated support for the bills (5-15-25):

- Union Lake Veterinary Hospital
- Humane World for Animals
- All About Animals
- Americans for Prosperity Michigan
- Animal Law Section of the State Bar of Michigan
- Mackinac Center for Public Policy
- Michigan Humane
- Virtual Veterinary Care Assocaition

A representative of the Michigan Veterinary Medical Association testified in opposition to the bills. (5-15-25)

The following entities indicated opposition to the bills (5-15-25):

- Pickle Street Veterinary Services
- KMP Farm Vets PLLC
- Ida Veterinary Clinic
- Oakland Animal Hospital
- Remrock Farms Veterinary Services
- Caseville Small Animal Clinic
- Mid-Michigan Veterinary Services PLC
- EEXI. LLC (relief DVM)

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<sup>■</sup> This analysis was prepared by nonpartisan House Fiscal Agency staff for use by House members in their deliberations and does not constitute an official statement of legislative intent.