Legislative Analysis



PRACTICE OF VETERINARY MEDICINE

House Bill 4912 (proposed substitute H-4)

Sponsor: Rep. Robert J. Bezotte 1st Committee: Agriculture

2nd Committee: Rules and Competitiveness

House Bill 5804 as introduced Sponsor: Rep. Julie Alexander

Committee: Rules and Competitiveness

Complete to 3-2-22

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

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Phone: (517) 373-8080

SUMMARY:

House Bill 5804 would amend the Public Health Code to generally prohibit a veterinarian from engaging in the practice of veterinary medicine except in the context of a veterinarian-client-patient relationship. House Bill 4912 would amend the code to provide exceptions to that general prohibition and to allow a veterinarian to delegate certain tasks in the context of a veterinarian-client-patient relationship. House Bill 4912 also would provide requirements for emergency veterinary hospitals, exempt veterinarians from a provision that prohibits health professionals from providing telehealth services without the patient's consent, and add therapies such as acupuncture and homeopathy to the veterinary medicine scope of practice.

<u>House Bill 5804</u> would prohibit a veterinarian from practicing veterinary medicine unless it is within the context of a veterinarian-client-patient relationship, subject to exceptions described below. Subject to federal law, all of the following must be met for a veterinarian-client-patient relationship to exist:

- The veterinarian must assume responsibility for making clinical judgments regarding the health of the animal and the need for medical treatment and its owner must have agreed to follow the veterinarian's instructions.
- The veterinarian must have sufficient knowledge of the animal to initiate, at a minimum, a general or preliminary diagnosis of its medical condition.
- The veterinarian must be readily available, or arrange emergency coverage, for a follow-up evaluation in case of an adverse reaction or the failure of the treatment regimen.
- The veterinarian must have recently examined the animal in person or obtained current knowledge of the animal through diagnostic equipment that can transmit images and medical records electronically or through a referral from another veterinarian.

Proposed MCL 333.18818

<u>House Bill 4912</u> would allow a veterinarian to practice veterinary medicine through telehealth without a veterinarian-client-patient relationship in an emergency situation until the animal can be seen in person by the veterinarian. However, the veterinarian would have to make a goodfaith effort to arrange an in-person visit as soon as practicable to establish the relationship.

House Fiscal Agency Page 1 of 3

In addition, a veterinarian could practice without a veterinarian-client-patient relationship if an animal's owner cannot be identified and either of the following applies:

- The veterinarian renders or attempts to render, in good faith, emergency or urgent care to an animal.
- The animal is in the care or custody of an animal control shelter or animal protection shelter.

A veterinarian could terminate a veterinarian-client-patient relationship by notifying the owner that he or she no longer wishes to serve the animal and the owner. If the animal has an ongoing medical or surgical condition, the veterinarian would have to refer the owner to another veterinarian for diagnosis, care, and treatment and would have to continue to provide lifesaving support as needed until a new veterinarian-client-patient relationship was established.

Delegation of tasks

The bill would allow a veterinarian to delegate the performance of an act, task, or function if both of the following requirements were met:

- The veterinarian has established a veterinarian-client-patient relationship for that animal (as described above). However, a relationship would *not* be required if either of the following applies:
 - The purpose of the delegated act, task, or function is to render or attempt to render, in good faith, emergency treatment or urgent care to an *animal* that has been brought to the veterinarian by a person other than the *owner* and the veterinarian does not know who owns the animal or is unable to contact the owner before a decision must be made regarding that treatment or care.
 - The purpose of the delegated act, task, or function is to render or attempt to render emergency treatment or urgent care to an animal that is in the custody of an animal control shelter or animal protection shelter and whose owner cannot be identified.
- The supervising veterinarian is monitoring the individual's performance of the act, task, or function to the degree necessary to ensure that it is within the scope of an order, assignment, or prescription of the supervising veterinarian.

Animal would mean an animal other than a human being and include all fowl, birds, fish, and reptiles, wild or domestic, living or dead, which may be carriers of infectious diseases.

Owner would mean the actual owner of an animal, an agent of the owner of the animal, or a person with the apparent authority to act as the owner or as the agent of the owner of an animal.

Practice of veterinary medicine

The bill would add certain tasks to those classified under "practice of veterinary medicine," including performing physical therapy, performing a dental procedure, and providing a *complementary, alternative, and integrative therapy*.

Complementary, alternative, and integrative therapy would mean a preventative, diagnostic, and therapeutic philosophy and practice that is not considered part of conventional, Western veterinary medicine and would include all of the following:

• Veterinary acupuncture, acutherapy, and acupressure.

House Fiscal Agency HBs 4912 (H-4) and 5804 Page 2 of 3

- Veterinary homeopathy.
- Veterinary manual or manipulative therapy.
- Veterinary nutraceutical therapy.
- Veterinary phytotherapy.

Dispensing prescription drugs

Under the bill, upon request of an animal's owner, a veterinarian would have to issue a prescription for a recommended prescription drug instead of dispensing the drug.

Emergency veterinary services

A licensee could not represent that a facility is an emergency veterinary hospital unless all of the following requirements were met:

- The facility's primary function is receiving, treating, and monitoring animals that are emergency patients during its designated hours of operation as an emergency veterinary hospital.
- A veterinarian is in attendance during all hours of the facility's operation and sufficient staff are available to provide timely and appropriate care.
- The number of licensees, instruments, medications, and supplies is sufficient to provide animals with the appropriate level of emergency care.
- The facility is a full-services hospital or provides either independent, after-hours emergency veterinary services or independent, 24-hour emergency veterinary services.

Telehealth services

Finally, the bill would amend section 16284 of the code, which generally prohibits a health professional from providing a telehealth service without directly or indirectly obtaining consent for treatment, to provide that it does not apply to a veterinarian.

(The bill would retain a current exception from this provision for a health professional providing a telehealth service to an inmate under the jurisdiction of the Department of Corrections who is housed in a state correctional facility.)

MCL 333.16215 et seq.

Neither bill would take effect unless both bills were enacted.

FISCAL IMPACT:

The bills would have no fiscal impact on state or local government.

Legislative Analyst: Emily S. Smith Fiscal Analyst: Marcus Coffin

House Fiscal Agency HBs 4912 (H-4) and 5804 Page 3 of 3

[■] 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.