

Chair Sosnowski, Vice Chair Britto and members of the Senate Committee on Environment & Agriculture,

I am submitting this written testimony on behalf of the Virtual Veterinary Care Association, a global, nonprofit association dedicated to developing best practices for delivering virtual care for animals. Our aim is to define quality standards and protocols for practicing virtual care, sharing experiences among practice teams, engaging with virtual care providers, and advocating for policies in support of quality virtual care. We are strong proponents of the use of telehealth in veterinary medicine. **I am writing to request an amendment to RI S0647 to allow a veterinarian to establish a VCPR via telehealth.**

We face an acute, chronic, and growing shortage of veterinarians. With demand for pet health services increasing 6.1% annually, up to 55,000 additional veterinarians will be needed to meet the needs of companion animal healthcare in the U.S. by 2030.¹ Veterinary healthcare teams are overworked and pet owners are underserved. The cost of veterinary care is rising and **63 percent** of pet parents find it difficult to cover surprise vet expenses. It's no surprise that rural and low-income communities face the greatest barriers to access. The Veterinary Care Accessibility Project (VCAP) designates veterinary care difficult to access in parts of Rhode Island, finding counties with one veterinary employee per 1,000 households. In these veterinary deserts where there are no nearby clinics, the costs of visits to a veterinarian are compounded, sometimes rendering care impossible. We have seen human health care adapt telemedicine to broaden access in all 50 states, and how this has reduced barriers to care for rural communities: Telemedicine addresses issues of cost, distance, time, transportation, and mobility.²

Ontario, Canada provides us with a working model for understanding the value of telehealth for pet healthcare. **For more than 7 years Ontario (population 15 million) has delivered telemedicine care with NO reports of harm to any animals.** The same is true for the 19 states that waived restrictions on the VCPR during COVID-19. A recent survey by the American Society for the Prevention of Cruelty to Animals (ASPCA) revealed that 69% of respondents reported an interest in using veterinary telehealth, and 66% said they would see a veterinarian more often today if veterinary telehealth was available.³

We know access to care is important, and our nationwide deficiency explains why the Arizona, California, and Florida legislatures recently passed telemedicine VCPR legislation by near-unanimous margins. Massachusetts, Michigan, Ohio, and Texas have all proposed bills this session to allow a veterinarian to establish a VCPR via telemedicine.

A 2001 pet health care study⁴ concluded the substantial implications of ensuring such care are far-reaching into many levels of our communities.

- **Animal welfare implications:** Pets that go without veterinary care can reasonably be expected to experience greater rates of morbidity and mortality. Further, lack of access to adequate veterinary care is known to be one of the greatest risk factors for animals to be surrendered to a shelter. Assuring adequate access to pet healthcare will undoubtedly improve the welfare of millions of pets.

1. James W. Lloyd, DVM, PhD. (2023, August 1). *Tackling the Veterinary Professional Shortage*. Marsh Veterinary Health. <https://www.marsveterinary.com/tackling-the-veterinary-professional-shortage/>
2. *Telehealth in Rural Communities: How CDC Develops Programs That Deliver Care in New Ways*. (n.d.). Centers for Disease Control and Prevention. <https://www.cdc.gov/chronicdisease/resources/publications/factsheets/telehealth-in-rural-communities.htm>
3. ASPCA national public survey on access to veterinary care & telemedicine. American Society for the Prevention of Cruelty to Animals. March 15, 2023. Accessed April 10, 2023. <https://aspcapp.box.com/s/prwqamoynk8a6anq5hy7j77d4ug21bjf>
4. Lloyd, J. W. & Animal Health Economics, LLC. (2021, April 14). *Pet Healthcare in the US: Are There Enough Veterinarians?* https://www.marsveterinary.com/wp-content/uploads/2022/03/Characterizing%20the%20Need%20-%20DVM%20-%20FINAL_2.24.pdf

- **Social justice implications:** Previous studies indicate that, on average, the cultural, socioeconomic, and geographic characteristics of those pet owners who are underserved with respect to veterinary care also collectively describes communities that all too often experience systemic marginalization in our society. Enhancing access to veterinary care for underserved pet owners will have a disproportionately positive impact on historically disadvantaged communities, both in the near term and in the long run.
- **Public health implications:** The critical importance of pets to the overall well-being of humans, both physical and mental health, is becoming more and more widely recognized. That said, zoonotic diseases - those that can be transmitted from animals to humans - are much more common in our pets than most people think. Assuring adequate access to veterinary healthcare will markedly improve public health, and decrease healthcare costs, for millions of U.S. pet owners.
- **Well-being implications:** Since at least 2014, approximately 20% of U.S. veterinarians every year have expressed a desire to work fewer hours per week, even if it meant a lower level of compensation. With team well-being and mental health already being a top concern in veterinary medicine, and with one in five U.S. veterinarians already feeling overworked, the added stress of a possible shortage of the projected magnitude would have a substantial negative impact. Assuring an adequate pet healthcare workforce will be a critical factor in improving the well-being of thousands of pet healthcare team outcomes.

Telemedicine increases access to care, especially for those in the most underserved areas. Removing barriers to establishing a VCPR is crucial in ensuring pet care and alleviating veterinary profession burnout. Please support the removal of the in-person requirement to establish a VCPR, and enable the delivery of telemedicine to patients and clients in need.

We have attached a red-line with our proposed amendment removing “in-person” from line 23. Should your committee find this amendment acceptable, we would be enthusiastic in supporting this bill as it moves forward.

Thank you for your consideration and we welcome the opportunity to meet and discuss any questions or feedback you may have,

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1. James W. Lloyd, DVM, PhD. (2023, August 1). *Tackling the Veterinary Professional Shortage*. Marsh Veterinary Health. <https://www.marsveterinary.com/tackling-the-veterinary-professional-shortage/>
2. *Telehealth in Rural Communities: How CDC Develops Programs That Deliver Care in New Ways*. (n.d.). Centers for Disease Control and Prevention. <https://www.cdc.gov/chronicdisease/resources/publications/factsheets/telehealth-in-rural-communities.htm>
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