

MEMORANDUM

DATE	September 21, 2020
то	Multidisciplinary Advisory Committee (MDC)
FROM	Kristi Pawlowski, RVT, Chair Richard Sullivan, DVM
SUBJECT	Agenda Item 5. Discussion and Potential Recommendation on Section 2032.1, Article 4, Division 20, Title 16 of the California Code of Regulations (CCR) Regarding Telemedicine and Time to Refill Prescriptions

Background

During the May 14, 2020 meeting, the Board discussed current limitations on veterinarians' ability to practice telemedicine. As described in more detail here, telemedicine may be conducted by a veterinarian only within an existing veterinarian-client-patient relationship (VCPR) and can be used only for specific medical conditions for which the animal patient previously has been examined and diagnosed by the veterinarian.¹

Pursuant to CCR, title 16, section 2032.1, in order to administer, prescribe, dispense, or furnish a drug, medicine, appliance, or treatment of whatever nature, the veterinarian must first establish a VCPR. The VCPR must be established for each medical condition for which the animal is being treated by the veterinarian, because the regulation requires: (1) the veterinarian to perform an in-person examination of the animal patient to initiate a diagnosis of the medical condition; and (2) the veterinarian to communicate with the client a course of treatment appropriate to the circumstance, or specific condition. (CCR, tit. 16, § 2032.1, subs. (b)(2), (3).)

In addition, CCR section 2032.1, subsection (c), prohibits a veterinarian from prescribing a drug for a duration longer than one year from the date the veterinarian examined the animal and prescribed the drug.

The Board heard from several members of the public expressing concerns with the current limitations, especially in light of the COVID-19 pandemic. The public raised concerns with two main points:

- The Board's understanding that the VCPR is condition specific.
- The fact the VCPR cannot be established via telemedicine.

¹ If the animal patient is experiencing a medical emergency for which the animal patient has not previously been examined and diagnosed by the veterinarian, the veterinarian may utilize telemedicine only to provide advice until the animal patient can be transported to or seen by a veterinarian. (CCR, tit. 16, § 2032.1, subs. (f).)

Public comments expressed a desire to increase the ability of veterinarians to provide telemedicine services to lessen client, veterinarian, and veterinary staff exposure to COVID-19 and assist clients who have difficulty transporting their animals for in-person examinations.

At the same meeting, the Board heard from many veterinarians raising concerns with amending current law to expand the availability of telemedicine on animals. Many veterinarians believe it is essential to examine the animal patient in person before telemedicine should be utilized. This is because the animal patient may not display symptoms obvious to the client and, therefore, requires in-person examination to diagnose and treat to maintain the health and wellbeing of the animal patient.

To enable California consumers and their animals temporary access to telemedicine veterinary services under an established VCPR for medical conditions not previously diagnosed or treated and to protect the health, safety, and welfare of consumers, animals, and veterinary staff by avoiding unnecessary exposure to or transmission of COVID-19 for medical treatment of an animal for a condition that can be properly diagnosed and treated through the use of telemedicine under the discretion of the California licensed veterinarian, the Board requested the Department of Consumer Affairs (DCA) Director grant temporary waivers removing condition-specific VCPR telemedicine restrictions and extending the time to refill prescriptions. A full review of the Board discussion and public input is available here: Meeting Minutes; Webcast.

On June 4, 2020, the DCA Director issued two waivers, found here, regarding the VCPR regulation, CCR, title 16, section 2032.1. The June 4, 2020 waivers were extended on July 31, 2020, and extended again on September 17, 2020, so that the waivers are in effect through December 31, 2020. In summary, the waivers accomplish the following:

- Telemedicine for New or Different Medical Conditions: As long as the other VCPR requirements have been met to establish the VCPR, including an initial in-person examination of the animal patient, the veterinarian can use telemedicine to diagnose and treat the animal patient for a new or different medical condition. However, an in-person examination is still required to establish the VCPR. Telemedicine cannot be used to establish a VCPR. The ability to treat new or different conditions by telemedicine under an existing VCPR expires on December 31, 2020, unless further extended.
- Prescription Refills: A prescription issued following an in-person examination last performed between June 1, 2019, and December 31, 2019, can be refilled by the veterinarian, without another in-person examination, for up to 18 months from the date of the last examination and issuance of prescription.

To provide clear direction regarding the veterinary medical services the waivers allow and to better inform consumers and veterinary medical practitioners, the Board, in consultation with the DCA Director, issued guidance to licensees, which was subsequently updated here to reflect the waiver extensions.

In July 2020, the Board's President, Vice President, and Executive Officer participated in a meeting, organized by DCA, with representatives from the American Society for the Prevention of Cruelty to Animals (ASPCA) and San Francisco Society for the Prevention of Cruelty to Animals (SF SPCA) to discuss telemedicine and their desire to make the waivers permanent. In preparation for the meeting, ASPCA and SFSPCA provided this document by Pets for Life on the Impact of Systemic Poverty and Institutional Discrimination on People and Pets.

October 21, 2020 Meeting

During the July 2020 Board meeting, the Board directed the MDC to evaluate the VCPR waivers and determine whether they should be made permanent. MDC Chair, Kristi Pawlowski, joined Dr. Richard Sullivan to form a subcommittee to research this matter further and help facilitate the MDC's collaborative discussions during the October 21, 2020 meeting.

During the meeting, members will hear from stakeholders with differing perspectives regarding the benefits and concerns of telemedicine. The MDC may then ask questions of the stakeholders and engage in a collaborative discussion amongst the members.

<u>Action Requested</u>
The subcommittee does not anticipate any action or recommendations at the conclusion of the October meeting. Rather, the members are asked to listen, ask questions, and educate themselves on the issues raised.