

# VOTE NO



## SB25-159

CVMA  
Colorado Veterinary  
Medical Association



# Virtual VCPR Risks Animal Health, Could Increase Cost

Last year Colorado overwhelmingly passed – with 94 yes votes – the strongest and most comprehensive veterinary telehealth bill in the nation. Colorado’s existing law expands safe, effective use of veterinary telehealth. It clearly defines numerous ways to use telehealth successfully and requires an in-person VCPR before telemedicine use. SB25-159 would undo these sound policies.

### Why is a virtual VCPR dangerous?

- X Missed Diagnoses & Inappropriate Treatments** – In-person exams provide essential information through all primary senses. Telemedicine alone can miss co-existing conditions, delay critical diagnoses, and lead to ineffective or even harmful treatments.
- X Public Health & Economic Risks** – Misdiagnoses of zoonotic or high-risk diseases (e.g., rabies, avian flu, foot-and-mouth disease, plague, and others) endanger animals, humans, and livestock industries, with potential economic losses.

### How does veterinary telemedicine differ from human telemedicine?

- X Animals are Unable to Communicate Symptoms** – Sometimes pets instinctively hide illness or injury. Veterinarians rely on hands-on exams and skilled observation, while owners may misinterpret or not recognize signs of disease or injury.
- X Comparing Human and Veterinary Telemedicine is Misleading** – Even for humans, telemedicine has limits. For example, children under two years old cannot receive telehealth care without an in-person provider relationship.

### Does SB25-159 improve access to veterinary care?

- X No–It Does Not Solve Key Barriers for Underserved Populations, Can Duplicate Cost** – Pets in underserved areas often need urgent or emergency care, not preventive care. Telemedicine alone cannot resolve severe health conditions, requiring owners to pay for both a virtual and an in-person visit—an added burden for low-income families.
- X Internet Access is Limited in Rural Areas** – Many areas without a veterinarian also lack reliable internet, making telemedicine an impractical solution. Mobile veterinary services provide a far better alternative.

### What about violations of FDA, USDA, and FTC regulations and drug diversions?

- X No access to important veterinary drugs** – The FDA requires an in-person examination or premise visit to establish a valid VCPR for prescribing the full compendium of drugs used in veterinary medicine.
- X USDA applies the federal VCPR** to the use of certain types of biologics, issuing Certificates of Veterinary Inspection (CVIs), and evaluating and testing for certain diseases.
- X The FTC applies the federal VCPR** to horses covered under the Horseracing Integrity and Safety Act (HISA).
- X Direct to Consumer Telemedicine “Pill Mills”** – These “product sales-oriented” companies present risks of overprescribing, inappropriate prescribing, increased risk of drug diversion, and antimicrobial resistance.

### Strong veterinary telemedicine can already be practiced in Colorado:

- ✓ **CVMA strongly embraces and encourages the use of veterinary telemedicine** – AFTER A VCPR HAS BEEN ESTABLISHED THROUGH IN-PERSON PHYSICAL EXAMINATION as required in current Colorado law.
- ✓ **Colorado is not alone. Forty-three other states require a VCPR** to be established according to FDA regulations. Twenty-three states have included language that specifically prohibits establishing a VCPR solely by electronic means.

**Still have questions?** Please contact CACVT/CVMA/AVMA Lobbyists: Sundari Kraft 303.956.7203, Jennifer Penn 720.937.2148, Leo Boyle 303.377.5469, Ed Bowditch 303.489.8680 and Jennifer Cassell 785.393.0472 or CVMA CEO: Diane Matt 303.318.0447