

Fiscal impact reports (FIRs) are prepared by the Legislative Finance Committee (LFC) for standing finance committees of the NM Legislature. The LFC does not assume responsibility for the accuracy of these reports if they are used for other purposes.

Current and previously issued FIRs are available on the NM Legislative Website ([www.nmlegis.gov](http://www.nmlegis.gov)) and may also be obtained from the LFC in Suite 101 of the State Capitol Building North.

## FISCAL IMPACT REPORT

SPONSOR Ezzell ORIGINAL DATE  
LAST UPDATED 01/22/15 HB 88  
SHORT TITLE Oversight & Discipline of Some Veterinarians SB \_\_\_\_\_  
ANALYST Cerny

### ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY15	FY16	FY17	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected
<b>Total</b>	NFI	NFI	NFI	NFI		

(Parenthesis ( ) Indicate Expenditure Decreases)

### SOURCES OF INFORMATION

LFC Files

#### Responses Received From

Board of Veterinary Medicine (BVM)

### SUMMARY

#### Synopsis of Bill

House Bill 88 amends sections of the Veterinary Practice Act.

HB 88 will remove local governments from Section 61-14-14A, NMSA 1978, Exemptions to the Veterinary Practice Act, thereby bringing veterinarians employed by local governments under the oversight of the Board of Veterinary Medicine.

HB 88 will allow the Board of Veterinary Medicine to impose a fine not to exceed \$5,000 plus hearing administrative costs per occurrence on individuals found to be practicing veterinary medicine without a license. Practicing veterinary medicine without a license is already a misdemeanor under the act.

### FISCAL IMPLICATIONS

Agency analysis from the BVM indicates no fiscal impact from HB 88. However, an indeterminate amount of revenue, probably insignificant, may result from fines levied by the agency.

## **SIGNIFICANT ISSUES**

HB 88 will update the Veterinary Practice Act to provide oversight of shelter veterinarians by the Board of Veterinary Medicine. By removing local government from exemption to the Veterinary Practice Act, the Board of Veterinary Medicine can regulate the standards of animal shelter veterinarians.

BVM analysis states

Shelter medicine as it is practiced today has not been included in the act in the past. It is imperative that the Board of Veterinary Medicine have jurisdiction over shelter veterinarians to ensure the safety of the public and the animals in the shelter veterinarians' care. Currently, no board or agency has jurisdiction or oversight over local government shelter veterinarians.

BVM further states that “Currently, individuals practicing veterinary medicine without a license are undeterred by a cease and desist letter from the Board of Veterinary Medicine.”

HB 88 will insert language into the Veterinary Practice Act giving the Board of Veterinary Medicine the authority to impose a larger fine than that allowed by the Uniform Licensing Act. The authority to assess administrative, investigative and hearing costs is also allowed by the Uniform Licensing Act; however, insertion into the Act will allow the Board of Veterinary Medicine the authority to impose such costs.

## **OTHER SUBSTANTIVE ISSUES**

HB 88 would assure that Animal Shelter veterinarians are held to the same standards set out in the Board of Veterinary Medicine's Rules.

BVM analysis maintains:

The lack of oversight creates a greater risk to the public and shelter animals. Individuals practicing veterinary medicine [without a license] pose a threat to the public safety due to the lack of education thereby exposing an unsuspecting public to possible exposure to zoonotic diseases which are passed from animals to humans.

A 2010 report by the Association of Shelter Veterinarians titled “Guidelines for Standards of Care in Animal Shelters” (<http://www.sheltervet.org/wp-content/uploads/2011/08/Shelter-Standards-Oct2011-wForward.pdf> ) discusses the need for veterinary oversight of shelter animals, the need to monitor for, and control, zoonotic diseases and also to assure that antibiotic-resistant bacteria that could affect human disease treatment do not develop from antibiotic overuse (p. 52).

CAC/je