

ETHICS EXHAUSTION AND OWNER ECONOMIC LIMITATIONS

Scott Huggins, DVM, MBA

In the last presentation, we discussed the concept of “ethical exhaustion” and how owner economic limitations play a significant role in the development of this pathological disease among veterinarians. Is there a way, however, to mitigate the effects of owner economic limitations on the way we practice . . . and ensure increased career satisfaction and well-being? Well, as controversial as it may be, I’m going to suggest that we embrace a strategy that all other medical professions have adopted, yet one which veterinarians have steadfastly and stubbornly refused—Pet Medical Insurance. Yes, a mere two years ago, I would have stood side-by-side with you in opposition to pet medical insurance. However, looking at recent economic data, listening to the AVMA, and seeing veterinarians forced daily into compromising their medical recommendations based merely on owner finances, I have come to the conclusion that pet medical insurance is inevitable and, ultimately, will be beneficial for the profession. But how do we embrace pet medical insurance when so many of us are unsure, unprepared, and . . . understaffed??

The first step in my conversion from pet insurance “cynic” to pet insurance “advocate” was some blunt financial data. According to vetbilling.com, 71% of Americans have less than \$1,000 in savings. How quickly could you burn through \$1,000 with a diabetic cat, an Addisonian dog, or a cruciate repair? Well, you say, there is always CareCredit and ScratchPay for these clients. All well and good in theory, however, only 39% of consumers qualify for 3rd party financing such as CareCredit or ScratchPay. In the meantime, veterinary costs have increased over 91% since 2000. Most clients’ wages have stagnated or declined recently due to inflation. Are these trends going to reverse? Are veterinary costs going to suddenly decline in the future? What happens when the cost of veterinary medicine exceeds the average consumer’s ability to pay?

In a survey of 2,000 pet owners by the New York Post, 65% of pet owners stated that they have faced unexpected veterinary costs due to a health emergency. Of that 65%, over half (57%) of those owners struggled to pay for treatment. A staggering 49% of those owners had to euthanize a pet due to their inability to pay for recommended treatment. I don’t know about you, but I believe every time we as veterinarians euthanize a pet that we “could have fixed,” a little bit of us dies inside. The average economic euthanasia threshold for a client is only \$1400. What can we do to avoid these economic euthanasias?

The next step in my pet insurance journey was the realization that the AVMA has recently changed its position statement on pet insurance. As of 2018, “**the AVMA endorses the concept of pet health insurance** that provides coverage to help defray the cost of veterinary medical care and **encourages veterinary healthcare teams to proactively educate their clients about the existence of such resources.**” And while that is a dramatic shift to prior recommendations, I think it is more important to note WHY the AVMA changed its position. The AVMA concludes

that “pet health insurance programs may be an important approach for the veterinary profession to continue to provide high quality veterinary services.”

But, you may say, my clients are not interested in pet insurance! Well, in a 2018 study by the AVMA in conjunction with Mississippi State University, 56% of dog owners and 42% of cat owners reported that they would be likely or extremely likely to purchase pet insurance in the future if it were recommended by their veterinarian. A majority of current pet owners with insurance (65%) purchased pet health insurance because their veterinarian recommended it.

The final step in my pet insurance conversion was the fact that, as a consultant, I see veterinarians on a daily basis fail to achieve their “Why” . . . their criteria for “Why I became a veterinarian.” In general, we know how to treat that diabetic cat . . . that Addisonian dog. Yet it is the owner’s constant requests to skip diagnostics like blood tests and radiographs, alter treatment plans, or ask for less expensive and often less effective medications that leave us feeling unfulfilled and often awake, worrying at night. As discussed in the last lecture, Kipperman et al found that 56% of veterinarians indicate that owner economic limitations are a significant factor in career burnout or “ethical exhaustion.” And 96% of veterinarians report that owner economic limitations have led to alterations in diagnosis and treatment at least once a week. An insurance policy which pays out 90% of eligible expenses can increase the economic euthanasia threshold of \$1400 to \$14,000. That has to be liberating when you are presented with a blocked cat, or an allergic Westie, or . . . a French bulldog.

We have had so many technological advances in veterinary medicine over the past 50 years, why are we still dealing with finances the way we have always done it?

Stop being the heel with respect to financial discussions. Be the hero instead! We need to proactively address the financial costs of pet ownership from the very beginning . . . at that very first puppy or kitten visit. Just as important, if not more so, as heartworm prevention, vaccines, and flea control, part of our responsibility is to make pet owners aware of the financial implications of pet ownership AND options available. Often, if you have these discussions up front, you will never have to have this discussion again.

How should one incorporate insurance into your clinic?

- 1) Choose 1 or 2 insurance providers with whom to partner. Look for a company with local support; one that is willing to take most of the burden off of your plate.
- 2) Start asking for insurance provider when scheduling appointments and at time of check-in. Just like your dentist. Just like your eye doctor. You are a real doctor too! Include insurance information on new client forms.
- 3) Start slow by having the financial discussion with new puppy and kittens. These pets, with no pre-existing conditions, will have the best experience with insurance and qualify for the least expensive premiums.
- 4) Offer a trial. Some companies offer 30 days of coverage with no up-front charges. Incorporate this trial in your new puppy/kitten spiel. Here is your 30 days of heartworm

prevention, 30 days of flea prevention, and 30 days of insurance. The 30 day trial gives the owner peace of mind while allowing them time to do their own research.

- 5) Believe that pet health insurance benefits pets by optimizing the quality of care; pet health insurance benefits clients by eliminating the need to consider finances when faced with difficult decisions; and pet health insurance benefits you by allowing you to practice the high quality veterinary medicine you deserve.