

Help Fix ME Program Overview

Animal Welfare Program, Maine Department of Agriculture, Conservation and Forestry

August 2021

Program History

Since 2005, the Animal Welfare Program (AWP) has been operating the Companion Animal Sterilization Fund, otherwise known as the Help Fix ME program (HFM). This program was established to help subsidize and encourage qualified pet owners to sterilize their cats and dogs. This is an important program that helps decrease the euthanasia rates in animal shelters across the state by reducing the number of animals in the shelters and making it more likely that they will be adopted.

A survey was first sent in 2011 to all the animal shelters across the state to collect data to determine the effectiveness of the HFM program. These surveys have continued annually. Data from the 2013 Animal Welfare program annual report indicated the euthanasia rate in shelters had decreased to 10% for dogs and cats across the state; however, there were still issues in communities with feral cat populations. As a result, changes were made to the HFM program to allow the issuance of multiple vouchers to people managing feral cat colonies to help sterilize these populations and prevent euthanization.

Since its inception, the HFM program has issued thousands of vouchers for use at participating veterinary clinics around the state. The number of vouchers issued and redeemed has varied over the years. Voucher information from the past five years indicate:

- 2016: 2,625 vouchers issued, Paid 2,071. Total payments: \$215,408
- 2017: 3,704 vouchers issued, Paid 2,728. Total payments: \$290,148
- 2018: 1,346 vouchers issued, Paid 1,256. Total payments: \$134,596
- 2019: 1,558 vouchers issued, Paid 1,350. Total payments: \$143,323
- 2020: 2,133 vouchers issued, Paid 1,246. Total payments: \$132,620
- 2021: 2,658 vouchers issued, Paid 1,561. Total payments: \$169,104 (6 months)

The difference between the number of vouchers issued compared to those paid (redeemed) is due to several factors, including issued vouchers not being redeemed or redeemed in a different year. In an attempt to better manage the redemption rate, which greatly underperformed the total number of vouchers issued between January and March 2020, HFM limited the number of vouchers issued to 150 per month. However, in 2021, there have been **no** limitations placed on vouchers and all vouchers submitted for payment have been completely refunded to date.

The program has continued to make adjustments over the years to keep up with the HFM community's needs. For instance, in 2016, veterinarians' voucher reimbursement rate was increased to include funding for flea and tick treatments to ensure the animals were parasite-free.

Program Operation

Qualified pet owners interested in participating in the HFM program contact the AWP through the website or phone. A Pet owner applies for the voucher and will qualify if they are low income and receive benefits from various state programs. The pet owner then receives the voucher and provides it to a participating veterinarian. Vouchers can be requested at any time through the HFM website or by calling the program's toll free number. The program requires a co-pay of \$10 for cats and \$20 for dogs. Vouchers have a 90-day expiration date. Each year the HFM program staff review the process for administering the programs and make adjustments as appropriate.

Current Challenges and Next Steps

Recent trends have emerged that have impacted the effectiveness of the HFM program. The significant challenges to the program include:

1. Delays in Voucher Redemption

The voucher system is imperfect. At the outset, some vouchers, despite being requested, are never redeemed. Data in 2018 indicated that 50% of the requested applications were never returned. Further, there can be a long time lag between when the application is requested and when it is returned. It is not uncommon for applications for vouchers to not be returned to AWP for six to eight weeks. Staff strive to send out vouchers upon the receipt of application as quickly as possible. Staff are also available to answer questions about the program via phone and email. AWP has a hotline and website that provides information about voucher availability.

Despite the delays in receiving voucher applications, the initial request for voucher applications can conversely be overwhelming. In the past, because only a set allotment of vouchers was available each month, when the program is advertised, the resulting demand for voucher applications can lead to quickly exhausting the available vouchers for that month. To date in 2021, vouchers have not been exhausted and all approved applications have been processed.

The invoicing of veterinarian services and the processing of those invoices can also be slow. It is not uncommon for it to take six to eight weeks for veterinary practices to send invoices to the AWP. Overall, the average lifecycle of a voucher is approximately nine months from the time a person calls to request an application to when a veterinarian is paid: two months for an application to be submitted/voucher issued; three-month voucher expiration period; two months for veterinarian invoicing; and two months for processing/payment.

- **Next steps:**

- Refine the tracking system to better understand where the roadblocks occur from issuing vouchers to providing payment to the veterinarians to better monitor the funding available.
- Speed up the HFM application and reimbursement process by:
 - Implementing new digital administrative procedure to process payments more quickly.
 - Improve outreach methods to encourage pet owners to use vouchers quickly and veterinarians to submit invoices in a timely manner.
 - AWP research feasibility of creating online portal to quickly process voucher requests and approvals.
 - Migrating to an online application process.
- Keep hotline and website up to date regarding status of voucher availability.

2. Lack of veterinarians participating in the program

The current reimbursement rate offered to veterinarians to participate in the HFM program ranges from \$76 to \$98 for cats and \$90 to \$160 for dogs. This rate was last increased was in 2016. Other states, by contrast, offer higher rates. Massachusetts' rates range from \$100 to \$150 for cats and \$200 to \$300 for dogs, while in New Hampshire, the maximum rates range from \$227 to \$298 for cats and \$319 to \$443 for dogs . It is AWP's belief that Maine's low rate is the primary driver causing the lack of veterinarian engagement.

It is now common for veterinary clinics to require a pre-exam to make sure the animal is healthy for the surgery and recommending pain management post-surgery, both of which are not currently covered under the HFM program.

COVID-19 also exacerbated the lack of veterinarian participation. In 2020, the pandemic caused many veterinary clinics to close for a few months or completely change operations. Presently, many veterinary clinics continue to only see existing clients with appointments sometimes scheduled two months in the future. With such high demand for veterinarian services generally, this could continue to impede veterinarian availability to participate in the HFM program until the pandemic is fully resolved.

To better understand veterinarians' views of the HFM program, AWP created a survey that was sent to licensed veterinarians in the state. Animal welfare partners including Maine Veterinary Medical Association helped craft the survey questions. The survey was launched on 6/17/21 and closed on 7/1/21. Fifty-six respondents from every county except Franklin participated. High-level results of the survey are captured below. The full survey questions and results are attached.

- 46% of respondents indicated that increased payment rates for services was the most important factor determining their participation in the program.

- 43% of respondents stated that the fees are too low and are a barrier to their participation.
- A 50% increase in fees was indicated as needed to allow for future participation.
- 30.4% of respondents advocate for making other treatments or procedures eligible for reimbursement in the HFM program.
- 28.6% of respondents advocate that HFM include basic care and vaccinations at local veterinarian practices.
- The survey also allowed for comments, which included:
 - There is a serious shortage of veterinarians in the state and practices are very busy, regardless of HFM participation. The preference is to service existing clients.
 - A broader range of animal types should be covered (age, weight) and be reimbursed at a higher cost.
 - Better education of veterinarians about the program is needed, as well as basic pet ownership education for clients.
 - Reimbursement process is too slow/cumbersome.
 - HFM reimbursement should include pre- and post surgery needs, such as blood work, testing, screening, pain meds, etc.
- **Next steps:** AWP invites stakeholder feedback on the survey results and suggested programmatic changes. AWP will review what suggested changes could be instituted without rule changes or would require input from AWAC (Animal Welfare Advisory Committee).

3. Fluctuating Annual Focus

As stated previously, the AWP program conducts an annual survey of animal shelters across the state to determine the number and origin of cats and dogs brought into the shelters and the disposition of these animals. This information is used to determine the annual live release rate vs euthanasia rate and this collected survey data is used to better pinpoint geographic areas of the state that could use more vouchers. However, the current allocation of vouchers is inexact and it is important to review the data to determine if the AWP is getting an accurate picture of the need.

- **Next steps:** Conduct an annual departmental review of shelter data and other collected information at the beginning of each year to determine the focus of the HFM program for the upcoming year.

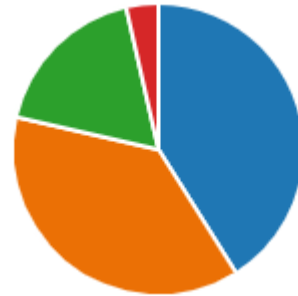
Help Fix Me (HFM) Program Veterinarian Survey

56
Responses

12:51
Average time to complete

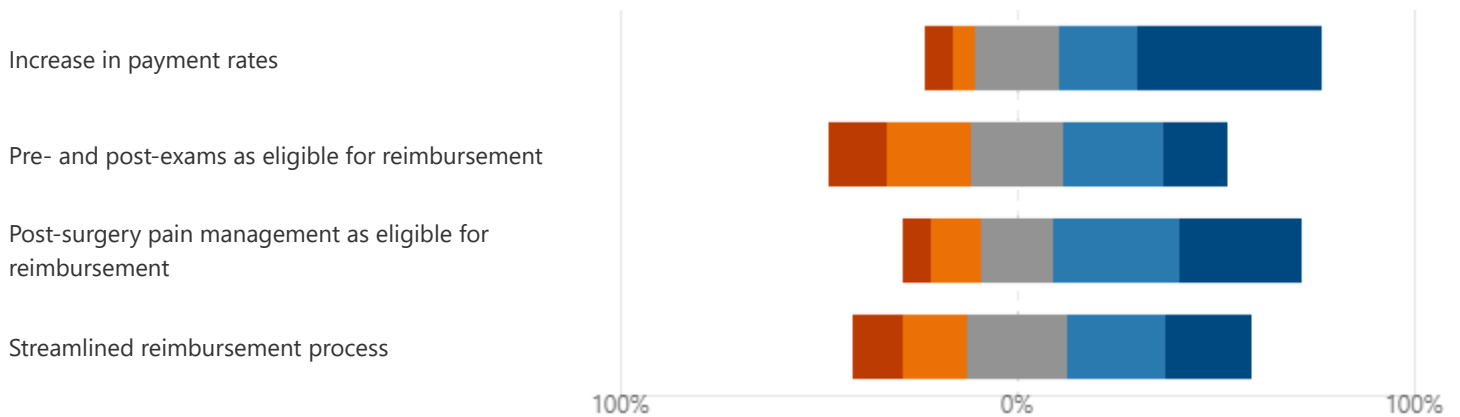
1. Does your veterinary practice participate in the HFM program?

Yes	23
No – but we have participated...	21
No – we have never participat...	10
Not sure	2



2. Please rank the following factors in order of importance for your practice to participate in the HFM Program

1-least important 2 3 4 5-most important



3. Are there other factors that are important in your decision whether to participate?

42
Responses

1. These clients don't often become clients, these spays are often far more challenging (older, overweight) and the cost reimbursed is so low for a possible 2 hour spay. These clients often try to decline pain management.
2. We have to have enough space for our current clients before scheduling in someone who will never come back.
3. The State must reimburse veterinarians "promptly" and not continue to take 2-8 months to pay for deeply discounted surgeries.
4. I was done after I never had a single one I submitted get reimbursed on the first go round of submitting paperwork. I wrote off the outstanding balance for one client after the state never paid for the neuter and I couldn't find the paperwork that we had submitted, scanned our copy and lost our copy in a computer crash. Reimbursement rates are a joke. They need to realistically reflect my costs to do the procedure. Getting paid a third of what I charge for a cat spay and \$10 for a rabies vaccine when purevax for cats costs me almost \$20 a dose isn't fair
5. We only participate for our established clients. Taking non-clients off the street is a nightmare. They don't follow discharge instructions. They don't follow up with other care. They expect discounts every time they return. They have no money when they have complications or animals self mutilate. The people have an arrogant entitlement attitude.
6. We are the stray shelter for Kittery, York, and Eliot as such we spay and neuter our own pets prior to being adopted when age appropriate. We fund our own spays and neuters internally as well as work with Friends of Feral Feline and a Trap, spay, neuter, and release when they need help. Additionally we import puppies and kittens from Puerto Rico and Mississippi so those guys keep us busy too.
7. No time in the schedule to increase surgeries from people seeking spay/neuter through this program.
8. I believe this is a way for the state and veterinarians to help our community in need. Therefore I assume it is not a money making opportunity. I am grateful for for the reimbursement to cover costs, but of course would welcome any increases.
9. Clients tend to be difficult and not paying for pain medications is a problem
10. We cannot accommodate additional clients without hiring another veterinarian.
11. More hassle than it is worse
12. Often there are other health problems to be addressed such as flea and parasites control. Really to make this program work it has to be addressed as a get your pet healthy / spayneuter approach

13. We limit to OUR clients only as we have had clients come to get the reduced cost surgery and do not follow our recommendations, and end up with issues they feel we should cover.
14. I have been a practice owner in Maine for 12 years and have never heard of the program so maybe some outreach would be helpful?
15. currently understaffed and do not have time for extra surgery, booking out like 4-6 weeks for our current client load.
16. Continue to cover core vaccinations like Rabies & Distemper
17. No.
18. Compensation for no-show surgical voucher appointments, inclusion of client education on responsible pet ownership (so they don't expect comprehensive coverage for all of their pet expenses for life)
19. It's not just about weight. Mature spays are harder and take more suture and should cost more. Extra reimbursement for harder surgeries - huge difference between spaying a 6 mon chihuahua and a 6 year old obese pitbull....
20. The breed restriction on dogs prevents us from feeling comfortable supporting that part of the program. All breeds of dogs should be eligible.
21. Parasite control. Cats frequently infected with fleas and dogs need a heartworm test prior to anesthesia !
22. We accept vouchers from our local shelter and encourage people to get vouchers from the shelter, but it only covers certain towns. It would be nice if individuals living in the northern towns of Knox county were also eligible for vouchers
23. Time available to dedicate to it
24. I participated in the HFM program for years but just recently ended my participation due to lack of staffing. I would readily participate again if I could hire more veterinary technicians.
25. No
26. like most clinics we are overwhelmed with the amount of business we are seeing these days. I'm not going to squeeze in a procedure and add to the stress of myself and my staff to lose money on a procedure. The HFM compensation is far too low to even consider participating
27. We find it hard to fit in these surgeries because we are busy and because we can make more putting our regular clients in.
28. The state and vet's copy should be a duplicated form that only needs to be filled out once (like rabies books)

29. We do not participate in HFM for dogs . As stated above it was for low income families however at some point only Pitbulls & Pitt mixes were allowed. How is that assisting low income families if it's based on breed not income ?
30. program design seems to be too subject to abuse and mis-use by some members of the public.
31. WE should be able to insist on deworming and flea treatment, Pain meds - I take it out of my personal pocket- it is unethical to operate without and this SHOULD be compensated. I am the associate and not the boss. I sign my name to the spay. Therefore I supply the meds for current standards of care because I CARE about their post-op pain.
32. reimbursement needs to be easier and quicker. If I send in the sheet I shouldn't need to jump thru any other hoops. I contemplate stopping participation based solely on this factor.
33. This should be the function of shelters and not veterinary practices. Neutering (which includes both castration and spay) is a loss leader to begin with.
34. whether the owners are clients of our clinic
35. Available staff
36. We accept HFM for our own clients only.
37. Staff and time
38. We require a presurgical exam and animals be current on rabies and distemper to come in for surgery. Having to have different rules created too many problems with non-clients arguing that they didn't have to do any of that. So pre-exams or other vaccines or whatever a practice may choose to require does not necessarily need to be reimburseable, but the participating practice still needs to be able to require them.
39. It doesn't make financial sense for a clinic to offer this service. Shelters get government funding while private clinics do not. Clients are not appreciative.
40. Honestly we have more business than we can keep up with the clients that are already paying well
41. Who gets to use the program
42. It was incredibly difficult to get paid through this process. There were usually too many people involved on the state end so we could not continue talking to the same person if there was an issue

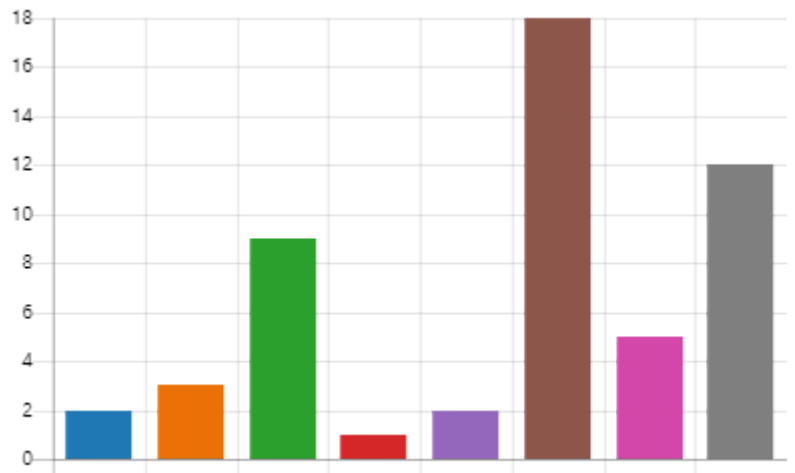
4. Below are the current rates paid to veterinarians who spay/neuter for the HFM Program. Are these fees too low and causing a barrier for your participation in the program?

● Yes	43
● No	13



5. If yes, what percentage of increase would allow your participation in the HFM program?

● 10% increase	2
● 20% increase	3
● 25% increase	9
● 30% increase	1
● 40% increase	2
● 50% increase	18
● N/A - current rates are fine	5
● Other	12



6. Mobile clinics are an efficient way to spay/neuter many pets in a community, but mobile spay/neuter clinics have trouble finding volunteer staff to operate them. Would your practice be willing to participate in a sponsored mobile spay/neuter clinic?

● Yes, absolutely	2
● Yes, we would participate peri...	5
● Not at this time, but we might...	16
● No	28
● Other	5



Other Responses:

- I work over 50 hours a week as a private practice owner 11 days out of 14, why would I want to work for free????
- We just do not have time or staff available
- This is my business model: MASH style HGHVSN clinics.
- My boss would decide. We don't have the staff in any case
- I would have to check with the owners

7. If you are able to provide support to mobile clinics what could you provide? (Check all that apply)

● We have technicians or other staff who would volunteer	12
● Our practice has one or more veterinarians who would volunteer	13
● We would contribute supplies	4
● Our facilities could be used for a sponsored clinic	4
● Other	33



Other Responses:

- None;
- n/a;
- Per diem veterinarian;
- We are unable to help ;
- not interested;
- Xx;
- unable to help at this time;
- not sure;
- We have no ability to support a mobile clinic as they do not provide on going care to the pets they serve.;
- No;
- None;
- none of the above;
- Nothing;
- none;
- No;
- Sorry too understaffed to help ;
- None;
- no one has extra staff to spare these days.;
- not sure;
- I pay my technician to do clinics with me, and we utilize volunteers.;
- At this time we are at capacity for assisting ;
- N/A;
- ask the boss Dr Wade. We are too small to help beyond what we do- we are the only in Augusta who accept the vouchers- we see how most people want EVERYTHING for free. They expect it because they are often on the State for all their human needs;
- I would be happy to provide support but we are overwhelmed with clients and simply dont have any free time. Seriously need another vet at my clinic or in my area.;
- Nothing;
- N/A;
- Don't support due to lack of follow-up;
- Answered no to previous question;
- None;
- Not at this time;
- we don't have any available staff;
- n/a;
- Volunteer staff would be difficult at this time as we are under staffed

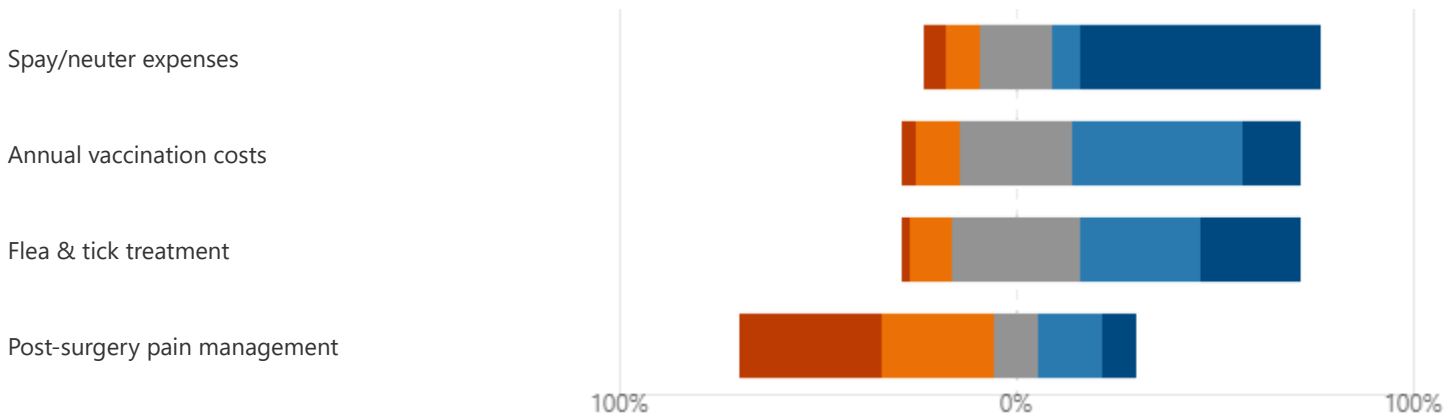
8. What trends have you noticed in your community over the last 5 or more years concerning attitudes towards spaying and neutering pets? (Check all that apply)

- More people seem to be spaying/neutering, and there are fewer abandoned animals 21
- More people are adopting animals through rescue groups which mandate spaying/neutering 31
- There are fewer backyard breeders, and therefore fewer unspayed/unneutered pets available 11
- There are more backyard breeders, and therefore more unspayed/unneutered pets available 8
- I have not noticed any particular changes 14



9. What are the most pressing needs among your low-income clients with cats and dogs?

- 1-least pressing
- 2
- 3
- 4
- 5-most pressing



10. If there are other pressing needs, please list them here in order of importance.

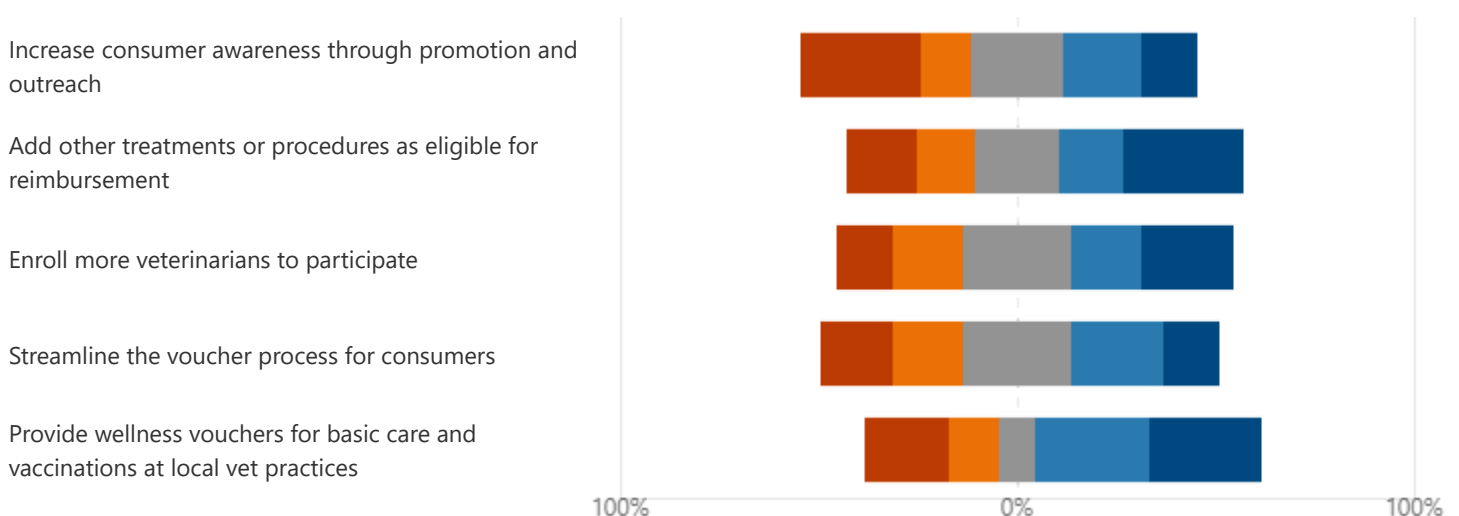
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Responses

1. Geriatric care
2. Quit letting they people have multiple animals that they can't afford to take care of. One help fix me voucher/year. We get 2-3 vouchers and people don't have any money to care for them. It's retarded and cruel to leave the animals in those conditions.
3. Funding low cost spay neuter programs encourages people who do not have the financial amity to care for a pet to own more pets than they are able to care for.
4. Not good clients to deal with
5. Pre surg blood work, parasites control heart worm testing and tick disease screening
6. Education to understand the benefits of spay/neuter surgery.
7. Education - so many pet owners here STILL don't understand what it takes to keep a pet healthy. They only come in for end-stage disease that could have been prevented.
8. No savings when pets are sick and need diagnostics or care
9. Heartworm testing and prevention
- 10.we are doing free pre-exams, some people can't afford extra stuff like a heartworm test
- 11.Affordable basic wellness services for low-income owners
- 12.If ill or trauma they have no back up for services / medications
- 13.Educational guidance on deciding not to take on pet ownership.
- 14.Sadly this program engenders the feeling that if it is not included in the spay, it is not needed. I call each and every one personally and gently explain the zoonotic potential of the intestinal parasites. Most agree with a respectful explanation.
- 15.Not enough veterinarians in northern Aroostook. I turn about 20 folks away a day. And it is hard to lure any new grads into the area due to increased college debt. We need to offer a loan forgiveness program for grads coming to work in rural counties.
- 16.Financial help with ill animals
- 17.Realistic reimbursement for other services like vaccines.
- 18.Non-routine expenses ie, emergencies, dentals, orthopedic surgery, etc.

11. What else do you think we could do to increase utilization of the HFM program?

■ 1 - least helpful ■ 2 ■ 3 ■ 4 ■ 5 - most helpful



12. Are there other suggestions to help increase utilization of the program?

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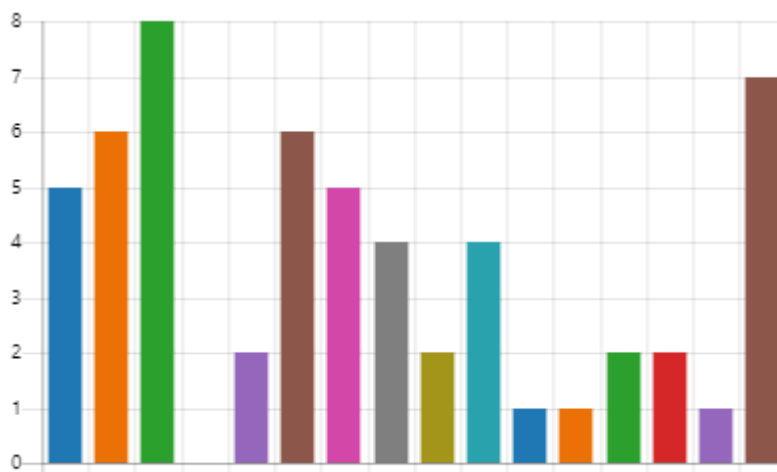
Responses

1. Don't limit vouchers to just PitBull Breeds
2. Screen the consumers better, not everyone with "state aid" needs a voucher
3. You need to reimburse veterinarians a reasonable amount. We're supposed to provide the same level of care for voucher patients as our regular patients. Well, IV catheter, bloodwork, pain meds, etc cost. A large dog spay needs to be reimbursed at \$500 plus, neuter \$400 plus. I cannot afford to participate at the pitiful reimbursement rates you offer
4. If I ran the program I would give money directly to vet clinics and let veterinarians decide who they are willing to help rather than have applicants apply without a valid veterinary client patient relationship. Right now participants use us and leave. It is not a practice builder, it is not community service, it is a welfare program that does little to get animal better care.
5. Maybe more outreach to vets to explain the whole program. A CE? I know of it but don't know everything that's entailed.
6. #8- I would like to add many owners are choosing to decline OHE/Neuter not bc of cost but bc of (their) current research and trends in keep dogs intact to reduce cancer or orthopedic issues.
7. Ownership of a pet is a privilege not a right and animal care costs do not end with spay/neuter. In the ideal world, this program would not need to be utilized at all.
8. No
9. As a veterinarian, I feel like we are all overworked - here we are not and have not been taking new clients for 2 months! - so to offer a discount seems backwards thinking for me when I can have someone pay full price for the same time slot. If there are more services offered for a discount, we will not be taking part.
10. None
11. Maybe education on how pet ownership is a privilege, and not a right and that health services are not free and you should not expect subsidization in the first place.
12. Streamline application process, limit number of pets a participant can get help for (to prevent hoarding), educate participants.
13. Increase reimbursement and eliminate the dog breed restrictions
14. Just more outreach and education, I only know about the program through our local shelter
15. No
16. If you want regular veterinarians to participate you need to pay regular veterinarian prices. otherwise, you are asking us to practice medicine below our standard of care. My answer to that will always be no.
17. this is a helpful program but most veterinarians are just too busy, like us. People really do want free help even if they really don't need it. I know people have been in here that most likely do not need help but somehow qualify but you see them driving nice vehicles and going out to eat , etc. I know this program is meant to help those in need, which it does, and to decrease population of pets but people take advantage. There have been people who come in and pay for us to do the extra stuff we like to do such as a 4dx test and they buy flea and tick stuff but they can't afford the surgery? They don't want to afford the surgery there is a stigma about cost of surgery and spay / neuter clinics, although good, are part of the cause of people not seeing the value of veterinarians, they think we are just in it for the money. If they only knew... sigh...

18. Please increase your canine prices and ensure that vets are paid within 30 days of mailing in vouchers
19. You must return to the spirit of the program . Low income not breed specific
20. The more you offer \$\$\$ the more vets will participate. I worked lots of relief....my bosses who decline all said the same thing : The vouchers do not pay our cost AND we get paid with months of delay
21. I would do more spays and neuters if I had the time. Honestly we have a serious veterinary shortage in this state and it needs to be addressed.
22. Preagrement vouchers given to veterinary clinics for assistance with criteria for the vouchers. le clinic has agreed to do 20 pets for qualified pet. They are given the 20 vouchers to be utilized. The veterinarian is in the community and can help seek out to those in need.
23. Help the elderly owners and the truly needy.
24. I am concerned that this push for low cost spay and neuter devalues the work being provided by the generalPublic and the real risks to animals and the actual time , labor, supplies put forth by the veterinary community.
25. Only eligible to low income clients. Many others can benefit from the program it seems? We were getting too many pitbulls daily

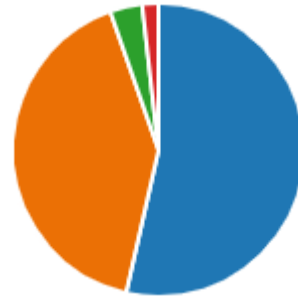
13. What county does your practice serve? (If more than one, choose the county where you perform the majority of your work)

● Androscoggin	5
● Aroostook	6
● Cumberland	8
● Franklin	0
● Hancock	2
● Kennebec	6
● Knox	5
● Lincoln	4
● Oxford	2
● Penobscot	4
● Piscataquis	1
● Sagadahoc	1
● Somerset	2
● Waldo	2
● Washington	1
● York	7



14. What is the size of your practice?

1-2 veterinarians	30
2-5 veterinarians	23
5-10 veterinarians	2
10+ veterinarians	1



15. If you would be willing to discuss further, please share your contact information:

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Responses