POLITICS & POLICY

The Crisis Veterinary Medicine Can No Longer Ignore

With half of pet owners unable to access care and a shrinking, burnt-out workforce, the industry must tackle its labor and economic fundamentals before pet healthcare becomes a luxury good.

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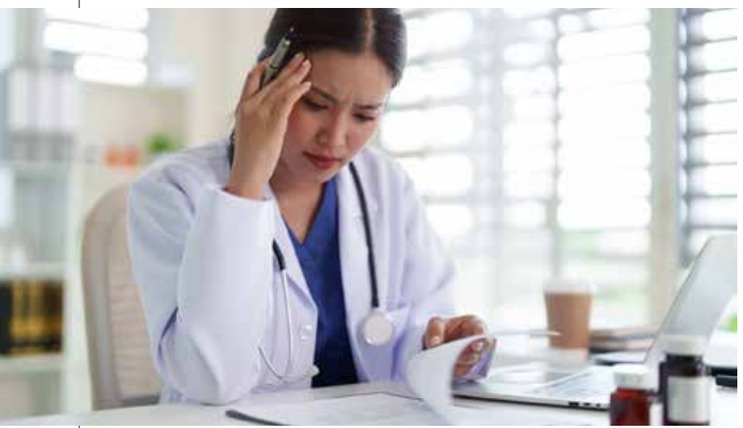

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The 2024 PetSmart Charities/Gallup data tells the story. Half of pet owners choose not to access veterinary care because it is neither affordable nor realistically available. Imagine any other economic sector learning that 50% of its consumers couldn't afford to participate. It would be a five-alarm crisis, and the industry would step up to change the outcome. But in our case, the industry seems to be tolerating pet care becoming a luxury good.

The root causes are labor and economics underpinning our pet healthcare system. It's not that we haven't noticed the fundamentals; we just haven't gathered the troops to do something. Veterinary technicians have told clinics they cannot afford to stay, so numbers shrink, fewer clients are served, practice economics decline, and academic programs recede. The field has faced shortages of veterinarians for years even though industry experts just 12 years ago promoted a myth of too many veterinarians. The clock's ticking, so let's dive in.

Labor

Credentialed veterinary technicians are the lifeblood of practices, yet the ratio of technicians to veterinarians is 2-to-1. The number should exceed 4-to-1. Why can't we get there? Retention. Most technicians leave the profession after four years. If comparable human nurses average $85,000 per year and credentialed veterinary technicians average $45,000, are we surprised that our credentialed corps would take notice of other healthcare careers?

Enrollment is declining at 43% of veterinary technician programs. Practices need more than 14,000 new veterinary technicians each year, yet only 7,000 students sit for the Veterinary Technician National Exam annually.

If industry tackled but one challenge, it could be the systematic overhaul of training, deployment, and compensation of credentialed veterinary technicians. The reward would be more applicants, more technicians, higher retention rates, and greater profitability.

That takes us to our second labor challenge: veterinarians. Full-time-equivalent figures are declining. More than 20% of veterinarians want to work fewer hours, burnout is prevalent, and veterinarians lack training and tools to provide care options for 50% of pet owners. Pet insurance is expanding but still not cracking the ceiling of 5% of America's pets. Veterinarians seeking remote work face 40 states fighting a telemedicine veterinarian-client-patient relationship. New academic programs are coming, but not enough. Borrowing from healthcare's success with physician assistants and nurse practitioners has produced one state — Colorado — willing to experiment, while trade associations remain determined to stop expansion.

With these headwinds, what is our message to the 50% of pet owners who can't afford veterinary care? If it's "Hang in there, the cavalry is on its way," where's the cavalry hiding? If it's "Too bad, you shouldn't own a pet if you can't afford to care for it," then get out of the way while other caregivers step up to the plate. Instead, our message should be, "Our industry is mobilizing to solve this labor problem and offer structurally viable solutions."

The need for action is even more compelling when we consider some basic economics fueling the fire.

Economics

The median U.S. household income is about $83,730. After taxes, a basic retirement contribution, and medical premiums, roughly $4,700 to $5,200 a month remains. Rent for a two-bedroom place runs about $1,900. The average new-car payment is $770 a month, or $531 for a used car. Add a student loan, childcare, utilities, and groceries, and a median household is left with around $500 of flexible cash in a good month.

This is linked to rising credit card debt and general economic fragility among Americans, not just pet owners. Now, put a dog on top of that budget. Synchrony's 2025 Lifetime of Care study puts the cost of a dog at $22,000 to $60,000 over a 15-year life, which works out to $122 to $336 a month — a real bite out of that $500. If this trend continues, how do we avoid pets becoming a luxury item reserved for the top quartile of household income? The industry won't like how the veterinary space looks if this plays out.

Veterinary care represents 30% of pet-related expenditures, yet it accounts for nearly half of that cost's increase since 2019. The squeeze already shows up at the front desk. Veterinary visits have fallen three years running, and active patients are down. Revenue kept increasing on price even as pets through the door dropped, the classic signature of cost pushing people out of care.

Two things must change: Actual cost must come down, not merely rise more slowly. And more care has to be delivered for the same resource inputs, because the scarce resource — clinical time — isn't getting cheaper. Who drives that change is up for debate.

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Solutions

Decreasing the cost of care may feel daunting. Fortunately, many examples prove it's possible. The PetSmart Charities network of "Accelerator" grantees are clinics focused on providing high-volume affordable community primary care. Based on data from 41 clinics nationwide, the 2025 average client invoice was $130, or 44% less than the $233 industry average.

How? Teams are focused on offering a full spectrum of care to meet clients where they are, and clinics have an average of 2.87 clinical staff per vet (versus 2.27 for companion animal practices according to the AVMA). They use team-based care with a goal to have everyone practice at the top of their license and offer a range of financing options. Note: They pay their veterinarians market salaries and techs slightly above. These clinics compete with for-profits for the same scarce clinical resources.

Nonprofit clinics don't typically have a deep well of funding to subsidize care. Many rely exclusively on client fees, and others only fundraise 5% to 10% of their total cost. That doesn't explain how their invoices are 44% below the industry average. Embracing best practice is the differentiator. The operating approach at these clinics aligns with AVMA recommendations on DVM leverage, process reliability, capacity management, inventory discipline, and more.

There are for-profit examples as well. Novel Vet in Canada has a membership model with an affordable monthly fee, free exams, and heavily discounted services. Clarity Veterinary Surgery Center recently launched with an outpatient procedure focus that includes transparent flat fee pricing for surgery and dentistry, and Pet Dental USA is a franchise model that offers pricing well below market rates.

Delivering care at lower prices is possible, and it's worth taking on the challenge. Many practices have experimented with, even perfected, economically efficient care models. It would be invaluable for the industry to examine those.

In closing, many of the technicians and support staff delivering care have incomes below the median cited above. An ironic but effective measure of success may be when the salaries of veterinary support staff qualify them to join the pet-owning cohort. TVB