



January 15, 2024

Standing Committee on Families and Communities
c/o Committee Clerk
3rd Floor, 9820 - 107 Street NW
Edmonton AB T5K 1E7

Via Email: FCCCommittee.Admin@assembly.ab.ca

To Whom It May Concern:

The Alberta Medical Association appreciates the opportunity to comment on the 2024 review of the *Public Sector Compensation Transparency Act* to the Standing committee on Families and Communities.

The Association's comments on this legislation remain as they were when it was first proclaimed in 2015 and reviewed in 2019.

Physicians recognize the right of the public to know where and how taxpayer money is spent. There should be, however, consideration of the balance between transparency of government spending and the privacy of a physician's personal information.

If the public wishes to know how much a physician is paid for a particular service; how much an average physician in any specialty bills, or even what the highest (or lowest) billings are in any specialty, this information is readily available to the public.

- The Schedule of Medical Benefits (fee schedule) is a public document:
https://www.alberta.ca/fees-health-professionals.aspx?utm_source=redirector#toc-0
- Every year, Alberta Health publishes the annual and range of gross payments for every specialty of medicine:
<https://open.alberta.ca/dataset/3c9a0637-29c1-4cb2-93ba-c2ac090ab2b5/resource/f5aaa41e-a561-4e54-a62a-1b0139299e0e/download/health-ahcip-statistical-supplement-2021-2022.pdf>

We fail to see how any further, individually identifying disclosure results in increased public good that would outweigh the resulting impact on privacy.

Additionally, reporting this data is a complex task. When the Act was first introduced, the government of the day noted that physician payment data required additional consideration before implementation could proceed.

Unlike payments to employees or appointees, a large portion of the payments received by physicians go toward practice overhead costs. This includes expenses such as wages paid to Albertans who work in medical offices, rent, utilities, insurance, equipment, infection prevention and control, contractors and more. The figures that would appear in reporting gross payments would thus be much higher than the physician's actual gross income before taxes, retirement planning, etc.

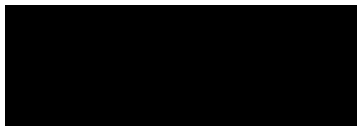
Workload for physicians usually exceeds normal workdays. The hours worked by doctors give Albertans better access to healthcare. Reductions in workload would produce lower payments to physicians but would also limit access to care.

Many physicians are honestly fearful that the release of names will put their property and person at risk. Some members are concerned about criminal targeting of physicians' homes and families, unfair business practices, identity theft and sophisticated targeting of individuals by cyber criminals. When considering risk, even a low incidence of these unintended consequences is substantial.

The AMA believes there are respectful approaches to this legislation that can provide a balance between public access rights and privacy of personal information. We are partners, sharing the same goal of providing accessible, quality sustainable health care to Albertans. Our success in jointly achieving this goal will depend on a respectful and collaborative relationship.

Thank you for the opportunity to make these comments.

Yours truly,



Cameron Plitt
Acting Executive Director
Alberta Medical Association

CP/hs