

September 9, 2019

Standing Committee on Resource Stewardship  
c/o Committee Clerk  
3rd Floor, 9820 107 Street NW  
Edmonton AB T5K 1E7  
[ResourceStewardshipCommittee@assembly.ab.ca](mailto:ResourceStewardshipCommittee@assembly.ab.ca)

To Whom It May Concern:

The Alberta Medical Association appreciates the opportunity to comment on the 2019 review of the *Public Sector Compensation Transparency Act* to the Standing Committee on Resource Stewardship.

The association's comments on this legislation remain as they were when it was first proclaimed in 2015.

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 already 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](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/bca9cd6e-803d-439c-be69-b15a8dd800a4/download/ahcip-statistical-supplement-2017\\_2018\\_final.pdf](https://open.alberta.ca/dataset/3c9a0637-29c1-4cb2-93ba-c2ac090ab2b5/resource/bca9cd6e-803d-439c-be69-b15a8dd800a4/download/ahcip-statistical-supplement-2017_2018_final.pdf)

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

Standing Committee on Resource Stewardship  
September 9, 2019  
Page 2

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 the staff who work in medical offices, rent, utilities, insurance, equipment, infection prevention and control, and more. The figures that would appear in reporting gross payment would thus be much higher than the physician's actual gross income, before taxes, retirement planning, etc.

I have attached a letter that was sent to the membership of the association in December 2015 from the president at that time. In it, he reflects on the issues I have stated here and the risks of unintended consequences. Many physicians are honestly fearful that the release of names will put their property and person at risk.

The AMA believes there are respectful approaches to this legislation that can provide a balance between public access rights and privacy of personal information.

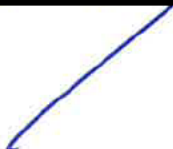
Again, thank you for the opportunity to make these comments.

Sincerely,



Michael A. Gormley  
Executive Director

MAG/dca  
*Attachment*



December 2, 2015

Dear Member:

I am writing to share what I have heard from you about Bill 5, The Public Sector Compensation Transparency Act, and to offer my perspective.

In several hundred emails, comments have been made by members about transparency, fairness, privacy, risk and relationships. If you are interested in reading a sample, at the end of this letter I've provided a small selection under the various themes that I have observed in your responses.

Here is my perspective.

With the legislation before us, there are issues of transparency and the public's right to know, fairness in treatment of payment information, and effect on relationships between physicians and peers, and physicians and patients. There is also an additional and all-important consideration. That is, there must be a balance between the need for transparency and the privacy of personal data. If government is going to overrule the privacy of physicians and all individuals touched by the legislation, then a clear benefit – and a distinguishable public good – must be apparent that is commensurate with the invasion of privacy involved.

I believe it is the public's right to know what a physician is paid to provide a medical service. This information is, however, already available to the public.

- The Schedule of Medical Benefits (fee schedule) is a public document  
<http://www.health.alberta.ca/professionals/SOMB.html>.
- Every year Alberta Health publishes the annual and range of gross payments for every specialty of medicine  
<http://www.health.alberta.ca/documents/AHCIP-Stats-Supplement-14.pdf>.

In the responses I have received to my last letter about the proposed sunshine list, many members oppose any additional form of publication of total payment revenue. However, the government has clearly indicated their commitment to public disclosure, and the bill under debate is explicit that this will include revenue paid to physicians whose billings exceed the threshold.

*The President's Letter*

December 2, 2015

Page 2

Government has acknowledged that physician payment data are different and thus has offered to consult with the Alberta Medical Association (AMA) on regulations and about how to present the data. This is a good starting point and we appreciate the consideration. It is critical, because apart from the negotiated fee for a medical service, there are two variables that determine individual physician's income; how much they work and how much overhead they pay.

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

In terms of overhead, it is clear is that a large portion of the gross revenue paid to physicians flows into the pockets of other Albertans, including medical office workers, building owners, contractors, suppliers and others. Publication of gross payment information would not reflect these immediate deductions and provide a misleading picture of what physicians actually earn.

As I mentioned, the most important consideration in my view is the balance between public good and personal privacy. Members have indicated very strong privacy concerns regarding the publication of amounts paid to a named physician's practice. Potential unintended consequences include 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 risk becomes important if the magnitude (of even one incident) is substantial.

Finally, a comment on the relationship between the medical profession and government. 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.

I believe there are respectful approaches to Bill 5 that can provide balance between public access rights and privacy of personal data.

The Board of Directors is reviewing all possible options in connection with this matter. As always, I appreciate your thoughtful comments and suggestions. Please email me at [president@albertadoctors.org](mailto:president@albertadoctors.org).

Kind regards,

Carl W. Nohr, MDCM, PhD, FRCSC, FACS  
President

CWN/dca

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*The President's Letter*  
 December 2, 2015  
 Page 3

## **A SAMPLE OF PHYSICIAN COMMENTS ON SUNSHINE LIST LEGISLATION FOR PHYSICIAN PAYMENTS**

### **SUPPORT FOR STEWARDSHIP AND ACCOUNTABILITY**

- Although likely unpopular amongst the majority of physicians, I believe support of Bill 5 is a critical opportunity for the AMA to show leadership in moving forward to work with the government on the high cost of physician compensation as a proportion of provincial health care costs.

### **IT'S OK AND HAPPENS ELSEWHERE**

- Our BC colleagues have had their income published for many years and it doesn't seem to affect the need for their medical care. People don't stop seeing the doctor, nor has the BC government stopped paying doctors just because we can look up how much a doctor makes there.

### **PRIVACY AND SECURITY**

- Of additional concern to physicians in small towns is that not only will people see how much they are billing, but in these small communities everyone knows where the doctors live. This has the potential to create a unique target selection opportunity for a criminal element.
- I'm concerned high earners will be targeted as a result of this legislation. This could be for donations (that's OK), fraud (look out) or outright theft (scary).

### **COMPLEXITY OF PUBLISHING PHYSICIAN PAYMENT DATA**

- It should be mandatory that they read through a disclaimer (with multiple components) explaining the hours of physicians, the overhead costs of practice and the summary of expenses/professional fees physicians pay (including the cost and years of their schooling) before any public individuals have access to physicians' billing information.
- I would hope the public is made aware that the fees paid are not a salary to the physician but cover overhead and staffing wages.
- Aside from this being a gross (before tax and overhead) figure, it doesn't take into account debt load and repayment, especially for our junior colleagues.
- The income of physicians is proportional to the workload and revealing the income without revealing the workload is a biased way of revealing an outcome.

*The President's Letter*

December 2, 2015

Page 4

#### **IMPACT ON RELATIONSHIPS**

- I believe the publication of private information linked to income will make the workplace hostile and lead to morale problems.
- On a personal level, publishing my annual fee-for-service income will most certainly lead to disruption of personal relationships with family, friends, and also, potentially, with my staff.

#### **WHAT IS THE BENEFIT?**

- I am puzzled as to what this bill is trying to achieve? If for transparency as claimed, then ALL public sector incomes should be published, not simply the over 125k earners.
- In fact all the relevant and "necessary" information is already currently available to the public, and has been as long as I can remember at least back to the late 1990s, as published in the Alberta Health Statistical Supplement available online on Alberta Health's own website no less. This extensive document provides an exhaustive accounting of physician payments, broken down by ranges, modes and means, both within and across all specialties. It is completely irrelevant to provide the names of physicians over and above what this document already provides and a completely unjustified invasion of personal privacy on the part of the government.