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

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
- 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

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

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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*