



## 2018-19 AMA Business Plan

### Introduction

The following outlines the AMA plan for the 2018-19 business year (October 1, 2018 to September 30, 2019).

The plan was developed by senior staff with oversight and approval of the Board of Directors. Its focus is the goals established by the Board which are aimed at delivering value to physicians by remaining true to the AMA Mission (physician leadership and support) and striving to its Vision (a high performing health care system for Albertans). Operational plans, such as the 2018-19 budget and intended improvements to core capacities and capabilities, are also covered.

The major business plan documents are attached as follows:

**A. Vision, Mission and Values**

As established by the AMA Board of Directors

**B. Key Result Areas, Goals and Activities (Ends)**

**Healthy AMA (Means)**

Under the AMA Mission the Board establishes the goals for the organization, which are categorized in three broad Key Result Areas: Financial Health for physicians and their practices; Well Being (personal, workplace, community); System Leadership and Partnership. There are currently nine goals, three under each key result area.

The purpose of the goals are twofold: they express how the Board wants to deliver value to physician members and also what is felt to be most important in moving from the current system to the Vision.

Connected to each goal are the related activities planned for the next twelve months. These are developed by staff with Board oversight. Progress on activities is reviewed and updated over the course of the year.

The above all has to do with ends: what are we doing to deliver value to members. To do this requires that we have the means at our disposal, which is captured under the phrase "Healthy AMA". The second part of Attachment B deals with what is being done in this regard in the area of governance, finances, knowledge, relationships and workforce.

**C. 2018-19 Budget**

This provides the 2018-19 budget as well as the 2017-18 budget for comparison. Annual forecasts up to 2023-24 are also provided.

In addition to the budget, the status of all AMA Reserves and Contingencies are reported, as well as the amounts for government-funded programs.

These three documents comprise the 2018-19 AMA Business Plan. What follows is more contextual in nature, outlining the major considerations that went into plan development.

## Environment

### Changing Mandate

Three major changes in the AMA's mandate will fundamentally impact how the AMA relates to members. These represent both new roles and responsibilities, with new opportunities that the organization will need to assess and make best use of.

One of the most significant of these is the movement from a contractual base for the recognition of AMA by Alberta Health and Alberta Health Services to a legislative base. This provides greater security for physicians – avoiding some significant challenges that have arisen in other provinces – and reflects recent legal developments regarding rights of representation and freedom of association. It opens up new venues for the AMA to increase its connection to members, notably academic physicians and those physicians that are paid through AHS.

PCN Governance – moving from 42 primary care networks to a local-zone-provincial structure – also opens up new challenges and opportunities. For the system overall, the ability to connect the acute and primary care systems has been greatly enhanced. For the AMA, questions are raised in terms of how best to support and at what level of governance, e.g., zonal vs. provincial.

Finally, the AMA has faced challenges in a past number of years over the stability of several change management programs, such as the PCN Program Management Office and Toward Optimized Practice. The new agreement stabilized these programs through evergreening and also provides the AMA with greater manageability, e.g., the movement of funds between programs to match priorities.

### Evolution Within the System

The changes in AMA mandates are taking place in a health system that is itself changing. Three trends will have a significant impact in the upcoming years.

The trend towards integrated and accessible health information continues. This next twelve months will see in Alberta the introduction of a patient portal, further implementation of EPIC within the acute care system and advances in Connect Care. Increasingly, physicians will have to operate within and participate in a connected health information environment.

#### *Changes in AMA Mandate*

- Recognition: Contractual to Legislated
- PCN Governance: Decentralized to Centralized
- Change Management: Unstable/Segmented to Stable/Integrated

#### *System Evolution*

- Information: Disaggregated to Integrated
- Medical Home to Medical Neighborhood
- Financial Uncertainty to Predictability

With PCN Governance in place, new payment models being developed and integrated information systems, Alberta is now poised to advance from the medical home to the medical neighborhood, i.e., moving from primary care to the entire health system. Future challenges and opportunities relate to the alignment of operations, funding flows, financial incentives and responsibility for the sharing and use of information.

This past year has been marked by fiscal constraint. Concerns over sustainability and value for money will continue, especially in a time where overall challenges within the Alberta economy and the size of the provincial debt continue. Attempts to squeeze compensation will continue as will efforts to pass risk for financial overruns from payers to providers. With physician practices already strained, significant effort will be required to educate payers and the public on the value brought by and the need to sustain physician practices.

**Arising Issues**

The last 12 months have also seen some arising issues that the Board wants more attention paid to.

One of these has been labelled under the broad concept of “healthy workplaces”. This pulls in concepts such as respect, equity, leadership, wellness and inclusiveness. Additional scoping and definition will be required as the board works through this issue.

Member engagement is key to any association. With all the challenges facing members – practice viability, heavy workloads, changing health environments – the Board wants to ensure that member concerns can be heard and responded to. While the AMA does not control many of the factors impacting physicians, it needs to remain the place where the discussion can occur and effective action formulated and acted upon.

*New Priorities*

- Healthy Workplace
  - Respect
  - Equity
  - Leadership
  - Wellness
  - Inclusiveness
- Member Engagement

**Relationships**

One of the ways the AMA works to deliver value is by establishing relationships with key stakeholders. Several of these will be going through changes in the next year.

A provincial election will be held, likely next spring. Regardless of which party is successful, the AMA will be dealing with a new government with a new mandate. Issues of health care, including sustainability, will be high on the agenda.

*Relationships*

- Government
- Alberta Health Services
- Canadian Medical Association

The AMA’s relationship with AHS will also need to evolve as a result of a number of issues, some of which have already been raised. This includes: heavy investment in information technology; changing nature of representation, as reflected in the Strategic Agreement; movement to greater zonal authority in some operational areas; PCN Governance and integration.

Finally, the CMA is undergoing a renaissance due to sale of MD Management and new strategic priorities. The AMA-CMA relationship will need to evolve in the best overall interest of Alberta's physicians.

## What's New for 2018-19

While developed annually, each AMA business plan spans several years. The Key Result Areas and goals, for example, are long-term in nature and reflect how the association strives to deliver value. The associated activities, while focused on the upcoming twelve months, also often have a longer time frame.

This past year, however, has seen a great deal of change. As a result, the 2018-19 business plan reflects more than its fair share of adjustment in activities and this next section reports on the most significant of these. Major changes for 2018-19 are summarized the table below.

### *AMA Business Plan: What's New for 2018-19*

- New Goal: Healthy Workplaces
- Improve Information Base
  - Strategic Insight
  - Understanding Members (information base; communication)
- Integrate Change Management Programs into Business Plan
- Operational Review
  - Representation/Negotiations
  - Change Management Programs
  - Information Management and Technology
- Complete all Major Elements of Income Equity Project: To Be Submitted to Members
- Relationships
  - CMA
  - Government
- Internal AMA Leadership
  - Additional RF time
  - Specialty Care Alliance

The first major change listed is a new goal under the Key Result Area of Well Being:

“The AMA is committed to working with and for physicians to address system issues which impede attaining a safe, healthy equitable working environment.”

The AMA has had long-standing goals related to the well-being of individual physicians and the communities they serve. The new goal reflects a number of issues that are receiving increased attention, including those of gender pay equity, implicit bias, #MeToo medicine, inclusiveness and diversity. There are several opportunities that the AMA can align to in order to advance healthy workplaces: the AHS leadership strategy and the soon-to-be released report on gender equity; the CMA’s interest in diversity and inclusiveness and its strategy to increase its direct member engagement; the CPSA’s leadership strategy, which includes the concept of healthy workplaces.

Early work on the new goal includes a workshop with interested members and a meeting scheduled with other stakeholder organizations: CPSA, AHS, CMA and the Canadian Medical Protective Association. The Board will also be doing work early in the year to identify what the key issues are, how best the AMA can influence these issues, who we have to work with and what resources are available.

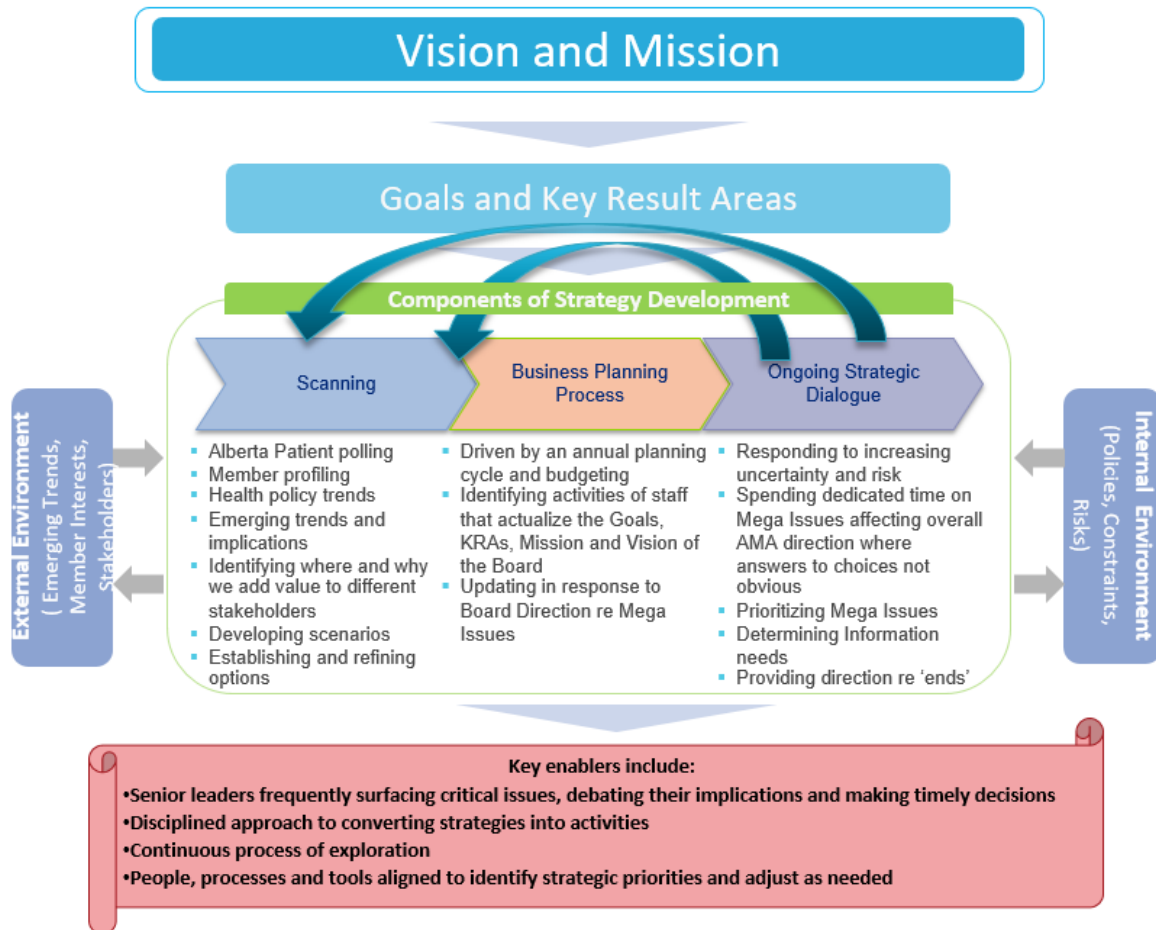
Making the right decisions in a complex and changing environment has a lot to do with being able to gather and assess important information. In very broad terms, this information is of two types:

- Scanning (Current State): What is going on today. What, for example, is the view of Albertans on information sharing, the current financial status of physician practices, the present economic and political circumstances.
- Ongoing Strategic Dialogue (Strategic Insight): The direction of things. Which of these can be influenced and which are more inexorable?

The AMA has been making inroads on scanning the current state and will continue to do this over 2018-19. In addition, the Board has committed to a new process and additional resources to generating strategic insight. An example of the latter is the hiring of a Chief Strategy Officer in 2018.

The key source of information for AMA comes from its physician members. Early in 2018 an audit of our communications strategy was carried out and the implementation of its key recommendations will take place over 2018-19.

The relationship of the AMA’s information strategy to its Vision, Mission and goals is illustrated in this diagram:



Another change for this year is the integration of the AMA change management programs into the overall AMA business plan. Previously these were kept separate, but with the recent enhancements in stability and manageability mentioned earlier this is an opportune time to incorporate the programs into the AMA business plan.

The new environment also requires AMA staff to consider how the work is getting done, i.e., an operational review. This is especially so in three important areas:

- Recognition and representation
- Change management services as supported through several government-funded programs
- Information management and technology

Work has commenced in each of these areas, including the assignment of senior staff. The general issues being raised are as follows:

- Immediate demands and requirements, especially over the next six months

- The strategic opportunities that have been created and support for the Board and RF in assessing these opportunities
- Longer term core competencies and capabilities, including an assessment of current organizational structures and how these can be improved.

A significant project over the past few years has been Income Equity. From a staff perspective, the goal this year will be to complete the technical work and get this into the hands of the Board and RF. This appropriately leaves the question of what to do with the study with these governing bodies. Following that, the Board and RF have already determined that there will be a member referendum.

Relationships with other organizations are fundamental to the AMA being able to advance physician interests, including their interest in a quality, patient-centered system. Opportunities related to partnership regarding healthy workplaces have already been mentioned. Relationships with at least two organizations will likely be going through fundamental renewal in 2019.

First, this year has seen the CMA considering new governance models and also moving forward on their strategic plan. The ability to deliver on their plan has been significantly enhanced by the recent sale of MD Management. Over the course of the next year, AMA and CMA will have to consider the opportunities this presents and what relationship the two organizations want to establish to best serve Alberta's physicians. Some preliminary discussions have already begun.

Second, there will be a provincial election in 2019 which, regardless of outcome, will have an impact on our relationship with government. The Board has been developing a strategy to inform all standing MLAs and all parties as to issues facing the profession and the system.

Finally, additional leadership support and input will be required. The expanded budget and time for RF is an example of this. Support for the Specialty Care Alliance – which arose last year and has already started working with Primary Care – has also been included.

This concludes the overview of environment and related adjustments to this year's business plan. Additional details are contained in the attachments A to C as previously described.



## OUR VISION

The AMA is powered individually and collectively by physician leadership and stewardship in a high-performing health system.\*

- Our initiatives as leaders, innovators and clinicians drive Patients First® as a cornerstone of the health care system.
- Member wellness and economic wellbeing in their practices and communities are supported by our comprehensive negotiated agreements and programs.
- The voices of members – individually, regionally and within specialties – are heard and reflected within the system through our united voice of openness and accountability.
- Our physicians are valued and respected throughout the system in their professional roles and through their unique relationships with patients and system partners.



*\*Alberta's high-performing health system is stable, compassionate and sustainable, delivering enhanced patient experience and improved population health. Individual and collective physician leadership is essential.*

The AMA defines such a system in this way:

- Highest quality care requiring: acceptability; accessibility; appropriateness; effectiveness; efficiency; and safety
- Access based primarily on need, not ability to pay
- Fully integrated community and facility/primary and secondary care
- Management based on timely and accurate data
- Information that follows the patient seamlessly
- Care delivered with the patient, sharing responsibility and working with the physician toward best-possible health

## OUR MISSION

The AMA advances patient-centered, quality care by advocating for and supporting physician leadership and wellness.

## OUR VALUES

Act with integrity, honesty and openness  
 Maintain relationships of mutual trust and respect  
 Treat others – and each other – fairly and equitably  
 Remain unified through belief in quality care, collective engagement and professionalism



## 2018-19 AMA Business Plan

### Key Result Areas, Goals and Related Activities

#### Key Result Area 1 - Financial Health

The AMA assists and supports members in maintaining their financial health. This includes negotiating with payers to ensure fair compensation, the provision of practice management services and the offering of financial products. Members in training are supported through a number of scholarships and bursaries.

Goal 1 Physicians are fairly compensated for their skills and training in comparison to other professionals.

Activities	
1. Support the implementation of legislation to recognize the AMA's representation rights for all physicians.	
2. Negotiate on behalf of member groups for the provision of insured services. Examples include: <ul style="list-style-type: none"> <li>• Represent physicians within and considering joining the AMHSP</li> <li>• AHS physician groups</li> <li>• Prepare for the next round of AMA Agreement negotiations</li> </ul>	
3. Renegotiate the WCB Agreement	

Goal 2 Physicians' practice management decisions are based on sound management advice and best practice.

Activities	
1. Support appropriate member billing practices: <ul style="list-style-type: none"> <li>• Implement a peer review process</li> <li>• Continue to develop tools like the fee navigator and billing training tools</li> </ul>	
2. Redesign of the AMA's integrated change management programs to support member needs	
3. Support members under AMHSP agreements and adapt AMA governance to better recognize AMHSP physician interests.	

Goal 3 Reliable and best-in-class financial products are available to all members

Activities	
1. Assess the implication of the sale of MD Management to Scotia Bank	
2. Continue to offer a full suite of quality insurance products.	

#### Key Result Area 2 – Well Being

The AMA supports members in maintaining healthy work-life integration, including being a leader in the development of a comprehensive physician health program. The AMA promotes and supports physicians contributing to the broader community through activities like the AMA Youth Run Club and Emerging Leaders in Health Promotion grant program. The AMA also supports physicians in their efforts to attain safe, healthy and equitable work environments.

**Goal 1 Physicians are supported in maintaining their own health and that of their families**

<b>Priority Activities</b>	
1. Continue to improve the quality of PFSP service and monitor assistance levels. <ul style="list-style-type: none"> <li>• Physician burnout education and awareness</li> </ul>	
2. Assess opportunities to partner with the CMA to support physician health and wellbeing initiatives.	

**Goal 2 The AMA is a broker in bringing together physicians, patients and families toward healthy communities. Physician and community contributions are supported and celebrated.**

<b>Priority Activities</b>	
1. Establish AMA as a key resource for bringing physicians together with communities: <ul style="list-style-type: none"> <li>• Encourage physician philanthropy and volunteerism locally, nationally and abroad through the AMA's Many Hands™ initiative</li> <li>• Continue to expand the AMA's Youth Run Club (YRC) to more schools and students.</li> <li>• Administer the Emerging Leaders in Health Promotion grant program.</li> </ul>	
2. Elevate the role of physicians as meaningful contributors to the community and the health care system as outlined in the AMA Member Communication Framework.	

**Goal 3 The AMA is committed to working with and for physicians to address system issues which impede attaining a safe, healthy equitable working environment.**

<b>Priority Activities</b>	
1. Working with partners through the AMA's Diversity and Inclusiveness Working Group, identify opportunities and possible strategies to create a more diverse, inclusive and respectful environment.	
2. In partnership with external organizations such as the CMA, CPSA, HQCA and AHS, develop an action plan that explores areas where burnout, organizational culture, diversity, and physician leadership intersect.	
3. Work with physician groups to identify opportunities to improve physician working conditions and negotiate improvements as provided for in the Amending Agreement.	

**Key Result Area 3 – System Partnership and Leadership**

The AMA supports members in their role as leaders within the health care system. This includes supporting physician leadership in developing innovations in care delivery and integration of primary and specialty care. Other activities include the AMA's key role, with Alberta Health (AH) through the AMA Agreement, in developing and implementing the physician payment strategy for the province; several programs aimed at quality improvement; activities related to eHealth; and supporting the development of physician leadership skills.

**Goal 1 Working with Alberta Health (AH), Alberta Health Services (AHS) and other partners, lead and influence positive change in the delivery of services.**

<b>Priority Activities</b>	
1. Support the continued realization of a Patient's Medical Home for all Albertans: <ul style="list-style-type: none"> <li>• Support members, clinics, and their PCNs to progressively implement elements of the PMH in their practices.</li> <li>• Work with AH and AHS to improve systems supports to members, clinics and their PCNs to enable the delivery of PMH to all Albertans.</li> </ul>	
2. Support activities that integrate care across the system: <ul style="list-style-type: none"> <li>• Work with PCA and SCA as well as AHS Primary Health Care Integration Network (PHCIN) to develop and deliver projects and services that improve the integration of care for Alberta patients.</li> <li>• Support immediate integration priorities such as opioid crisis response, hospital to home and PCA/SCA joint referral improvement project</li> </ul>	

<ul style="list-style-type: none"> <li>Using the negotiated agreements ability to propose changes to AMA programs, develop a proposal to evolve AMA programs to direct more engagement and support to integration activities and specialist practices</li> </ul>	
<p>3. Support physician members in their new roles created under the PCN Framework</p> <ul style="list-style-type: none"> <li>Provide physician leaders with the support to engage AHS and AH on an equal basis in the planning for new programs and activities created by the PCN framework</li> <li>Support members, clinics and PCNs in realizing new opportunities and delivering on new responsibilities created by the PCN framework</li> </ul>	

**Goal 2 Key incentives and supports for physicians are aligned with the delivery of care and toward overall system objectives of timely access for patients to quality care.**

<b>Priority Activities</b>	
<p>1. Alignment of physician compensation activities with system objectives:</p> <ul style="list-style-type: none"> <li>Working with sections, complete the development of an Average Net Daily Income (ANDI) model in support of income equity.</li> <li>Work with AH and AHS to implement further AMHSP arrangements, ARP's and other alternate funding arrangements that improve the quality of care Albertans receive.</li> </ul>	
<p>2. Support strategic and tactical initiatives that improve informational continuity and enhance information integration:</p> <ul style="list-style-type: none"> <li>Work collaboratively with AH and others to enable the bi-directional flow of information between community-based physicians and Alberta Netcare</li> <li>Partner with AHS and others to develop bridging capabilities between physician office systems and the AHS provincial clinical information system</li> <li>Continue to advance the EMR Vendor Strategy to align priorities and address the needs of physicians</li> </ul>	
<p>3. Participate in the development of a needs based physician resource plan:</p> <ul style="list-style-type: none"> <li>Working with AH develop a better needs-based analysis for community physician requirements.</li> </ul>	

**Goal 3 Physicians and the AMA, in partnership with patients, play a leadership role in advocating and promoting a system characterized by Patients First®.**

<b>Priority Activities</b>	
<p>1. Leverage the Albertapatient.ca portal to include the patients perspective and inform AMA decision making</p> <ul style="list-style-type: none"> <li>Explore patients' understanding and attitude around the aspects of a high-performing health care system, as well as the optimal language and methods for dialogue and engagement</li> </ul>	
<p>2. Support physician leadership:</p> <ul style="list-style-type: none"> <li>Provide skill development opportunities to AMA physician leaders.</li> <li>Develop a leadership framework to create physician capacity to leading system change that improves care for Albertans.</li> </ul>	
<p>3. Support and advocate for improved health care delivery for the indigenous community. This will involve outreach to indigenous physicians and First Nations communities, and participation in the Population and Aboriginal Health SCN.</p>	

## Healthy AMA Activities

1. Governance
  - Support the introduction of an AMHSP constituency within the RF
  - Clarify the roles of regional delegates and ZMSA's within the AMA's governance, and enhance the support available to regional delegates to engage their constituents.
  - Enhance strategic planning capabilities through a deliberate and structured approach
2. Workforce
  - Redevelop AMA change management programs including the ARP PMO to better meet the needs of physicians.
  - Identify a sustainable AMA resourcing plan to support enhanced representation rights as contemplated under the Second Amending Agreement
  - Complete a job evaluation process review and implement an organization wide staff engagement initiative
  - Complete an operational review to ensure appropriate alignment and sustainability of services across the association
3. Financial
  - Sustainable operations and fully funded reserves
  - Effective stewards of AMA Agreement funding
  - Monitor the use of one-time reserves to support activity
4. Relationships
  - Review the government affairs program and implement improvements
  - Review the relationship with the CMA and pursue opportunities that benefit members
5. Knowledge
  - Continue improving our scanning capabilities and approaches for providing the board with greater insight
  - Incorporate a more deliberate approach to assessing changes in the environment that could have a profound impact on the role of the AMA and how it relates to members.
  - Continue work on the development of a comprehensive internal information management platform (Compass) that consolidates data across the AMA and becomes the foundation for future knowledge initiatives.

