



SGP BULLETIN

January 18, 2018

Negotiations 2018 and the potential impact on GPs

Dear Family Physician,

As you know, Negotiations 2018 have commenced and the AMA team has been hard at work attending several meetings to work through this challenging agreement.

[Dr. Cooper's President's Letter last month](#) and the subsequent Negotiations Update (emailed to members on December 28, 2017) recognized that the government is under financial pressure and this will be reflected in the approach to this agreement.

A large concern to family physicians across the province is the potential risk of the loss of two non-evergreen programs that are due to expire April 1, 2018; the Business Cost Program (BCP) and the Rural Remote Northern Program (RRNP). Note that these are just two of the non-evergreen programs that are not guaranteed to continue past March 31, 2018 (click for more information on [evergreen and non-evergreen programs](#)).

I cannot (nor can our Negotiations team) emphasize enough how critically important both of these programs are to maintain the ability of our clinics to provide care in the community.

The RRNP is a cornerstone to support, incent and retain physicians in our rural communities. No other program provides that level of support to physicians in our rural communities and the loss of this program would be cataclysmic to health care in rural communities.

The Business Cost Program (BCP) was designed to address the accelerating costs of overhead in our clinics over the past decade. At present it is unclear whether or not the government will continue this program. As family physicians we urge government to continue to support the BCP as it is absolutely essential to the continuation of family practice clinics in the community.

It is important to keep in mind that the financial pressures felt by Alberta Health are felt by all of us in the province. Overhead continues to be a significant challenge for family physicians. Despite the reductions we have already taken (SOMB Rule Changes, loss of Retention Benefit), costs to operate a small business continue to increase.

Family physician clinics are also a major source of employment in the province. Government should be aware of the impact that the loss of the BCP could have on our thousands of clinic staff members. Clinics have no desire to explore wage freezes and staff reductions, however if the BCP is lost, many may not have a choice. This would have a very direct negative impact on the economy of our province.

Our employees are our most valuable resource. They work tirelessly to care for patients and work collaboratively alongside PCN and AHS staff that have higher wages and more robust benefit packages that our clinics cannot afford for our staff. The cancellation of programs like the BCP would be directly detrimental to our small business clinics and to our hard-working staff.

Let's hope Alberta Health does the right thing.

Regards,



Dr. Darryl D. LaBuick
President - AMA Section of General Practice

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