

**PRIMARY MEDICAL CARE / PRIMARY CARE NETWORKS  
CONSULTATION AGREEMENT**

BETWEEN

**Her Majesty the Queen  
in Right of Alberta,  
As represented by the Minister of Health  
("AH")**

-and-

**Alberta Medical Association  
(C.M.A. Alberta Division)  
("AMA")**

**1. DESCRIPTION**

- a) Primary Care Networks (PCNs) were established in the 2003 Trilateral Master Agreement to support the delivery of primary care in Alberta. Primary care delivery has continued to evolve, including PCNs.
- b) Article 4 of the AMA Agreement provides for the parties to consult on Primary Medical Care/Primary Care Networks and to negotiate and sign an agreement describing the parameters of the consultation process.
- c) The Primary Medical Care/Primary Care Networks Consultation Agreement is established pursuant to Article 4 of the AMA Agreement.
- d) The AMA will work with others to achieve the goals defined in this agreement including the AMA's Primary Care Alliance and the AMA's Primary Care Network Lead Executive.

**2. TERM**

- a) This Agreement is in force until March 31, 2018.

**3. PRIMARY CARE NETWORK EVOLUTION**

- a) The parties acknowledge the work PCNs have done to date advancing primary health care in Alberta (e.g., improving access to primary health care services as well as improving continuity between physicians and patients). The parties also acknowledge that more work can be done to further improve and evolve the existing PCNs toward an improved and more accountable health care system in Alberta.
- b) The parties acknowledge that the PCN evolution is part of an ongoing evolution in Primary Health Care which encompasses other health and social services providers.

- c) The parties agree to develop a framework within which PCN evolution (e.g., PCN 2.0) can be developed and managed. This will include:
  - I. Establishing linkages to the broader provincial primary care strategy.
  - II. Understanding and taking into consideration the impact primary care has on the broader health system.
  - III. Contributing to a common accountability framework for Primary Health Care, including PCN 2.0
- d) The parties will work together to identify and establish areas where standardization would be of benefit across all provincial PCNs (e.g., minimum outcome expectations). The parties will also review and advise on any necessary PCN specific policies it deems necessary to ensure high functioning PCNs consistent with those policies established by the Minister of Alberta Health.
- e) Alberta Health agrees to consult with the AMA on primary health care strategy and policy development.

#### **4. PRIMARY CARE NETWORK FUNDING**

- a) The current PCN per capita funding amount is \$62.
- b) The PCN Committee shall review and provide advice on the per capita funding amount for Primary Care Networks on an annual basis, subject to a non-binding dispute resolution processes.
- c) Any Party may commence a non-binding facilitation or mediation process with respect to the matters set out in Article 4(b) provided:
  - (i) Notice of facilitation or mediation shall in all cases be in writing by one party to the other which notice shall contain details of the matters in impasse.
  - (ii) Such facilitation or mediation shall take the following form:
    - (1) The parties shall agree on a facilitator. In the event no agreement is reached, either may apply to the Court of Queen's Bench of Alberta (the "Court") requesting the Court to make such appointment. If possible, preference in making the appointment should be given to a person having knowledge of the delivery of physician services in the Province of Alberta;
    - (2) The appointed facilitator shall hear representations as soon as possible after appointment and shall issue a report within fourteen (14) days, or such longer period as the parties agree, after completion of representations by the parties;

- (3) The parties shall have fourteen (14) days to accept or reject the report in writing. If accepted by both parties, the report shall be formalized in an agreement by the parties;
  - (4) In the event the report is not mutually accepted, either party shall have fourteen (14) days to submit the matter to a mediator chosen in the same manner as the facilitator (see 4 (c)(ii)(1) hereof);
  - (5) The mediator shall hear representations by both parties as soon as possible and shall be given access to the report of the facilitator. The mediator shall issue a report within fourteen (14) days, or such longer period as the parties agree, after completion of representations by the parties;
  - (6) The parties shall have fourteen (14) days to accept or reject the report in writing. If accepted by both parties, the report shall be formalized in an agreement by the parties; and
  - (7) If the mediator's report is not accepted by both parties or is otherwise rejected, then this dispute resolution process is ended.
- d) The PCN Committee may, at its own discretion, review methodologies for PCN funding for recommendation to the Minister (e.g., 4-cut funding model, population-based funding model such as formal attachment, etc.)
  - e) Physician compensation for the provision of insured medical services within primary care models such as PCNs and FCCs which are paid for directly by Alberta Health will be managed according to the provisions of the AMA Agreement.

## **5. PRIMARY CARE NETWORK (PCN) COMMITTEE**

- a) To achieve the goals, a PCN Committee will be established.
  - i) The PCN Committee will be chaired by Alberta Health and will have five (5) representatives from the AMA's PCN Physician Lead Executive, three (3) representatives from Alberta Health Services and two (2) additional representatives from Alberta Health.
- b) The PCN Committee will, when providing advice, ensure this advice is consistent with the policies established by the Minister of Health. Where there are identified gaps in policy the PCN Committee will provide that advice to the Minister of Alberta Health.

- c) The PCN Committee is responsible for advising on policy and issues relating to PCNs.
  - i) The PCN Committee will advise on the program management, policies and issues relating to PCNs and the development of PCN 2.0.
- d) PCN Committee is an advisory body reporting to the Minister of Health.
- e) AMA and AH will agree the PCN PMO will be used within the context of the Primary Care Network (PCN) Program. The AMA and AH will work together to determine the appropriate role of the PCN PMO. This work will be completed by December 31, 2013.

**6. SUBJECT TO**

This Consultation Agreement is subject to AMA's members ratifying by May 30, 2013, the written AMA Agreement made effective April 1, 2011 between AH and the AMA.



Deputy Minister  
Alberta Health



Executive Director  
Alberta Medical Association