We read with interest the recent Ernst and Young (EY) AHS Performance Review, and the focus on Radiologist physicians' pay within. The report makes a series of bold proclamations such as:

"Radiologists working at AHS are paid considerably more than in other provinces."

"Nonetheless, radiologists in Alberta continue to be significantly more highly paid than their peers."

"Given the significant amount that AHS continues to over pay to radiologists relative to other provinces..."

"AHS should seek to achieve further reductions in compensation from this specialty..."

The casual reader would assume that for EY to state this so assuredly, they must have conducted a rigorous and up-to-date comparative analysis of the actual take home pay (net of overhead or other expenses) earned by Radiologists within each Province in Canada. Ideally there would also be some thought given to the service level and quality metrics amongst the Provinces as well (ie a relative value for money assessment considering 24/7 on-site presence, subspecialty on-call availability, report turn-around-times, etc.)

However, the closest the EY report comes to this is a single monetary comparison to Ontario (no other Provinces) from 2014/2015 (nothing up to date) using a gross dollar figure (not net of expenses), not accounting for the recent 12% fee reduction in Alberta, and with no context or explanation to confirm that the Ontario and Alberta figures provided are still directly comparable, if they ever were.

There is also a cursory statement comparing unspecified X-ray and Ultrasound
fees (but interestingly not MRI, CT, PET or other Nuclear Medicine exams, Interventional Radiology procedures, etc) with Ontario and BC (but not other Provinces), without any explanation of how this comparison was done and again no way to determine if it is a valid apples-to-apples exercise, let alone how relevant X-ray and Ultrasound are to the underlying total income question.

We are not sure why our specialty was so aggressively targeted by EY in the report, but whenever we see such a large gap between the quality of the evidence provided and the swagger of the conclusions we become concerned that this was driven by a predetermined agenda somewhere, rather than an objective and unbiased analysis.

We will search out additional information in the weeks ahead so that important decision-makers in the system have access to more reliable information about this critical service. Until then, we would please ask that you approach EY’s findings with skepticism and their recommendations with caution as they pertain to Radiologists and the patients we serve.

Yours in service,

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