Dear Family Physician,

It is now close to 2.5 years since the Section of General Practice and the Section of Rural Medicine brought forward the four principle motions that initiated the income equity work by the AMA.

As you may recall, the four motions that were passed at the 2017 Spring Representative Forum were as follows:

1. THAT an implementation plan to achieve intersectional income equity be presented for approval to the Fall 2017 Representative Forum.
2. THAT to aid in allocation decisions, the AMA adopt the concept of an adjusted net daily income model as an additional tool.
3. THAT reallocation be a mechanism to achieve intersectional income equity.
4. THAT intersectional income equity, as will be defined by the implementation plan, be achieved within 5 years or less.

Subsequently, there were a number of working committees established by the AMA to develop better data on income equity:

- The Overhead Study took 1.5 years to do and was fraught with problems. The work on overhead will now take at least another 1-2 years.
- The After-hours Study took over a year to do. There was uncertainty around this study and the work is starting over with a different third party.
- The Income Equity Implementation Plan; or any parts thereof, is yet to be presented to Representative Forum for a vote.
- The Market Modifier Study was intended to be a study of the impact of income equity implementation – not a study requiring approval to move forward with implementation.

SGP Executive met in June and discussed the status of the Income Equity Initiative. We are disappointed and frustrated by the process to date. Unfortunately, after over two years of work, income equity does not appear much closer for Alberta physicians. This Fall will mark the scheduled mid-way point and we do not have much to show for it. We are concerned that our five-year goal will be delayed, and no new timeline has been defined.

As I mentioned previously, achieving income equity is complex and needs to be done with good (not perfect) data that will be refined in a progressive and iterative manner in the coming years. There is concern that implementing income equity could fragment the profession, but there is even greater risk of fragmentation if we fail to move forward. This work is important to the future of the AMA - and the health care system overall - as it demonstrates physician leadership and the characteristics of a self-regulating profession.

The Section of General Practice and Rural Medicine are committed to seeing income equity implemented and will continue to support the work toward implementation. The delays, however, have caused us concern and we are seeking input from family physicians as to what our next course of action should be. Specifically, we need to hear from you on the following questions:

- Do we stay the course and continue to support and work within the AMA’s implementation plan?
- Should family physicians seek external advice?
- Should we implement other strategies? If so, what strategies would you suggest?

SGP and SRM have already sent a letter to the AMA Board regarding our concerns and our intent to reach out to our members (click to view).

Please send your feedback to gppres@albertadoctors.org. I would also encourage you to copy Dr. Clarke at president@albertadoctors.org so the AMA Board is aware of our concerns.

Thank you in advance for your input.

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