



Revised to correct signatory errors.

This bulletin is being forwarded to you on behalf of the SFM and SRM.

February 24, 2023

Dear Colleagues,

Last week the [NDP published their proposal for primary care](#) centred on family health teams. This week the [health minister announced additional funding](#) for the Modernizing Alberta's Primary Health Care System (MAPS) initiative, along with monies tied to promises from our previously ratified agreement. While it is nice to see primary care mentioned alongside the current priorities of increasing ICU and ER capacity and decreasing surgical wait times, you may be asking, "what does this mean for family medicine?"

Us too. We will keep you informed as we learn more.

Despite our seats at the proverbial table, we remain uncertain how these MAPS recommendations will be interpreted, prioritized, or implemented. We hope to see this funding directed toward facilitating team-based care, incentivizing continuity, and reducing administrative burdens, all of which will enable us to do the best we can for our patients. This will undoubtedly involve increased support through PCNs, whom we will need to work closely with to ensure solutions are tailored to individual clinic needs.

Our colleagues in charge of PCNs have developed recommendations for use of the \$40 million short-term funding outlined in the promissory note accompanying our ratified agreement. While we have shared our thoughts on how these funds may be used effectively, we have not been directly involved in, or seen the details of, the proposal awaiting government approval. The impact of this money should be bolstered by the MAPS recommendation to reinstate PCN Operational Stability Funds that were removed in 2020. We hope this will help restore some functional and administrative capacity that struggling PCNs so desperately need. While this is a positive step, we want to be clear that it does not constitute any additional investment in primary care on its own.

Perhaps the most positive message in the press release was hearing from Dr. Tyler White about how Indigenous health leaders have been engaged in the kind of regular, collaborative and meaningful consultation we all hope for. We look forward to seeing recommendations from the MAPS Indigenous panel on how we can improve the delivery of anti-racist, high-quality and culturally appropriate care in Alberta.

There is much that remains unknown with respect to the announcement of \$243 million over three years. What we *do* know is that there are over 600,000 Albertans without a primary

care provider, and the number of family physicians available to accept patients has plummeted. In addition, we know we are starting from a deficit considering the total fee-for-service payments to family physicians decreased by roughly \$259 million from pre-pandemic levels between 2020 and 2022 (approximately \$204 million in 2020/21, and \$55 million in 2021/22).

Albertans deserve strong, publicly funded primary care, and it is crucial that the funding announced is applied in ways that support our ability to deliver it. We hope to see further substantial commitments in the upcoming [provincial budget set for release on February 28](#). We also expect to see a high proportion of *additional* [federal health care funding](#) allocated to the foundation of Alberta's health system.

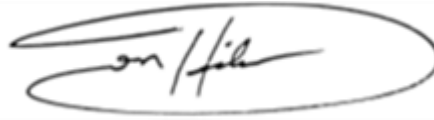
Sincerely,



Dr. Samantha Myhr
President, AMA Section of Rural Medicine

On behalf of your SRM executive

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Dr. David Wildeboer, Secretary-Treasurer
Dr. Kristy Penner, Member-at-large
Dr. Mareli Powell, Member-at-large
Dr. Erich Van Der Linde, Member-at-large
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Dr. Jon Hilner, Ex-officio SFM



Dr. Jon Hilner
Acting President, AMA Section of Family Medicine

On behalf of your SFM executive

Dr. Emmanuel Gye, Secretary-Treasurer
Dr. Nicole Cardinal, Member-at-large
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