

Large fee increase in hand, Alberta goes courting Canada's MDs

The Alberta Medical Association (AMA) says the province requires 1000 new doctors in the next 5 years, and it's asking members to help meet the need by recruiting MDs from other provinces. The recruiters will have 2 big carrots to wave: fees that are among the country's highest and tax rates that are the lowest.

The campaign is already causing concern as far away as Newfoundland. "No question there is interest [in practising in Alberta] on the part of physicians here," says Bruce Squires, executive director of the Newfoundland-Labrador Medical Association. He says the AMA's new agreement means there is now a 30% to 40% difference in fees between the 2 provinces. (A basic office visit in Newfoundland now pays \$17.16. By next year, the same fee in Alberta will reach about \$28.)

And the concern extends beyond the have-not provinces. Cardiac surgeon Hugh Scully, a CMA past president, says 3 surgeons who just finished training in Toronto and were to assume positions in Ontario have been "diverted" to Alberta.

"Alberta is looking attractive," says Dr. Briane Scharfstein, executive director of the Saskatchewan Medical Association. "We have always lost some doctors to Alberta. Now the question becomes, will we lose more?"

Saskatchewan's fees are about 20% lower than its next-door neighbour's. Although doctors aren't flooding from the province, Scharfstein says a cardiothoracic surgeon and cardiologist recently left for Alberta, and even small losses like those represent a significant part of the province's specialist workforce.

Alberta's main recruiting weapon is the 22% fee increase negotiated this spring, which the AMA says "makes Alberta doctors among the best paid in Canada." (According to the latest [1995/96] nationally weighted benefit rates compiled by the Canadian Institute

for Health Information, physicians in Ontario, Alberta and British Columbia earn the country's highest fees.)

AMA President Clayne Steed says his association is not "in active recruitment mode" in that "we're not sending out head-hunters. However, we are certainly willing to facilitate physicians who want to move here. I'd call it a more passive form of recruitment, using Web sites and things like that. We certainly won't be competing in a vindictive manner."

The creation of a toll-free number (800 272-9680) for out-of-province doctors and a request that AMA members in other provinces are key parts of the recruiting strategy. Doctors who call will be sent a package containing highlights of the new fee agreement, contact information for all 17 of Alberta's health districts and an AMA membership guide and application form.

to the impact high-spending teams like the New York Yankees have had on baseball, and says it has "raised the bar" for fee negotiations across the country.

Steed agrees. "I think our agreement had an impact on the arbitrator's decision in New Brunswick [which resulted in an 18% fee increase]. Any arbitrator in Canada would have to be looking at what happened in Alberta."

Dr. John McCann, president of the New Brunswick Medical Society, says Alberta's recruiting will force all provinces "to be more creative" in their own recruiting efforts. But McCann says fees are only part of the recruiting equation. Although doctors in New Brunswick just received their fee increase, which "will help," he says the province will also have to focus on

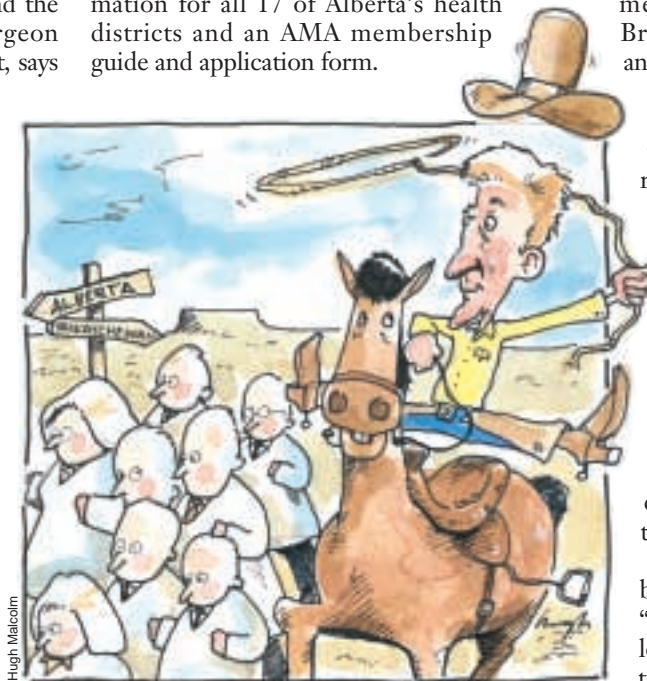
medical graduates from New Brunswick by stressing familial and other ties they have with the province.

As for Alberta's actions, McCann says: "We don't have any reason to be upset. They're simply doing what they have to do to get the doctors they need."

Ron Kustra, the AMA's director of public affairs, says publication of the toll-free number in the latest issue of the AMA's *Alberta Doctors' Digest* generated 25 requests for information by mid-April; the recruiting issue will likely be discussed at the June meeting of the AMA board.

Will Newfoundland doctors be open to offers from Alberta? "They have such high workloads and such poor compensation that Alberta is bound to look attractive," says Squires. Scharfstein adds that the "real issue" is not about Alberta but about "how we attract and keep our doctors."

"Alberta," concludes Scully, "is sitting in the catbird seat." — Patrick Sullivan, CMAJ



Hugh Malcolm

Although Alberta's recruiting may cause his province some "short-term difficulties," Scharfstein says the flip side is that the Alberta agreement "shows that physicians have to be valued and compensated." He compared the AMA's im-