CANADIAN DOCTORS FOR MEDICARE | MÉDECINS CANADIENS POUR LE RÉGIME PUBLIC

August 17, 2026

The Right Honourable Mark Carney, P.C., M.P.
Prime Minister of Canada

The Honourable Marjorie Michel, P.C., M.P.
Minister of Health

Dear Prime Minister,

We are writing again, with far greater urgency, regarding Alberta's Health Statutes Amendment Act, 2025 (No. 2). Since our last letter sent to you on March 3, 2026, this legislation has moved from having become law to increasingly entrenched policy.

Every week of federal inaction allows dual practice, extra-billing, user-charges, and private-payment infrastructure to become further embedded in Alberta's health system. What could once have been reversed with a policy correction will soon require dismantling a functioning private pay market, a far harder and more disruptive task. We urge your government to act now.

We recognize the strain on provincial health systems and the shared goal of reducing wait times and ensuring timely access to all levels of care. But Alberta's law does not solve those problems. It creates a system where access depends on ability to pay, such that services will no longer be accessible on uniform terms and conditions, as is required by the Canada Health Act.

By formally enabling physicians to choose between billing the public purse or billing their patients case-by-case for medically necessary services, this legislation creates a multi-payer, two-tier system that is confusing, inefficient, unfair, and expensive. Since 1984, every province and territory has upheld a single-payer model grounded in medical need, not ability to pay. Alberta's law is an unprecedented and deliberate departure from that shared national commitment, and it raises grave concerns about Alberta's compliance with the Canada Health Act and the way in which it has been administered and enforced for the past four decades.

Guardrails will fail. The Government of Alberta points to minimum safeguards which they claim will protect equitable access to care. We are concerned your government may be tempted to treat these safeguards as sufficient. Yet, evidence from Cambie Surgeries Corporation v British Columbia (Attorney General) makes clear that, *"...no country that allows dual practice has found a way to eliminate its harmful effects, even with regulation."* Canada's own experience consistently shows that wherever dual practice is permitted, it draws capacity away from the publicly funded system, regardless of the guardrails. Every OECD jurisdiction with a publicly funded system that has tried to manage a

parallel private-pay stream has watched public-pay wait times lengthen. Alberta's guardrails will not change that outcome.

We are confident that Alberta's Health Statutes Amendment Act, 2025 (No. 2) will:

- **Undermine equitable access** by normalizing private payment for medically required services, privileging those with financial means;
- **Contravene the Canada Health Act**, which demands, as conditions of federal funding, comprehensiveness inclusion of all insured health services provided by hospitals, physicians, and physician-equivalents and reasonable access to those services on uniform terms and conditions not impeded by charges;
- **Exacerbate workforce shortages** in the publicly funded system by permitting physicians to split their practice between public and private pay;
- **Set a dangerous national precedent**, inviting similar legislation in other provinces and undermining Medicare's promise across the country;

As Prime Minister, you have a direct responsibility to uphold the Canada Health Act and to protect equitable access to health services for every person in Canada. Further consultation with Alberta about half-measures that attempt to mitigate the harms will not meet the moment. We urge your government to act immediately and decisively:

1. **Apply mandatory, dollar-for-dollar deductions to the Canada Health Transfer for user-charges and extra-billing.** The Canada Health Act requires automatic, mandatory deductions for extra-billing and user-charges whenever enrolled physicians—including those who are "flexibly participating" —charge patients for any medically required services. Your government should commit publicly and in writing to take dollar-for-dollar deductions from Alberta's Canada Health Transfer for every dollar billed to patients for medically required.

2. **Initiate a Section 14 notice of concern without delay.** Send formal notice to Alberta under s. 14 of the Canada Health Act, setting out the ways in which the Health Statutes Amendment Act, 2025 (No. 2) fails to satisfy the criteria of the CHA. Seek any additional information you need from the province through bilateral discussions and then provide a report to the province and to the public within 90 days of sending your notice of concern.

3. **Publicly and immediately urge Alberta to pause implementation** of dual practice while a formal s. 14 review is underway, and make clear that continued implementation during that period will lead to mandatory deductions for user-charges and/or extra-billing whenever any enrolled patient pays privately for insured health services provided by a flexibly participating physician, irrespective of whether Alberta considers those services to fall outside the CHA.

Turning Medicare into a market experiment will destabilize an essential service that is core to Canadian identity and to the health and well-being of everyone living in Canada. Medically required health care is a public good, not a commodity to be bought and sold to the highest bidder. Equitable access to health services on uniform terms and conditions without charges is a moral commitment that defines Canada's

social contract. Canadians deserve reforms that strengthen Medicare, not policies that erode it through profitization, privatization, and inequitable access.

The window to act before this becomes entrenched policy is closing. We urge your government to move immediately and decisively to protect one of our country's most important collective achievements. Of all the nation building projects you are considering, there is nothing more important than this.

Yours sincerely,

Dr. Melanie Bechard MD MPH
Chair, Canadian Doctors for Medicare