Canadian Nurses Association / Association des infirmières et infirmiers du Canada

September 14, 2026

The Honourable Marjorie Michel, P.C., M.P.
Minister of Health
Health Canada
70 Colombine Driveway
Ottawa, ON K1A 0K9

Dear Minister Michel,

On behalf of the Canadian Nurses Association (CNA), the national voice of more than half a million nurses and nurse practitioners, we are writing to express serious concerns regarding Alberta's Bill 11 and its implications for equitable access to health care and the principles of the Canada Health Act.

CNA is deeply concerned about the expansion of a two-tier model that allows patients who can afford to pay privately to access medically necessary care more quickly than those who rely on the publicly funded system. Under this bill, physicians can charge the public purse for health-care services, while also billing patients out-of-pocket costs for the same services in their private practice.

Our health-care system is built on a shared value and belief: access to medically necessary care should be based on health need and not on an individual's ability to pay. Bill 11 threatens this very foundation.

At a time when health systems across Canada are already facing significant workforce pressures, expanding private, for-profit delivery risks drawing resources and health professionals away from the publicly funded system. Decades of global evidence are clear: for-profit healthcare systems are less cost-efficient and do not improve wait times. Instead, they drain resources from publicly funded systems, worsen access, and produce poorer outcomes.

For instance, data from the Canadian Institute for Health Information (CIHI) estimates the average hospital costs for a hip or knee replacement at $10,164 (excluding physician and rehabilitation costs). In contrast, private, for-profit clinics charge double to triple what the procedure costs the taxpayer system. Additionally, for-profit healthcare systems regularly engage in cream skimming, selecting the most profitable cases while shifting the burden of the complications they incur onto taxpayer-funded systems.

We recognize the challenges governments face in reducing wait times and responding to increasingly complex health needs. Nurses and nurse practitioners see these pressures every

day and understand their impact on patients, families and communities. However, private, for-profit delivery is not the solution.

There are better ways to reduce wait times and improve access. CNA has long called for the modernization of the Canada Health Act to better reflect how health care is delivered today. Canada can improve access, efficiency and sustainability by enabling nurses and other regulated health professionals to use their full knowledge and skills within their legislated scope of practice, and by expanding nurse-led, nurse practitioner-led and interprofessional team-based models of care.

Minister Michel, you have described yourself as the "Guardian of the Canada Health Act." That responsibility is especially important now. The federal government must uphold the principles of the Canada Health Act and protect equitable access to medically necessary care.

Therefore, CNA calls on the federal government to:

- **Protect and enforce the Canada Health Act**, including by assessing Alberta's implementation of Bill 11 and taking appropriate action, such as dollar-for-dollar deduction to the Canada Health Transfer where non-compliance is established;
- **Advance the modernization of the Canada Health Act** to reflect contemporary healthcare delivery, while protecting its core five principles by fully upholding and enforcing the 2025 federal mandate requiring provincial coverage of nurse practitioner services.
- **Work with provinces and territories to make better use of Canada's health workforce** by removing barriers to full legislated scope of practice and expanding nurse-led, nurse practitioner-led and team-based models of care. This includes leveraging secure, interoperable digital health and virtual care solutions to improve access, continuity and coordination of care.

CNA remains committed to a publicly funded, not-for-profit health system where healthcare spending is efficient, and access is based on need and not ability to pay. We would welcome the opportunity to meet with you to discuss these recommendations and how Canada's nursing workforce can help strengthen the public system.

Sincerely,

Dr. Tracie Risling
President, Canadian Nurses Association

Dr. Valerie Grdisa
CEO, Canadian Nurses Association