



2027 Physician Agreement Negotiations **Economic Landscape**

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Executive Summary

Nova Scotia enters the upcoming 2027 Physician Agreement negotiations with improved but still lacking competitive physician compensation in some specialties, growing health-system pressures and a constrained fiscal environment. While the province has made meaningful investments in healthcare in the past few years and meaningful gains in physician recruitment and retention over the last two contracts – particularly in family medicine and other targeted specialties – Nova Scotia continues to rank in the **bottom third nationally** across most major physician compensation metrics. This includes comparisons of fee schedules, per capita physician spending, average billings per physician, clinical payments reported by the Canadian Institute for Health Information (CIHI) and top fee code analyses.

Despite strong overall economic performance relative to other provinces – most notably in long-term GDP growth, population expansion and employment gains – Nova Scotia’s **fiscal capacity remains structurally limited**. High personal tax burdens, modest GDP per capita and ongoing deficits restrict the provincial government’s ability to raise revenue to fund major compensation improvements. At the same time, the province faces rising demand for physician services, driven by rapid population growth, an aging demographic and some of the country’s highest rates of chronic disease.

Over the last 10 years, Nova Scotia’s physician services budget has grown by **42%**, significantly outpacing inflation (18.4%), population growth (5.7%) and physician workforce expansion (8%). However, much of this growth reflects targeted investments and incentive structures rather than broad improvements to base compensation. Through these targeted measures, Nova Scotia has successfully increased the supply of physicians – adding 454 net physicians since 2022 alone – but significant shortages remain across key specialties, including family medicine, psychiatry, internal medicine, anesthesiology, pediatrics and emergency medicine.

Comparisons with other provinces reveal that Nova Scotia physicians earn between **80% and 88% of the Canadian average**, depending on data source and methodology. Several specialties – such as dermatology, orthopedics and ophthalmology – fall 25 to 45% below national norms. In contrast, most provinces have recently introduced sizeable physician compensation increases, widening the competitive gap. Within Nova Scotia, disparities remain across specialties and gender, with ongoing evidence of systemic pay differences and structural fee code biases.

Other public-sector wage settlements in Nova Scotia have averaged **about 2.2% annually**, with some healthcare professions receiving significant one-time market adjustments. The most recent Physician Agreement delivered an average annual MSU increase of **2.5%, plus substantial targeted funding**, placing physicians modestly above broader public-sector patterns. Nevertheless, competitive pressures, workforce needs and interprovincial comparisons indicate that Nova Scotia must now consider new investment levels above general wage trajectories to maintain and improve physician supply.

These data points have implications for the next round of contract negotiations. To remain competitive, particularly in Atlantic Canada, Nova Scotia must close a compensation gap of 12 to 15% over the next Physician Agreement cycle. This requires annual increases materially above inflation. Nova Scotia's economy is growing, but the province's fiscal capacity is structurally constrained. Notwithstanding those fiscal limitations, if we are to protect recent gains in physician recruitment and meet rapidly growing healthcare demands, significant additional investments will be required in the next agreements.

Introduction

To inform a successful negotiation, Doctors Nova Scotia (DNS) performed an environmental scan of physician incomes internally (within Nova Scotia) and externally (compared to other provinces). Additionally, DNS reviewed and analyzed current and future government-related negotiated contracts, along with the current and future fiscal reality of Nova Scotia's economy. A brief overview of our purpose and approach follows.

The purpose

Intelligence gathering plays a critical role in the success of preparing for and negotiating the next Physician Agreement. The purpose of the intelligence is to:

1. Identify all data-based opportunities to bolster arguments in support of Doctors Nova Scotia's negotiation priorities.
2. Ensure the negotiating team is aware of data-based vulnerabilities associated with our negotiation priorities.
3. Ensure robust data is available to the negotiating team and to the membership as appropriate, to ensure we have a clear and accurate view of competitive physician compensation.
4. Help instil member confidence in the association's preparation for negotiations.

The approach

Competitive Compensation Data – Comprehensive compensation data will be a key input to our negotiation strategy. Information gathered from the data will help set targets for funding increases during the new contract. To have the necessary information to establish these targets, data was analyzed at macro and micro levels. We undertake both the macro and micro analyses because comparing physician compensation between specialties and across provinces is a highly imperfect science. The challenge arises from the fact that there are multiple potential funding and data sources, and physician funding is often compensated on a piecemeal, fee-for-service (FFS) basis, as opposed to full-time-equivalent (FTE) basis, and hours and workload are generally unknown. These analyses therefore look at funding on a per physician basis and a population basis. The population view is helpful as it is difficult to establish an FTE comparison across provinces, which is necessary for an accurate national comparison on a per physician basis.

On a macro level, we:

- compared Nova Scotia physician services' budget to the health budget, overall government budget and budgets in other provinces;
- compared Nova Scotia physician services budget per population to other provinces; and
- compared Nova Scotia physician services' overall contract and fee schedule increases to other provinces.

On a micro level, we:

- calculated Nova Scotia FFS and total (includes FFS, longitudinal family medicine payment model (LFM) and alternative payment plan (APP)) physician average funding, median, ranges and 70th percentile by specialty (inclusive and threshold limit) and compared with other provinces; and
- compiled top five billing codes by specialty and compared with other provinces.

Sources of data included Department of Finance budgets (all provinces), Nova Scotia's Medical Services Insurance (MSI)/Department of Health and Wellness (DHW) physician payment and services data, physician remuneration information for other provinces, the Canadian Institute for Health Information (CIHI), the Canadian Medical Association (CMA) statistics website and a CMA negotiations environmental scan.

Other Health-related Agreements Negotiated in Nova Scotia – Key health-related and other public service contracts approved by the Nova Scotia government over the last four years have been analyzed to determine the percentage increase per employee of those contracts. The contracts include:

- nurses (NSGEU and NSNU)
- Maritime Resident Doctors
- public service union workers (e.g., teachers, Highway Workers Agreement)
- other healthcare workers (e.g., EHS paramedics)

Fiscal Reality – It is important to understand the past, current and future economic environment of the province. To best determine the fiscal realities, the following key factors were developed, trended and compared to the other Canadian provinces:

- physician supply, migration and demographic trends
- cost of living trend

- personal, business and sales income tax rates
- average weekly earnings trend
- population, by demographic trends (aging and chronic disease)
- labour force, employment and unemployment trends
- Gross Domestic Product trend

This included looking at data from the past 10 years. Data sources were the CMA, Statistics Canada and the Canada Revenue Agency.

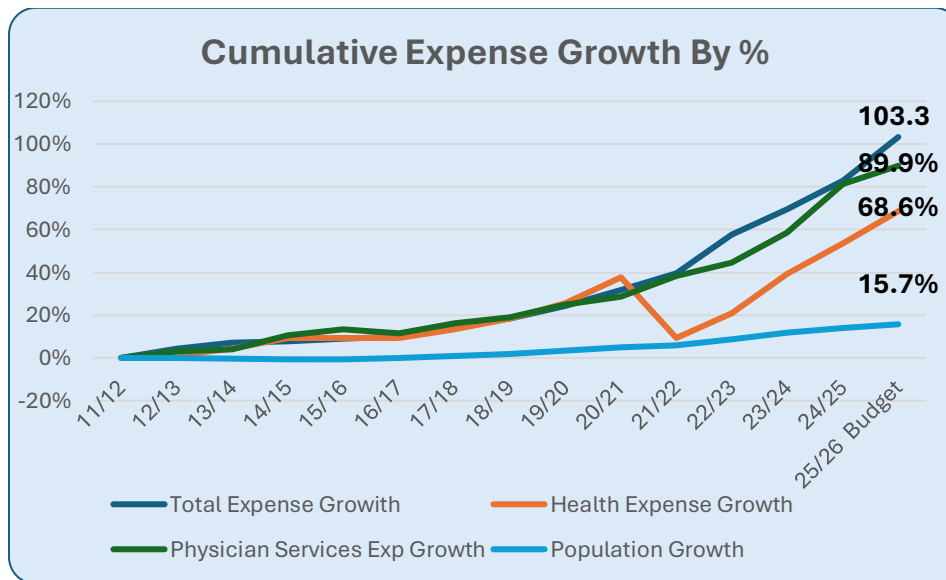
Competitive Compensation

Competitive compensation was reviewed at a macro and micro level to provide an overall understanding of physician compensation in Nova Scotia compared to the rest of the country, as well as a view of individual specialties and how they compare within Nova Scotia and with comparable specialties across Canada.

Macro Level

Graph #1

Summary of accumulated percentage increases for Nova Scotia’s physician services budget, CPI, number of physicians and Nova Scotia’s population from 2011–12 to 2025–26



Since 2011–12, Nova Scotia’s population has increased by 15.7%, with most of this growth happening since 2019–20. Nova Scotia’s total government spending increased by 103.3% over the same period, while the health and physician services budgets increased by 68.6% and 89.9%, respectively, over the same period.

Provincial budgets

We used the 2025–26 budget for comparison, as that is the last year that provides complete data for a true comparison.

Table 1 provides the provincial surplus/deficit, total budget, health budget and physician services budget by province for 2025–26. Only Saskatchewan is projecting a surplus in 2025–26. All other provinces are running deficits. The health budget, on average, makes up 36.3% of a province’s total budget. Nova Scotia’s health budget is 34.1% of the province’s total budget. While the Canadian average for physician services budgets is 22.6% of the total health budget, Nova Scotia is at 21.7%, slightly lower than Canadian average.

Table 1:

Population, Surplus (Deficit), Total, Health and Physician Services Budgets by Province (Excluding QC)
Estimates/Forecasts for 2025/26

Province	Population	Surplus (Deficit)	Total Expense Budget	Health Budget	Physician Services Budget	% Health Budget / Total Budget	% Physician Services Budget / Health Budget
BC	5,698,430	-10,912,000	94,915,000	35,244,278	8,128,050	37.1%	23.1%
AB	4,888,723	-5,200,000	79,300,000	22,195,111	5,868,162	28.0%	26.4%
SK	1,239,865	12,200	21,000,000	8,079,717	1,102,615	38.5%	13.6%
MB	1,494,301	-794,000	25,850,000	8,831,698	2,039,596	34.2%	23.1%
ON	16,124,116	-12,600,000	232,500,000	91,100,000	20,953,000	39.2%	23.0%
NB	854,355	-599,037	14,391,347	4,133,118	899,887	28.7%	21.8%
PEI	178,550	-183,937	3,526,979	1,241,633	187,809	35.2%	15.1%
NL	545,247	-372,000	11,038,000	4,536,520	560,109	41.1%	12.3%
NS	1,076,374	-1,240,950	18,595,216	6,337,636	1,374,107	34.1%	21.7%
Total	32,099,961	-31,889,724	501,116,542	181,699,711	41,113,335	36.3%	22.6%

SK physician services likely under budget - appears that AFP compensation is not included.

Physician Services Budgets per Capita

The government’s physician services budget is where most payments to physicians exist. This includes FFS, LFM, academic funding, APPs, Physician Agreement incentives and other physician payments.

Table 2 provides the physician services budget per capita by province:

Table 2:
 Physician Services Budget/Forecast p
 Canadian Provinces (Excluding QC)
 For 2025/26

Province	Physician Services Budget	Population	Cost per Population
BC	8,128,050	5,698,430	1,426.37
AB	5,868,162	4,888,723	1,200.35
MB	2,039,596	1,494,301	1,364.92
ON	20,953,000	16,124,116	1,299.48
NB	899,887	854,355	1,053.29
PEI	187,809	178,550	1,051.86
NL	560,109	545,247	1,027.26
NS	1,374,107	1,076,374	1,276.61
Total	40,010,720	30,860,096	1,296.52

Note: SK was removed - unable to reconcile Physician services budget
 Note: QC was removed - report only released in French

Nova Scotia spends \$1,276 dollars for physician services per person in Nova Scotia. This ranks fourth highest (out of eight provinces) in the country but is about 1.6% below the Canadian average. Nova Scotia’s cost per person has increased over the last couple of contracts (up from \$1,056 in 2022–23). However, Nova Scotian physicians provide sub-specialty clinical services to people from across the Atlantic region, and those patient numbers are not included in the population base. If those numbers were included, Nova Scotia’s cost per person would be even further below the Canadian average.

Recent Health-related Investments in Nova Scotia

Premier Tim Houston was elected in August 2021 on a platform to “fix healthcare.” Since that time, the provincial government has made significant investments in healthcare, including initiatives to improve physical and digital infrastructure, increase long-term care

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beds, increase residency and medical student seats, build the new Cape Breton Medical Campus, increase recruitment to other healthcare professions (nursing, CCA, physician assistants, clinical associates, etc.) and add new access points for primary care (PCCs,

mobile clinics, VCNS, etc.). Many of these investments were long overdue and have been welcomed by physicians.

As a result of these investments, the province’s healthcare spending in 2026-27 had increased by 77% (\$3.6 billion) since 2019–20 (before COVID-19), and by 60% (\$3.1 billion) since 2021–22 (in the four years since the Houston government was elected).

Fiscal Year	TOTAL HEALTH SPENDING (includes DHW and SLTC)
2019–20	\$4.7 billion
2020–21	\$5.1 billion
2021–22	\$5.2 billion
2022–23	\$6 billion
2023–24	\$6.7 billion
2024–25	\$7.1 billion
2025–26	\$7.8 billion
2026–27*	\$8.3 billion

*2026–27 spending is an estimate from Budget 2026–27

Across-the-Board Increases

Each provincial medical association negotiates with its provincial department of health for physician funding. Negotiations can include increasing fee schedule rates, across-the-board increases, targeted investments to certain specialties, funding for incentives, member benefits or any combination of these.

Table 3 provides the schedule of benefits increases for Canadian provinces and territories between 2018–19 and 2028–29:

	18/19	19/20	20/21	21/22	22/23	23/24	24/25	25/26	26/27	27/28	28/29
Newfoundland & Labrador [1]	0%	0%	0%	Atlantic Parity-variable by specialty-see MOA	0%	0%	Nationally competitive - range 2% to 21.94%	3.50%	3.50%		
Prince Edward Island	2%	1.75%	2.36%	2.36%	2.36%	2.36%	0%	30% overall (10% on procedures, 10-45% on visits/consults)	0%	1% +1%	1% +1%
Nova Scotia ⁴	1.50%	2%	2%	2%	2%	3%	3%	2%	2%		
New Brunswick	1%	1%	2.00%	1.50%	1.50%	1.50%	1.50%	2.5%	3.5%	2.5%	4.0%
Québec – FMOQ											
New Schedule	1,6%	0%	2,1%	2,3%	-	To be negotiated (TBN)	TBN	TBN			
Lump sum (\$ millions)	\$253 M	\$184 M	\$141 M	\$15 M	\$155 M	\$119 M					
Income gap correction with Specialists in Québec	1,0%		1,4%								
Québec – FMSQ											
General Increase ¹	2%	1%	1%	1%	1%	TBN	TBN	TBN			
Lump sum increases (millions)	\$47,80	\$94,01	\$0,33	\$115,35	\$115,35						
Targeted Increases	0% ²	0%	2,0% ²	0% ²	0% ²	TBN	TBN	TBN			
Institute for the appropriateness of medical procedures ² (millions)	-----	-----	-\$70	-\$140	-\$240	-	-	-			
¹ Corresponds to an increase in the budgetary envelope regarding the increase in the number of physicians, services provided as a result, among other factors, of the increase in and aging of the population. ³ As reviewed by the 2019 agreement. ² The 2019 agreement further reduced the budgetary envelope by implementing the Institute for the appropriateness of medical procedures ⁴ These percentages are the across-the-board increases negotiated with each Agreement. There is typically targeted funding in addition to these amounts.											
Ontario	2% onetime global increase	0.5% global increase; removal of payment discount	3.54% permanent increase to SOB	1% lump sum increase to all physician payments.	Lump sum equivalent to a 2.01% increase	2.80%	6.97%	2.8%	2.5%	2.5%	
Manitoba	2.60%	0%	0%	0.75%	1%	2.01%*	2.0%^	2%	2%		
Saskatchewan	0%	1%	2%	2%	5.50%	3%	2%	2%	-		
Alberta	0%	0%	Overall fee reduction currently unknown	0%	1%	1%	1%	TBD	TBD		
British Columbia	1.80%	1.59%	1.01%	1.01%	3.42%	6.02%	3.18%	1.80%	1.59%		
Northwest Territories											
Yukon (2022)	1%	1%	1.25%	1.25%	2%	2%	2.50%	TBD			

[1] Variable by year and specialty (See MOA Schedule "F")

Table 3 focuses primarily on across-the-board increases. Many jurisdictions, including Nova Scotia, often have additional targeted investments in specific specialties or incentives, which are more than the increases noted above. Although it is difficult to determine total investment in each province, Nova Scotia has generally been about middle-of-the-pack in terms of across-the-board increases over this nine-year period compared with the other provinces (Nova Scotia saw an annualized increase of 2.17%, compared to a range from 1% to 3% among the other provinces). In addition to the fee schedule increase, a significant portion of the funding secured in the 2023–27 Physician Agreement was incentive funding for targeted areas (with a particular focus on LFM and stabilizing regional specialty services).

Across Canada, medical associations’ most recent negotiations with provincial governments have seen notably higher increases. This includes:

- Prince Edward Island’s 2.3% increases annually from 2020–21 to 2023–24, 0% increase for 2024–25, then a large bump (up to 30% average) in 2025–26 and 0% increase for 2026–27. Then 1% increases every six months through 2027–28 and 2028–29.
- Saskatchewan’s 2% or 3% increases annually from 2022–23 to 2025–26, plus a lump sum payment of 2.5% in the first year.
- Newfoundland and Labrador’s recent new contract increases ranged from 2% to 21.94% by specialty for 2024–25, followed by 3.5% increases in 2025–26 and 2026–27.
- New Brunswick’s general increases of 2.5%, 3.5%, 2.5% and 4% between 2025 and 2029, plus targeted funding.

Since 2018–19, Nova Scotia has generally had higher MSU increases than other provinces (Nova Scotia saw an annualized increase of 2.17%, compared with a range of 1% to 3% among the other provinces).

Conclusion – Macro Analysis

These macro-level data points confirm that Nova Scotia’s total spending on physician services is less than the national average:

- Despite significant investments in recent years, Nova Scotia’s health budget as a percentage of total government spending and physician services budget as a percentage of total health budget are still both below the Canadian average.
- Nova Scotia’s spending on physician services on a per capita basis is also below the Canadian average.
- While Nova Scotia’s across-the-board increases in the past nine years have kept pace with other provinces, most recent negotiations (in P.E.I. and New Brunswick in particular) have resulted in sizeable new investments in physician services.

Micro Level

Micro-level analysis seeks to compare physician compensation at an individual or specialty level. MSI data was used to calculate funding per physician; data from the Workers’ Compensation Board (WCB) and community services was excluded from this analysis. Included in the analysis were the following payments for 2023–24:

- FFS billings
- APP billings
- LFM payment model payments
- Level 3 and 4 Emergency Room (ER) billings
- non-patient specific billings
- miscellaneous (Physician Agreement) billings
- sessional billings
- psychiatry billings
- reciprocal billings
- on-call payments

To ensure these billings represent the appropriate proportion of billings compared to the physician services budget, reconciliation to the budget was also completed. The reconciliation of these payments compared to the 2023–24 physician services budget is outlined in Table 4.

Table 4
Reconciliation to Physician Services Budget Forecast
For 2023–24

Programs and Services	
Fee for Service	404,494,000
Academic Funding Plans	311,969,000
Alternative Payment Plans	112,122,000
Longitudinal Family Medicine	87,749,000
Emergency Departments	82,452,000
Physician Residents	48,556,000
Other Physician Agreement Initiatives	24,411,000
Facility On Call	14,199,000
Physician Services – Other Programs	61,634,000
	<u>1,147,586,000</u>
DNS Physician Payments	634,039,714
DNS Group	423,552,603
Physician Residents	48,556,000
	<u>1,106,148,317</u>
Difference	<u>41,437,6823</u>
	3.6%

The reconciliation is within 3.6% of the physician services budget, which confirms that confidence in the analysis should be quite strong. Note that the reconciliation is based on the last year of full physician compensation data and the year used was different than the per capita analysis by province above (Table 2).

Internal Comparison (Comparing Specialties within Nova Scotia)

For the analysis of Nova Scotia physician payments, the average, median, 70th percentile and average net income after estimated overhead was calculated for each of the major sections that have billings outside of clinical/academic funding plans (C/AFP), including:

- Anaesthesia
- Cardiology
- Clinical Immunology and Allergy
- Dermatology
- Gastroenterology
- General Surgery
- Haematology
- Internal Medicine
- Medical Oncology
- Nephrology
- Neurology
- Obstetrics and Gynecology
- Ophthalmology
- Orthopedics
- Otolaryngology
- Pathology
- Pediatrics
- Plastic Surgery
- Psychiatry
- Radiology
- Rheumatology
- Urology

The methodology for the analysis was to include all billings/payments from the sections above by individual physician and have a threshold to include all physicians with billings/payments greater than \$100,000.

Once the physicians with billings/payments less than \$100,000 and their associated billings/payments were trimmed, the average payment per specialty was calculated by totalling the remaining MSI billings of each specialty, divided by the number of remaining physicians within the specialty.

The median is the individual physician at the mid-point, i.e., if there were 99 physicians in a section, the meridian would be the billings/payments of the 50th physician. Like the median, the 70th percentile is the individual physician whose billings/payments are at 70%

of 100% in terms of number of physicians, i.e., the billings/payments of the 70th physician within a specialty group of 100.

The average net income after estimated overhead is calculated by multiplying (one minus the standard overhead percentage by specialty) per specialty by the average billings/payments per specialty. This provides an estimated net income before taxes by specialty.

Appendix A provides the average, median and 70th percentile for physician payments from MSI by specialty in Nova Scotia for 2024–25.

To provide relativity between specialties on a Nova Scotia basis, the Family Medicine (FM) results are used as a baseline against the other specialties. Table 5 provides the relativity by specialty in Nova Scotia compared to the FM baseline for average billings/payments, median billings/payments, 70th percentile and estimated average net income before taxes.

Summary of Average, Median, 70th Percentile Billing Relativity Compared to Family Medicine Physician Payments for 2023/24

Specialty	# of Phys	Average	Base Rate	% of BR	Specialty	# of Phys	Median	Base Rate	% of BR	Specialty	# of Phys	70th Percentile	Base Rate	% of BR	Specialty	# of Phys	Estimated Net Income	Base Rate	% of BR
Family Medicine	815	327,371			Family Medicine	815	310,435			Family Medicine	815	384,457			Family Medicine	815	224,445		
Rheumatology	XX	XX	XX		Rheumatology	XX	XX	XX		Rheumatology	XX	XX	XX		Rheumatology	3	166,691	74.3%	
Pediatrics	44	301,318	92.0%		Pediatrics	44	293,660	94.6%		Pediatrics	44	358,921	93.4%		Pediatrics	44	206,584	92.0%	
Med Oncology	XX	XX	XX		Internal Medicine	71	307,663	99.1%		Med Oncology	XX	XX	XX		Med Oncology	2	234,949	104.7%	
Psychiatry	76	352,432	107.7%		Neurology	12	317,472	102.3%		Haematology	XX	XX	XX		Haematology	2	266,945	118.9%	
Haematology	XX	XX	XX		Med Oncology	XX	XX	XX		Neurology	12	399,712	104.0%		Neurology	12	271,641	121.0%	
Neurology	12	370,601	113.2%		Psychiatry	76	331,822	106.9%		Dermatology	15	428,358	111.4%		Psychiatry	76	278,344	124.0%	
Dermatology	15	396,496	121.1%		Haematology	XX	XX	XX		Internal Medicine	71	445,697	115.9%		Dermatology	15	290,622	129.5%	
Internal Medicine	71	398,684	121.8%		Dermatology	15	384,198	123.8%		Psychiatry	76	470,078	122.3%		Internal Medicine	71	292,225	130.2%	
Clinical Immunology and Allergy	5	423,012	129.2%		Orthopedics	31	396,855	127.8%		Orthopedics	31	501,066	130.3%		Orthopedics	31	298,628	133.1%	
Orthopedics	31	425,034	129.8%		Plastic Surgery	7	421,744	135.9%		Pathology*	14	504,680	131.3%		Obs-Gyn	41	308,701	137.5%	
Anae - Total	52	461,791	141.1%		Anae - Total	52	460,556	148.4%		Anae - Total	52	514,396	133.8%		Clinical Immunology and Allergy	5	310,057	138.1%	
Pathology*	14	465,367	142.2%		Pathology*	14	463,417	149.3%		Clinical Immunology and Allergy	5	539,389	140.3%		Plastic Surgery	7	316,866	141.2%	
Plastic Surgery	7	470,026	143.6%		General Surgery	46	503,098	162.1%		General Surgery	46	575,750	149.8%		General Surgery	46	351,446	156.6%	
General Surgery	46	473,772	144.7%		Clinical Immunology and Allergy	5	506,714	163.2%		Obs-Gyn	41	575,944	149.8%		Anae - Total	52	376,906	167.9%	
Obs-Gyn	41	492,344	150.4%		Obs-Gyn	41	526,513	169.6%		Plastic Surgery	7	586,974	152.7%		Pathology*	14	379,465	169.1%	
Gastroenterology	5	572,006	174.7%		Gastroenterology	5	546,915	176.2%		Gastroenterology	5	605,240	157.4%		Gastroenterology	5	419,266	186.8%	
Urology	25	646,271	197.4%		Cardiology	10	674,351	217.2%		Cardiology	10	729,824	189.8%		Otol	14	445,244	198.4%	
Nephrology	16	648,930	198.2%		Urology	25	693,064	223.3%		Nephrology	16	774,308	201.4%		Urology	25	473,047	210.9%	
Otolaryngology	14	657,961	201.0%		Otol	14	699,714	225.4%		Urology	25	827,107	215.1%		Nephrology	16	473,461	210.9%	
Cardiology	10	674,624	206.1%		Nephrology	16	723,955	233.2%		Radiology	104	881,274	229.2%		Cardiology	10	494,482	220.3%	
Radiology	104	755,321	230.7%		Radiology	104	728,423	234.6%		Otol	14	906,941	235.9%		Ophthalmology	43	568,842	253.4%	
Ophthalmology	43	918,725	280.6%		Ophthalmology	43	945,574	304.6%		Ophthalmology	43	1,126,290	293.0%		Radiology	104	615,897	274.4%	

* Does not include List B Stipends
 Note: AFP payments
 Physician groups with less than 5 have data removed due to confidentiality purposes.

For average billings/payments, the lowest sections compared to the baseline of FM billings/payments are Rheumatology, Pediatrics and Medical Oncology, where billings/payments are below the FM average. There are five sections where the average billing/payments are at least twice the FM average: Nephrology (198%), Otolaryngology (201%), Cardiology (206%), Radiology (231%) and Ophthalmology (281%).

For median billings/payments, Rheumatology, Pediatrics and Internal Medicine are the lowest sections compared to the baseline of FM billings/payments, all below the FM median base. The sections with the highest billings/payments compared to the FM median are Urology (223%), Otolaryngology (225%), Nephrology (233%) Radiology (234%) and Ophthalmology (303%).

For the 70th percentile billings/payments, the lowest sections compared to the baseline of FM billings/payments are again Rheumatology, Pediatrics and Medical Oncology, which all fell below the FM 70th percentile billing/payments base. Five sections more than doubled the FP 70th percentile billings/payments baseline: Nephrology (201%), Urology (215%), Radiology (229%), Otolaryngology (236%) and Ophthalmology (293%).

For the estimated average net income after overhead, the sections below the baseline of FM billings/payments are Rheumatology at 74% and Pediatrics at 92%. Five sections exceeded twice the FM billings/payments baseline: Urology (210%), Nephrology (211%), Cardiology (220%), Ophthalmology (253%) and Radiology (274%). Ophthalmology dropped from the top ranking due to high overhead costs compared to the other top specialties.

While the relativity gap is still large between FM specialists and many of the specialties, there is slight improvement (closing of gap) meaning that FM compensation is growing at a higher rate (on a percentage and dollar value) than most of the other specialties. More work is needed but slowly improving.

Gender Equity

Gender equity in physician compensation in Nova Scotia is an ongoing concern and significant gaps remain.

Documented Pay Gap: Across Canada, including in Nova Scotia, female physicians earn less than male physicians even after adjusting for specialty, hours worked and experience. National studies report gaps of 16 to 26%, and these trends are reflected locally.

Structural Issues: The gap is driven by multiple factors, including:

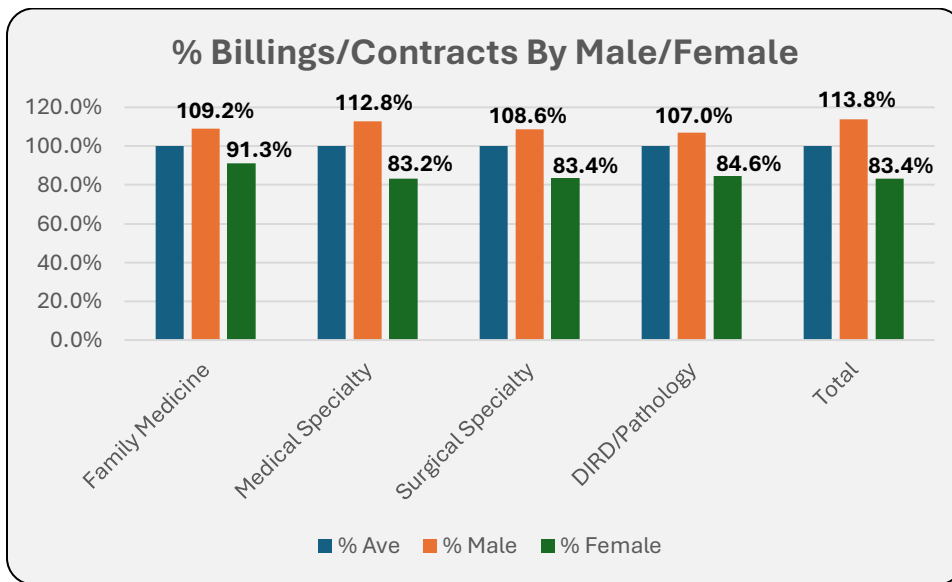
- Fee code bias: Certain fee codes undervalue work typically done by female physicians (e.g., longer consults, non-procedural care) and services provided to female patients.
- Specialty distribution: Female physicians are underrepresented in higher-paying specialties and overrepresented in lower-paying specialties like FM and pediatrics.
- Patient and referral patterns: Studies have shown that both referral patterns (the type and volume of referrals to female physicians) and patient behaviour (patients talk more overall with female physicians compared to male physicians) also contribute to the gender pay gap.
- Work patterns and family/care responsibilities: Female physicians are more likely to take maternity leave, work less than full time or make career choices to support family responsibilities. These patterns *do not fully explain* the gap, but they contribute to differences in annual earnings.

- Other systemic factors: Research shows that women often face other systemic barriers such as differences in career trajectory, leadership or academic opportunities, and are more likely to take on unpaid administrative tasks.

Doctors Nova Scotia Initiatives: At the 2024 DNS annual general meeting, members passed a motion asking the association to conduct a comprehensive review of gender-based bias in fee codes and remuneration. Doctors Nova Scotia plans to advocate for gender equity during future Physician Agreement negotiations and to review egregious biases in the MSI *Physician’s Manual*. The association will also continue to pursue alternative funding arrangements where appropriate, which can be a more efficient mechanism (compared to fee code changes) to address some of the structural issues contributing to the gender pay gap.

Key Challenges: Fee-for-service models inherently reward volume over time spent per patient, disadvantaging physicians who provide more comprehensive care. In addition, the lack of transparent, standardized compensation data by gender in Nova Scotia makes monitoring progress difficult.

The following is a breakdown of payments/billings by male and female physicians in Nova Scotia compared to the average based on the high-level specialty. It shows a gender pay gap ranging from 18% in family medicine to 30% in other specialty areas.



Appendix B provides further details on each specialty.

Compensation Relative to Other Provinces

As part of preparing for contract negotiations, DNS requests physician billing information from each of the provincial medical associations across Canada. The request includes specific information based on specialty, threshold based on trimming physicians who had billings/payments under \$100,000, and identifying whether the payments include on-call and incentives. Access to this information varies by medical association. Some could not provide a true comparison. As of January 2025, all provinces except Quebec have provided data.

A summary of results is outlined in Table 6.

Table 6
Summary of Physician Payments (FFS/APP, excludes AFP)
By Average For 2023/24 and 24/25 for PEI and Alberta
By Specialty Comparison to Canadian Average

Specialty	# Of Phys	NS	CDN	NS as % of CDN Ave	NS as % of ATL Ave
		Average Payment (\$)	Average Payment (\$)		
Family Practice	815	327,371	346,241	94.6%	108.8%
ANAE	52	461,791	457,242	101.0%	117.3%
Cardiology	10	674,624	806,030	83.7%	121.8%
Clinical Immunology and Allergy	5	423,012	520,813	81.2%	n.a.
Dermatology	15	396,496	732,061	54.2%	57.0%
Gastroenterology	5	572,006	651,511	87.8%	101.3%
Internal Medicine	71	398,684	455,147	87.6%	94.6%
Nephrology	16	648,930	602,205	107.8%	121.2%
Neurology	12	370,601	430,565	86.1%	84.1%
Pediatrics	44	301,318	362,755	83.1%	84.7%
Psychiatry	76	352,432	374,718	94.1%	107.2%
General Surgery	46	473,772	539,755	87.8%	95.1%
Obs/Gyn	41	492,344	470,276	104.7%	110.4%
Ophthalmology	43	918,725	1,203,859	76.3%	86.9%
Orthopedics	31	425,034	609,328	69.8%	72.4%
Otol	14	657,961	643,520	102.2%	108.0%
Plastic Surgery	7	470,026	594,901	79.0%	78.9%
Urology	25	646,271	645,109	100.2%	104.7%
Pathology*	12	424,747	530,925	80.0%	100.1%
Radiology	99	695,397	895,325	77.7%	98.6%
Total	1,439	373,543	466,836	80.0%	90.2%

Notes:

Specialties above 100% of the Canadian average noted in blue font; those below 80% in red font.

1. On-call data is included now
2. SK used a \$60k threshold cut-off
4. NL data is from 2021/22
5. PEI data is from 2024/25
6. AB data is from 2024/25
7. NL, AB and BC did not include Pathology data (likely salary)
8. SK rolled Pathology and Radiology into one average

From the analysis as it stands now, Nova Scotia overall billings/payments per physician are 80% of the Canadian average. The Nova Scotia specialities with the lowest billings compared to the Canadian average are Dermatology (54.2%), Orthopedics (69.8%), Ophthalmology (76.3%) and Radiology (77.7%). The sections above the Canadian average are Anaesthesia, Nephrology, Obstetrics and Gynecology, and Otolaryngology. Again, this is not a true apples-to-apples comparison as the information provided varied by province. Saskatchewan has different threshold and some provinces included incentives while others don't.

Table 7 provides an overview of data collected by province and variances to Nova Scotia's data.

Table 7
Provincial Physician Payment Data
With Thresholds, On-Call, Incentives and Other
For 2025–26

Jurisdiction	Threshold	On Call	Incentives	Other	# of Years % Applied
NS	\$100k	Included	Included	2023–24	2 years
PE	\$100K	Included	No CME/Retention	2024–25	Projected
NB	\$100k	Included	Included	2023–24	2 years
NL	\$100k	Included	Included	2021–22	Lump sum + 1 year
QC	No data	No data	No data	No data	No data
ON	\$100k	Included	Included	2023–24	No % inc
MB	\$100k	Included	No	2023–24	2 years
SK	\$60k	Included	Included	2023–24	2 years
AB	\$100k	Included	Excluded	2024–25	1 year
BC	\$100k	Included	Excluded	2023–24	2 year

To provide a better comparison, DNS developed estimates (proxies) to try to align the billings/payments per physician by province. While it is not totally accurate, the results should be directionally correct. Each province that used a different threshold than Nova

Scotia's \$100,000 was adjusted up as applicable by applying percentages that represent the differences between the thresholds by specialty. Provinces that provided previous year's data were brought forward to 2025–26 values using their fee schedule increases. Prince Edward Island used projected data, while the calculation for other provinces used their schedule of benefits increases as provided in the CMA e-scan.

Table 8 provides the revised Canadian average billings/payments per physician compared to the Nova Scotia averages with these adjustments applied.

Table 8

**Revised Summary of Physician Payments (FFS/APP, excludes AFP) Based on Adjustments
By Average For 2025/26
By Specialty Comparison to Canadian Average**

Specialty	# Of Phys	NS	CDN	NS as % of CDN Ave	NS as % of ATL Ave
		Average Payment (\$)	Average Payment (\$)		
Family Practice	815	333,919	373,492	89.4%	98.9%
ANAE	52	471,028	477,531	98.6%	113.2%
Cardiology	10	688,117	828,502	83.1%	119.7%
Clinical Immunology and Allergy	5	431,473	401,572	107.4%	n.a.
Dermatology	15	404,427	776,865	52.1%	52.5%
Gastroenterology	5	583,447	678,159	86.0%	95.4%
Internal Medicine	71	406,659	492,237	82.6%	85.4%
Nephrology	16	661,910	642,394	103.0%	111.0%
Neurology	12	378,014	455,011	83.1%	77.5%
Pediatrics	44	307,346	389,682	78.9%	78.6%
Psychiatry	76	359,482	405,817	88.6%	98.6%
General Surgery	46	483,248	592,278	81.6%	88.1%
Obs/Gyn	41	502,192	513,749	97.8%	97.2%
Ophthalmology	43	937,101	1,290,110	72.6%	81.2%
Orthopedics	31	433,535	660,204	65.7%	66.9%
Otol	14	671,121	701,468	95.7%	99.4%
Plastic Surgery	7	479,428	653,353	73.4%	71.8%
Urology	25	659,198	686,861	96.0%	98.0%
Pathology*	12	433,243	567,420	76.4%	110.0%
Radiology	99	709,306	935,310	75.8%	93.1%
Total	1,439	417,449	474,084	88.1%	91.5%

Notes:

Specialties above 100% of the Canadian average noted in blue font; those below 80% in red font.

PMTA average payments adjusted for a better comparison:

- SK were modified to provide a proxy for \$100K threshold
- Provinces were brought to 25/26 value using fee schedule increases except PEI which used specific increases.

For this analysis, the Nova Scotia total average billings/payments is \$417,000 per physician, representing 88.1% of the Canadian average. The Nova Scotia specialities with the lowest billings/payments compared to the Canadian average are Dermatology (52.1%), Orthopedics (65.7%), Ophthalmology (72.6%) and Plastic Surgery (73.4%). The only section above the Canadian average is Nephrology (103%). All provinces except British Columbia and Alberta have newer contracts with large increases in physician services.

Canadian Institute for Health Information Data

For cross-Canada comparisons, CIHI releases provincial physician billings by specialty. The methodology for development is consistent between provinces. The institute has recently revamped the methodology based on feedback from the provincial/territorial medical associations and while results seem more representative, there might be some data inconsistencies between provinces. The data is usually a couple of years out of date.

To test the validity of the CIHI data, DNS completed a reconciliation with MSI FFS billings. Comparing the CIHI data to the MSI data, CIHI average gross clinical payment per physician multiplied by number of physicians is $\$336,603 \times 2,488 = \837.5 million, while the MSI FFS/APP billings plus AFP funding for 2022–23 was \$854 million. These numbers are reasonably close (within 2%) when you consider the billings of physicians making less than \$60,000. While the Nova Scotia number of \$854 million is higher, it includes all physicians, including those that bill less than \$60,000. If those physicians were removed from the Nova Scotia data, this would lower the amount and bring it closer to the CIHI amount of \$837.5 million.

This suggests that the CIHI data, while not perfectly precise, is directionally accurate and therefore a useful comparison.

Appendix C provides CIHI data on average gross clinical services payments by physicians who received at least \$60,000. The results show:

- Overall, Nova Scotia ranked ninth out of 10 (Saskatchewan did not report data but Yukon is the only territory to include data) and was 84.5% of the Canadian average.
- For FP, Nova Scotia ranked eighth out of 10 and was 82.5% of the Canadian average.

Nova Scotia total average billings/payments is \$417,000 per physician, representing 88.1% of the Canadian average.

The Nova Scotia specialities with the lowest billings/ payments compared to the Canadian average are:

- **Dermatology (52.1%)**
- **Orthopedics (65.7%)**
- **Ophthalmology (72.6%)**

The only specialty above the Canadian average:

- **Nephrology (103%)**

- For medical specialties, Nova Scotia ranked ninth out of 10 and was 80.4% of the Canadian average.
- For surgical specialties, Nova Scotia ranked seventh out of 10 and was 93.1% of the Canadian average.

The specialties with the lowest percentage compared to Canadian average are:

- Cardiology at 57.6% of Canadian average
- Gastroenterology at 62.7% of Canadian average
- Physical Medicine at 67.0% of Canadian average
- Internal Medicine at 76.3% of Canadian average

The three specialties with the highest percentage compared to the Canadian average are:

- Urology at 102.7% of Canadian average
- Neurology at 102.9% of Canadian average
- Plastic Surgery at 119.7% of Canadian average

One of the limitations in comparing FFS data, whether it is from CIHI or MSI, is that average payments do not take into consideration volumes or work intensity. It is difficult to determine how many services were provided or how long a physician worked to earn the payments.

Nova Scotia physicians generally fall in the bottom third of the provinces in most of the comparison metrics, including physician funding per capita and funding per physician (using both CIHI and MSI data).

Top Billing Codes by Specialty

Finally, for physician compensation, the top five billing codes by specialty were compared to comparable codes across the other provinces within Canada. Appendix D includes the top five billing codes for each specialty and the comparison to the Canadian average.

This analysis has some weaknesses, as comparable codes in other provinces can be difficult to determine and other fee codes may or may not include procedures that Nova Scotia's fee codes include. While most physician manuals are updated every year (for this work, 2025 was the most recent update), the Newfoundland and Labrador fee manual still

has 2019 rates. Additionally, the fees are not weighted based on service volumes, so it is a straight fee comparison.

That said, overall, Nova Scotia fared well in the comparison relative to the Canadian average. Nine to 11 specialties were shown to be above the Canadian average and six to eight below the Canadian average, depending on the analysis. The range includes a low of 75.8% to 80.6% of the Canadian average for neurology and a high of 122.3% for radiology. It should be noted that the 2025–26 numbers have improved slightly over the last analysis (2022–23). This is likely due to higher fee increases in Nova Scotia compared to Canadian average. Additionally, many of the specialties that were below the Canadian average (CLIA, Neurology, Internal Medicine) now have daily guarantees, which minimizes the impact of lower fee codes relative to other provinces.

While *procedures* in Nova Scotia are generally competitive with other provinces, this analysis also shows that payment for *consults* is low. Generally, most specialties in Canada have major consults with higher fees compared to Nova Scotia. Appendix E shows the Nova Scotia consults by specialty compared to the Canadian average. On the low average, Nova Scotia is under by \$12 or more for consults for Internal Medicine, Family Medicine, Neurology and General Surgery. Almost all consults are under the Canadian average when compared to the Canadian high average. Introducing major consults for non-prolonged consults or allowing prolonged consults for all specialties would benefit Nova Scotia physicians who bill consults.

Overall, Nova Scotia fared well in the comparison to the fee code Canadian average. The range includes a section low range of between 75.8% to 80.6% of the Canadian average for Orthopaedics and a high of 122% for Radiology.

Billings per Service by Specialty by Year

This gives a view of the average billing per service by specialty. This considers the physician count, volume of services and service mix (visits, procedures, tests, etc.). Appendix F provides the billing per service details by specialty.

The specialties that have the higher billings per service are Cardiovascular/Thoracic Surgery, Anaesthesia, Psychiatry and General Surgery. These specialties tend to have longer interactions (procedures or consults) with patients. The specialties with the lowest billings per service are Family Medicine, Radiology and Pathology. These specialties tend to have shorter interactions (visits or tests) with patients.

For this analysis, Nephrology should be ignored, as the fee code structure for this specialty was changed in 2021. The most common billing code for Nephrology was modified to a daily fee from a weekly or monthly fee. This has distorted the results for this specialty and therefore the analysis is not representative of the current view.

The year-over-year growth for the Nova Scotia average billing per service is 15.2% for 2019–20 to 2024–25. The average MSU increase over this time is 11.5%. This means that a larger mix of services with higher rates were billed each year.

The specialties with the highest year-over-year growth were Vascular Surgery, Obstetrics and Gynecology, and Family Practice. Obstetrics and Gynecology and Family Practice were targeted specialties in previous negotiations so this shows the impact of those investments.

The specialties with the lowest year-over-year growth were Internal Medicine, Clinical Immunology and Allergy, and Neurology. Internal Medicine was the only specialty in Nova Scotia where growth was less than the MSU increase. Again, the daily guarantee for Internal Medicine has helped this situation.

Other Health-related Agreements

Negotiated in Nova Scotia

Appendix G provides the annual wage increases negotiated through the various unions for healthcare and other government workers with the province of Nova Scotia since 2014–15.

The average annual wage increase (excluding DNS) in these agreements is 2.2%. While the increases included in the contracts range from 0% to 4.5% (excluding the one-year 11% bump for IWK nurse practitioners, see below) per year, the most recent contracts have been for three or four years with wage increases usually between 2% and 4% per year. It should be noted that the Nova Scotia Council of Nursing for IWK Nurse Practitioners saw an 11% bump in 2022–23 and then increases of 3.5% and 2% over the next two years. Newer contracts have been starting in or around November.

The 2023–27 Physician Agreement provided an average of 2.5% per year in across-the-board increases, plus sizeable targeted funding investments. This is favourable compared with the average 2.2% increase in the Nova Scotia government’s recent labour negotiations.

Physician Supply and Migration

The CMA has not updated physician statistics since 2019 and therefore other sources were used. The data is coming from internal DNS database, the College of Physicians and Surgeons of Nova Scotia, CMA e-scan, CIHI and Statistics Canada.

Current Physician Supply

In 2024, Nova Scotia had the third highest number of physicians per capita in Canada.

On average, there were 374 persons per physician in Nova Scotia compared to the Canadian average of 426. The ratio is total population divided by number of physicians. For comparison, there were 396 persons per physician in Nova Scotia and 437 persons per physician in Canada in 2019. This shows a slight improvement over the last five years. It is important to remember, particularly when looking at ratios for medical and surgical specialists, that Nova Scotia physicians often provide services to people from across Atlantic Canada, not just to Nova Scotians. It is also important to remember that Canada overall has fewer physicians per capita than most other developed countries with strong healthcare systems.

Appendix H includes the number of new members to the province for 2018–25 year to date (YTD), members who left the province in 2022–25 YTD, retired physicians for 2022–25 YTD and net physician increases for 2022–25 YTD.

Since 2018, there has been average increase of 172 physicians per year coming to the province. It is a great sign that the most recent years have shown the largest increases – there were 246 new physicians in Nova Scotia in 2022, 205 new physicians in 2023 and 275 new physicians in 2024.

The gender breakdown of new physicians since 2018 averages to 47.5% female and 52.5% male. Each year has some variation but is relatively small to this average.

There have been 1,372 new physicians starting practice in Nova Scotia since 2018. Of this total, 597 were in FP, representing the largest portion of new physicians (43.5% of the total physicians added). Family practice was one of the targeted areas in the last two contracts. The other targeted areas in the last two contracts were Psychiatry, which added 103 new physicians (7.5% of the total); Anaesthesia, which added 71 new physicians (5.2% of the total); Emergency Medicine, which increased by 50 new physicians (3.6% of the total); and Obstetrics/Gynecology, which added 35 new physicians (2.6% of the total).

On the other hand, 298 physicians have left the province since 2022, which averages out to 75 per year. Of this total, 113 physicians were in FP, again the largest portion (37.9%) of those who left. Looking at the other practice areas targeted in the last two contracts, we see that 14 psychiatrists left (4.7% of the total), 22 anaesthesiologists left (7.4% of the total), 12 emergency medicine physicians left (4% of the total) and six obstetricians/gynecologists left (2% of the total).

Since 2022, 143 physicians have retired; an average of 36 per year. Of this total, 67 of the retirees were family physicians, representing the largest portion (46.9%). Retirees from the other areas targeted in the last two contracts were Psychiatry (10 physicians retired, or 7% of the total); Anaesthesia (eight physicians retired, or 5.6% of the total), Emergency Medicine (six physicians retired, or 4.2% of the total) and Obstetrics/Gynecology (five physicians retired, or 3.5% of the total).

On a net increase basis, we've seen a total of 454 additional physicians practising in the province. Of this total, 191 physicians were in FP, again the largest portion (42.1%). Looking again at the other targeted areas from the last two contracts, we saw 42 new psychiatrists (9.3% of the total), 20 new anaesthesiologists (4.4% of the total), 12 new emergency medicine physicians (2.6% of total) and, finally, 10 new obstetricians/gynecologists (2.2% of the total). The only specialty to see a decline in total physicians since 2022 has been Pathology.

This is good evidence that the targeted funding investments from the last two contracts have been successful in attracting physicians from those specialities, and other physicians, to the province.

These trends are confirmed by data showing physician counts by billing by specialty, which shows strong growth between 2019–20 and 2024–25. Overall, the number of physicians billing more than \$100,000 per year in Nova Scotia has grown by 19.6%. Family Practice specialties have grown by 21.4%, IM specialties have grown by 19% and surgical specialties have grown by 19.4%, while Radiology and Pathology have grown by 12% and 12.5%, respectively.

Appendix I provides the physician counts by specialty from 2019–20 to 2024–25.

Further evidence that funding specific to Longitudinal Family Medicine (LFM) has been successful is the significant decline in the number of the patients on the Need a Family Practice Registry and the corresponding increase in the number of family physicians joining the LFM payment model. The table below provides these numbers.

Table 9

**Need a Family Practice Registry, Population Increase, ME:CARE Billers and LFM Physician Counts
By Month from July 2023 to November 2025 (Data Dependent)**

Monthly Update	# on Registry	Population	Estimated Attached Patients	ME:Care	LFM
July 12, 2022:	100,592	995,000	894,408	857	
July 21, 2023:	152,001	1,025,000	872,999	877	
June 1, 2024:	160,234	1,071,498	911,264	890	475
July 1, 2024:	161,579	1,072,833	911,254	893	482
August 1, 2024:	162,766	1,074,187	911,421	896	487
September 1, 2024:	164,489	1,075,541	911,052	899	508
October 4, 2024:	145,114	1,076,895	931,781	902	532
November 4, 2024:	132,166	1,078,249	946,083	905	540
December 4, 2024:	119,670	1,079,603	959,933	908	540
January 2, 2025:	110,456	1,079,627	969,171	911	550
February 13, 2025:	104,324	1,079,927	975,603	914	551
March 3, 2025:	95,875	1,080,227	984,352	915	558
April 14, 2025:	93,682	1,080,418	986,736	916	592
May 1, 2025:	91,474				
June 1, 2025:	91,423				
July 1, 2025:	89,455				
August 1, 2025:	87,879				
September 1, 2025:	84,069				
October 1, 2025:	77,526				
November 1, 2025:	69,420				
From June 2024 to April 2025	-41.5%	0.8%	8.3%	2.9%	24.6%

Total Registry Decline From Max (September 1, 2024) 95,069

Need A Family Practice Registry Update

<https://www.nshealth.ca/news-and-notice/need-family-practice-registry-update>

ME:Care -MSI Billing Data is annual data based on March 31 of year - straight averages used to develop monthly details

LFM data is net increases - add of 633 and removals of 41 (left LFM)

Population data for April 1, 2025, January 1, 2025, April 1, 2024, July 21, 2023, July 12, 2022

https://novascotia.ca/finance/statistics/archive_news.asp?id=21103&dg=&df=&dto=0&dti=3

Essentially, Nova Scotia’s population is still growing, the number of patients on the Need a Family Practice Registry has significantly dropped. The registry has declined by 95,069 patients from the high reported in September 2024. We believe this decline is due in large part to the investment in LFM in the last contract, which has improved the province’s ability to recruit and retain longitudinal family physicians, resulting in more family physicians billing ME:CARE (attaching patients) and joining the LFM payment model.

Future Physician Supply

The following projections were obtained from MDSearch using reference from CIHI and Statistics Canada to forecast physician supply by 2030. Canada is projected to experience significant physician shortages by 2030, especially in:

- Family Practice – 1,000 physicians needed
- Psychiatry – 300 physicians needed
- Internal Medicine – 400 physicians needed
- Emergency Medicine – 350 physicians needed
- Anaesthesiology – 200 physicians needed
- Pediatrics – 250 physicians needed

Note: Numbers have been rounded to the nearest 10.

Scaling these projections can give us an idea of Nova Scotia's future needs – potentially 65 to 75 additional physicians across these key specialties by 2030, in addition to currently identified recruitment needs and vacancies, and replacement of any departures or retirements. Real needs will depend on factors specific to Nova Scotia: aging demographics, urban-rural service gaps and existing workforce levels. Strategy adjustments – like expanding primary care teams or enhancing rural incentives – can alter requirements.

Wait Times

Nova Scotia has seen improvements in specialist consult to point of treatment wait times, as seen in the latest report from CIHI on wait time performance. Nova Scotia has restored or exceeded volumes for most procedures covered by that report compared to the first year of COVID-19 (2019–20).

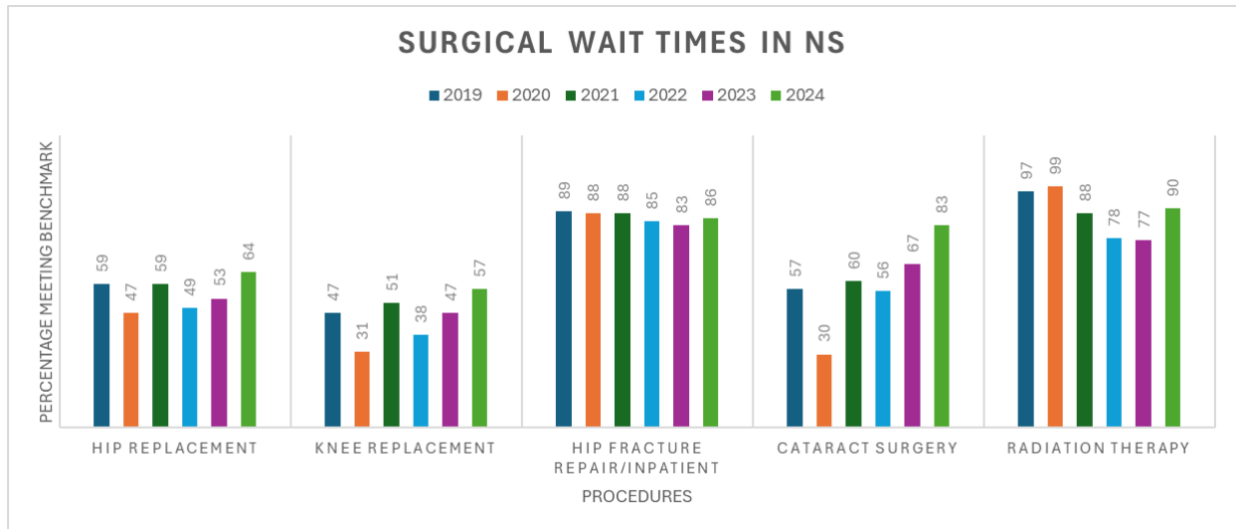


Table 10: Surgical Wait Times in Nova Scotia for six key surgical procedures. Canadian Institute of Health Information Wait Time Performance report (2024)

Further, the Fraser Institute’s “Waiting Your Turn: Wait Times for Health Care in Canada” reports from the previous 10 years show a steady decline back toward 2016 levels for “wait time from the consultation with a specialist to the point at which the patient receives treatment, measured in weeks.” Notably, however, in 2025 Nova Scotia’s 18.3-week average wait time remains five weeks longer than the national average (13.3 weeks); compared to the rest of Canada, Nova Scotia only falls below Quebec (21.8 weeks) and New Brunswick (26.5 weeks).

	Canada	Nova Scotia	BC	AB	ON	QB	NB	PEI	NFLD
2016	10.6	17.7	14.5	12.7	8.4	8.9	17.4	10.5	11.5
2017	10.9	16.1	14.1	14.4	8.6	9.2	15.1	11.4	8.7
2018	11	17.5	14.1	14.9	8.3	9.1	16.6	16	10.8
2019	10.8	17.1	11.3	16	8	9.1	18.5	20.5	12.4
2020	12.1	30.1	13.6	16.1	8.7	10.9	17.3	19.3	15.2
2021	14.5	34.1	13.9	17.5	10.3	17.7	22.6	17.5	10.7
2022	14.8	21	13.4	19.2	10.2	18.5	23.9	23	16.6
2023	13.1	28.4	13.7	17.2	8.5	15.3	26.3	27.8	8
2024	15	13.7	14.4	19.2	10.9	19.8	35.4	37.6	17.8
2025	13.3	18.3	12.4	17.3	8.5	21.8	26.5	16.1	13.3

Table 11: Wait time from the consultation with a specialist to the point at which the patient receives treatment, in weeks. Fraser Institute. Waiting your Turn: Wait Times for Healthcare in Canada reports – last 10 years.

British Columbia is the only province in Canada in 2025 to see wait times from specialist consult to time of treatment for patients lower than its 2016 numbers (14.5 weeks in 2016, 12.4 weeks in 2025). Ontario has been able to restore specialist consult to treatment wait times back to 2016 levels, but all other provinces in Canada continue to see an increase over the 2016 numbers.

Comparatively, according to the Fraser Institute wait time reports over the last 10 years, Nova Scotia is failing in its attempt to decrease wait times for referrals from a family physician to a consultation with a specialist. Nova Scotia has the third highest wait time for referral by a GP to consultation with a specialist at 30.7 weeks, ahead of only Prince Edward Island (33.6 weeks) and New Brunswick (34.4 weeks). Notably, Nova Scotia’s wait time from referral by a GP to consultation with a specialist is double the national average of 15.3 weeks.

However, Nova Scotia is not unique in its inability to return to pre-COVID-19 wait times for referral from GP to specialist consult. No other province has been able to restore wait times to 2016–20 levels, with an across-the-board increase of two to 12 weeks. While it’s clear that all provinces are trending upward for wait times for patients moving between primary care and specialists, the latest numbers for Nova Scotia are particularly worrisome. With an aging population, more than 65,000 Nova Scotians without a family physician and heightened levels of physician burnout, increasing wait times from primary care to specialty care create an environment where it’s easy for patients to fall through the cracks.

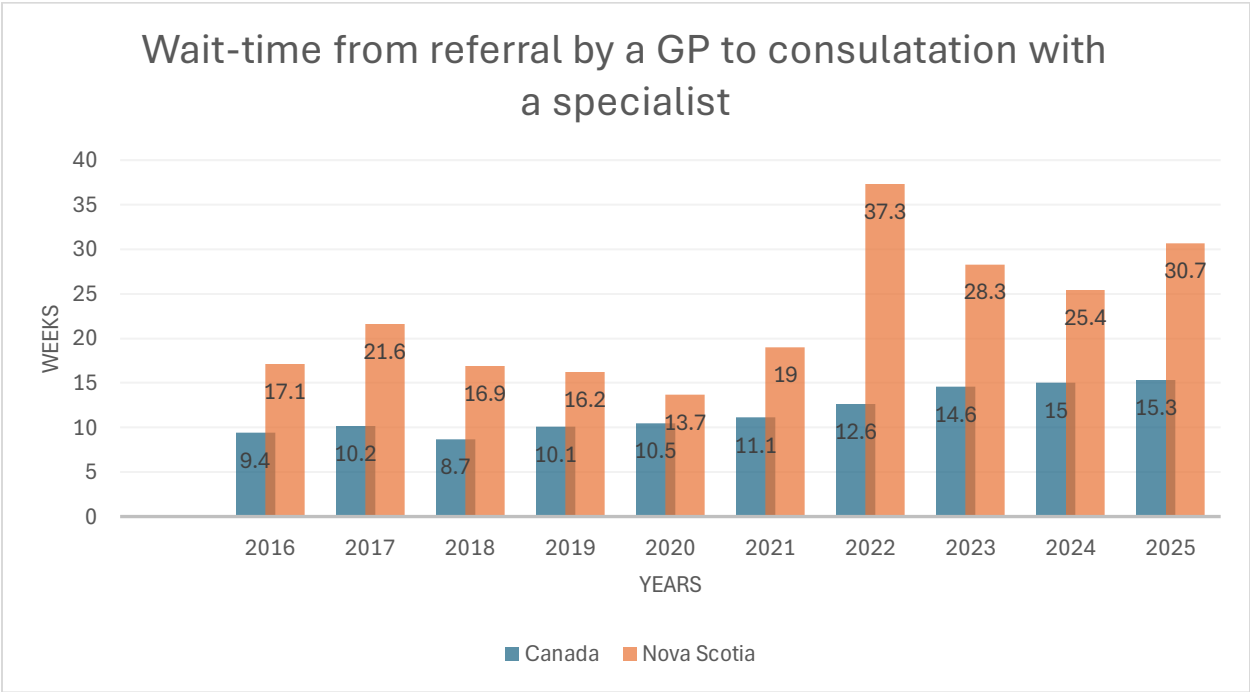


Table 12: Wait time from referral by a GP to consultation with a specialist, in weeks. Fraser Institute. Waiting your Turn: Wait Times for Healthcare in Canada reports – last 10 years.

Nova Scotia has the third highest wait time for referral by a GP to consultation with a specialist at 30.7 weeks. This is double the national average of 15.3 weeks.

Fiscal Reality

Nova Scotia has recovered from the economic effects of the COVID-19 pandemic. That said, the economy is unstable due to the impact of tariffs, global uncertainty and a tough fiscal environment. Inflation has stabilized a bit after seeing 40-year highs. The Nova Scotia government's latest forecast (not budget) is a \$1.25 billion deficit for 2025–26. This is much worse than the 2024–25 budget. Nova Scotia is projecting large deficits for the next few years: \$1.191 billion in 2027–28, \$1 billion in 2028–29 and \$809.5 million in 2029–30.

To understand the fiscal reality of Nova Scotia, several key factors were reviewed, including:

- cost of living trend
- personal, business and sales tax rates
- average weekly earnings trend
- population, by demographic trend (aging and chronic disease)
- labour force trend/employment trend/unemployment trend
- Gross Domestic Product trend

Each of these key factors was analyzed and will be highlighted below.

Cost of Living Trend

The cost of living is calculated by the Consumer Price Index (CPI). The CPI is used as an index for inflation. The CPI measures the changes in the price level of a market basket of consumer goods and the services purchased by households, including food, shelter, clothing and footwear. The higher the percentage increase in CPI, the less purchasing power is maintained in every dollar.

The year-by-year Consumer Price Index (CPI) for Nova Scotia, other provinces and Canada from 2015 to 2024, based on information from Statistics Canada, can be found in Appendix J.

For the last 10 years, Nova Scotia had the fifth lowest CPI% increase at 24.79%, compared to the Canadian average of 25.52%. The annualized CPI growth rates for Nova Scotia and Canada are 2.48% and 2.55% respectively. British Columbia led the country with the highest CPI, with a 27.13% increase for 2015 to 2024. The annual CPI growth rate for British Columbia was 2.71%.

In the last year, Canada has seen a leveling in CPI over the previous turbulent years. For 2024, Nova Scotia had a CPI increase of 2.31%. The Canadian average was 2.42%. Alberta, British Columbia, Ontario and Quebec all had higher CPI increases in the last year, ranging from a high of 2.93% down to 2.34%.

Key Insights:

- Nova Scotia shows a slightly higher CPI increase than four provinces, reaching 2.31% by 2024, and slightly lower growth compared to Canada’s overall.
- All provinces follow a similar pattern: steady growth from 2015–20, sharp rise in 2021–22, then slower growth in 2023–24.
- The inflation spike in 2022 is visible across all provinces.

Forecasts for Nova Scotia’s CPI inflation (percentage change) for 2026–30 are not published separately by Statistics Canada, but projections generally follow national trends adjusted for regional factors. Based on Bank of Canada projections and economic outlooks, an approximate forecast for Nova Scotia is 2% per year.

Personal, Business and Sales Income Tax Rates

The federal and provincial governments tax residents on personal, investment and business income and tax consumers when purchasing goods and services. These governments then spend this money on programs and services for their residents. Healthcare, schooling and community services are examples of the types of programs and services governments provide.

A good purchased in Nova Scotia for \$100 in 2014 cost \$124.79 in 2024. This means the average person’s income will have to increase annually at 2.48% to maintain the same purchasing power in the future.

The federal government sets consistent tax rates for all provinces and territories within Canada. The individual provinces are responsible to set their own tax rates and there is a large variation among provincial rates.

Appendix L provides the rates for personal income tax, small business income tax, large corporation tax and sales tax by province.

For personal income (salary and interest) in 2025, Nova Scotia has the second-highest marginal tax rate in Canada at 54% for income greater than \$253,411. Top marginal tax rate for other provinces ranges from 47.5% to 54.8%.

Nova Scotia has a competitive small business tax rate. For 2025, the tax rate is 10.5%, which is Canada's fourth lowest (the range is 9% in Manitoba to 12.2% in Quebec and Ontario). Currently, Nova Scotia does have a small business limit at \$500,000. This is consistent with all other provinces except Saskatchewan and P.E.I., which have a \$600,000 small business limit.

While it is not applicable to many physicians, Nova Scotia (along with New Brunswick) has the third-highest large corporation tax rate at 29%. The average of the provincial tax rates is 27.5%, with Alberta the lowest at 23%.

Nova Scotia is in the middle of the pack for sales tax (HST) rate in Canada at 14% in 2025. This is due to the recent 1% reduction in 2024. Most provinces range from 12% to 15%. Alberta and Saskatchewan have the lowest sales tax rates at 5% and 11% respectively.

Nova Scotia is a heavily taxed province compared to others in Canada, so there is little to no ability to raise taxes to offset increases in expenditures. The province has lowered the HST and small business tax and increased the small business limit, which has helped incorporated physicians as small business operators to be more competitive here than compared to other provinces, which can help recruitment and retention.

Average Weekly Earnings Trend

Average weekly earnings (AWE) is a common economic indicator used to measure quality of employment and the average salary increase of workers. It is obtained by multiplying average weekly hours by the average hourly earnings (rate). Appendix K provides the provincial and Canadian AWE from 2014 to 2025.

For 2025, Nova Scotia's AWE were \$1,157. Nova Scotia is ranked ninth in Canada, ahead of only P.E.I. The Canadian average is \$1,297. The Nova Scotia annualized growth rate for AWE was 3.17% (40.81% in total) from 2014 to 2025 and slightly ahead of the Canadian average

of 3.03% (38.87% in total). British Columbia led the country in AWE percentage annualized growth of 3.17% (40.91% in total), only slightly ahead of Nova Scotia.

Nova Scotia is ranked ninth in Canada with AWE of \$1,157. The Canadian average is \$1,297. Nova Scotia's AWE is about 89% of the Canadian average. Nova Scotia is starting to catch up to the Canadian average and currently has higher growth than the Canadian average over the last 10 years.

Population, by Demographic Trends (Aging and Chronic Disease)

Population – Nova Scotia has the fourth lowest population in Canada (provinces only), with 1,091,857 residents as of 2025. This represents just under 2.6% of the total Canadian population. Only P.E.I., Newfoundland and Labrador, and New Brunswick have smaller populations. Canada has a total population of 41.6 million residents; Ontario has the largest provincial population, at 16.2 million residents, or 38.9% of the total Canadian population.

Since 2022, Nova Scotia's population has increased by 2.5% to 3% per year. The province's population has grown more in the last few years than it has in decades.

Appendix M provides population trends for the provinces and Canada for the years 2015 to 2025.

From 2015 to 2025, Nova Scotia's population grew by 16.3%, slightly higher than the Canadian average of 16.1%. Prince Edward Island, Alberta and British Columbia led Canada in population growth during this time, with rates of 25.9%, 21.1% and 18.5% respectively. Newfoundland and Labrador had the lowest growth over this time at only 4%.

With a growing, older population, Nova Scotia and Canada could see significantly more demands for health services.

Aging – Both Canada's and Nova Scotia's populations are getting older. Appendix N provides a breakdown by age category from 2015 to 2025 for Nova Scotia and Canada. During the last 10 years, Canada's population of people aged 0 to 19 increased by 8.9%, with Nova Scotia slightly lower at 7.2%. Canada is seeing a 19.8% increase in residents aged 20 to 49, but Nova Scotia had higher population growth rate for this age group at 21.3%. Canada and Nova Scotia are seeing small (1.05%) and negative (-3.6%) growth for populations aged 50 to 64 years old, and both Canada and Nova Scotia are seeing

significant growth of the population of those 65 years old and over, at 46.3% and 43.2% respectively.

The portion of Nova Scotia's population aged 65 and older is 22.6%. This is the third highest in Canada, behind Newfoundland and Labrador and New Brunswick. The Canadian average is 19.5%. The median age per resident in Nova Scotia is second highest in Canada at 43.3 years old. Newfoundland and Labrador is the highest at 47.8 years old, and the Canadian median is 40.6 years old.

Nova Scotia's population growth has improved. The province is seeing growth overall and in younger age groups, which is promising for the future. The 65-and-over age group is still growing quickly, which will put extra burden on the province and healthcare system.

Chronic Disease – As a province with an aging population, the burden of chronic disease in Nova Scotia is significant. The median age in Nova Scotia in 2021 was 43.3, the second highest in the country. Compared to other Canadians, Nova Scotians have particularly high rates of chronic illness. Nova Scotia has the country's highest rate of heart disease and second highest rates of arthritis, diabetes and stroke. Nova Scotia's rates of obesity and high blood pressure are also higher than Canadian average. Managing older patients with higher rates of chronic disease will put extra strain on the province's healthcare system in years to come.

Appendix O provides some chronic disease statistics from the Statistic Canada.

Labour Force, Employment and Unemployment Trends

Appendix P provides the trends for labour force, employment and unemployment for all provinces and Canada from 2015 to 2025.

Labour Force – The labour force is residents aged 15 and over who are employed, either part- or full-time, or actively looking for employment. The labour force in Nova Scotia has increased by 17.2% over the last 10 years, while the Canadian average increase was 18.2%. Prince Edward Island led Canada with 27.9% growth in labour force. For 2025 over 2024, Nova Scotia's labour force decreased by 0.5%. This is compared to a 1.2% increase in the Canadian labour force over the same timeframe. Nova Scotia had the second-worst percentage decline in Canada, second only to P.E.I. (-1.1%). Alberta and Saskatchewan had the highest year-over-year growth at 2.3% and 2.0%, respectively.

Employment – The number of employed Nova Scotians has increased by 20.2% between 2015 and 2025, compared to the Canadian average of 18.7%. This was the fourth highest provincial increase. Prince Edward Island leads Canada with 31.7% employment growth. For 2025 over 2024, Nova Scotia's employment declined by -0.7%. The Canadian average

employment is expected to increase by 1.1% over this same timeframe. Alberta led Canada with employment growth of 2.3% for 2025 over 2024.

Unemployment – The number of unemployed people in Nova Scotia has decreased by 13.3% from 2015 to 2025. The unemployment rate is calculated by the number of unemployed individuals divided by the labour force. From 2015 to 2025, Nova Scotia has seen its unemployment rate decrease from 8.9% to 6.5%. In comparison to Canada, the number of unemployed persons nationally has increased by 3%. The Canadian unemployment rate has decreased from 7.2% in 2015 to 6.8% in 2025.

Traditionally, Halifax has a lower unemployment rate than rural Nova Scotia. As of November/December 2025, Halifax’s unemployment rate was between 5.3% and 5.8%, compared to 9.2% to 9.9% in eastern Nova Scotia and 4.2% to 7.5% in western Nova Scotia. The source for this information was Job Bank and Statistics Canada.

While Nova Scotia has posted strong growth in population, labour and employment with a reduction in the unemployment rate over the last 10 years, more recent data suggests that this trend is slowing and potentially slightly reversing.

Gross Domestic Product Trend

Gross domestic product (GDP) is the total value of goods produced and services provided in a country or province for one year. It includes all private and public consumption, government outlays, investments and exports less imports that occur within a defined territory. It is a measurement for how fast the economy is growing.

Appendix Q provides the GDP by province and Canada between 2015 and 2025.

Nova Scotia’s GDP has grown by 21% from 2015 to 2025. This is higher than the Canadian average of 19.8% during the same time. Prince Edward Island and British Columbia had the largest growth for this timeframe, at 33.7% and 31.4%, respectively. Newfoundland and Labrador was the only Canadian province to have negative growth at -2.7%. From 2024 to 2025, Nova Scotia’s GDP grew by 2.7%, compared to the Canadian average of 1.6%. That is the fourth-highest growing GDP in Canada for that time. Prince Edward Island and Saskatchewan had highest GDP growth, at 3.6% and 3.4%, respectively.

Appendix R provides the GDP per capita by province and Canada from 2015 to 2025.

Calculating GDP per capita incorporates the population into the equation. The GDP per capita is a better productivity measure as calculated the amount per resident, which allows a more accurate comparison among provinces.

In Nova Scotia, GDP per capita has grown by 4.3% from 2015 to 2025. This is higher than the Canadian average of 2.6% during the same time. British Columbia and P.E.I. had the largest growth in this period, at 9.4% and 9.3%, respectively. During those 10 years, Alberta and Newfoundland and Labrador saw GDP per capita contract, at -11.2% and -6.3%, respectively. In 2024 to 2025, Nova Scotia's GDP per capita grew by 0.3% compared to the Canadian average of negative -0.9%. That is the fourth-highest growing GDP in Canada for that time. Newfoundland and Labrador and P.E.I. had highest GDP growth, at 1.0% and 0.9%, respectively, from 2024 to 2025.

While Nova Scotia has had strong growth in GDP and GDP per capita, the province's GDP per capita still falls far behind most other provinces. The Canadian average GDP per capita is \$54,659. Nova Scotia is only at 76.7% of the Canadian average at \$42,942, coming in ninth in the country, above New Brunswick at \$41,845.

While Nova Scotia's long-term economy has performed better than the Canadian average over the last 10 years, the GDP per capita for Nova Scotia is still much lower, at just 76.7% of the Canadian average.

Implications for Negotiations

Physician Compensation Comparisons and Required Catch-up

Across multiple data sources (MSI, CIHI, fee schedule comparisons, per capita spending), Nova Scotia continues to rank in the bottom third nationally on most physician compensation indicators.

- Nova Scotia physicians are 12 to 20% below national averages depending on dataset:
 - MSI/adjusted proxy comparison: 88.1% of Canadian average
 - CIHI: 84.5% of Canadian average (overall)
 - Family medicine: 82.5% of Canadian average
 - Several specialties fall well below 70% of national averages

- Per capita spending on physician services is \$1,202, about 7% below the Canadian average, despite Nova Scotia serving regional subspecialty demand.
- Nova Scotia had higher than average schedule of benefits increases in recent years (annualized 2.17%), but most other provinces have since negotiated larger, newer increases, widening the gap again.
- Many provinces (Saskatchewan, P.E.I., Newfoundland and Labrador, and Ontario) have recently negotiated significant physician compensation growth, indicating upward national pressure.

To remain competitive – particularly in Atlantic Canada – Nova Scotia must close a compensation gap of 12 to 15% over the next physician agreement cycle. This requires annual increases materially above inflation.

Economic Factors Influencing Budget Capacity

Inflation and Cost of Living

- Long-run Nova Scotia CPI averages 2.48%, slightly below the Canadian average.
- Inflation has stabilized at about 2.3%, meaning cost-of-living pressures persist, but the province is no longer in high-inflation shock.

Labour Market Conditions

- Strong 10-year trends in population, employment and labour force, but 2024–25 data shows slowing and small declines, signalling economic cooling.

GDP and Economic Strength

- Nova Scotia’s GDP grew 21% over the past decade – above the Canadian average.
- But Nova Scotia’s GDP per capita remains only 76.7% of the Canadian average, reflecting low productivity and limited fiscal room.
- Population growth (2.5% to 3% annually since 2022) is increasing demand on health services faster than most provinces.

Taxation and Fiscal Constraints

- Nova Scotia has the second-highest personal tax rate in Canada, severely limiting capacity to raise new revenue.
- Corporate taxes are relatively high; small business tax reductions somewhat help incorporated physicians.
- Nova Scotia is projected to run significant budget deficits (e.g., expected to be \$1.25 billion in 2025–26) and cannot rely on tax increases to fund major physician compensation growth.

Implication: The economy is growing, but Nova Scotia’s fiscal capacity is structurally constrained. Any new physician funding may therefore have to come from health-system or other prioritization, not revenue expansion.

Government Precedents: How much are they paying others?

Recent union agreements (nurses, residents, public servants, paramedics, teachers):

- average annual wage increase: 2.2%
- nursing NP one-time bump: 11%, then 3.5% and 2%
- most agreements: 2 to 4% per year

The 2023–27 Physician Agreement delivered 2.5% annual increases plus significant targeted funding, meaning physicians already received above-trend increases relative to other sectors.

Implication: Government wage patterns suggest a baseline of 2 to 3%, but physician market pressures require larger adjustments.

Workforce Requirements and Recruitment Pressure

Nova Scotia has:

- the third-best physician-to-population ratio nationally (374 residents per physician)
- a rapidly growing population and aging demographic
- forecasted need for 65 to 75 additional physicians by 2030 above replacements for retirements and attrition

Recruitment success has improved only because compensation gaps have narrowed – failing to keep pace will reverse physician inflow.

Implication: Physician funding must grow faster than population growth (~2.5–3%) to maintain supply.

Bibliography

Government and Public Data Sources

- Statistics Canada. Various datasets on CPI, population, labour market, GDP and chronic disease.
- Government of Nova Scotia. Department of Health and Wellness budgets and forecasts.
- Canadian Institute for Health Information (CIHI). *Gross Clinical Payments by Specialty*.
- Canada Revenue Agency. *Personal and Corporate Income Tax Rates*.
- Bank of Canada. *Inflation and Economic Projections*.
- Job Bank Canada. *Regional Labour Market Outlooks*.

Professional and Medical Organizations

- Doctors Nova Scotia (DNS). Internal compensation, billing and membership data (2022–2025).
- Canadian Medical Association (CMA). *Physician Statistics, Negotiations Environmental Scan*.
- Provincial Medical Associations: British Columbia, Alberta, Saskatchewan, Manitoba, Ontario, New Brunswick, Prince Edward Island, Newfoundland and Labrador (billing data and fee schedule comparisons).
- Maritime Resident Doctors. Contract settlement documents.
- Nova Scotia Nurses' Union; Nova Scotia Government and General Employees Union (collective bargaining agreements).

Legislation and Policy Frameworks

- Nova Scotia Pay Equity Act.
- Nova Scotia Pay Transparency Act (Bill 98), 2025.
- Nova Scotia Health Equity Framework (2023).

Economic Reports and Studies

- MDSearch/CIHI physician workforce forecasting models.
- Bank of Canada: *Monetary Policy Report*.
- Provincial budgets and Public Accounts for all provinces (2015–26).

Appendices

APPENDIX A - SUMMARY OF NS PHYSICIANS' PAYMENTS - 2023/24

Specialty	# of Phys	Average		Specialty	Median		Specialty	70th Percentile		Specialty	Estimated Net Income	
Family Medicine	815	327,371	Base Rate	Family Medicine	310,435	Base Rate	Family Medicine	384,457	Base Rate	Family Medicine	224,445	Base Rate
			% of BR			% of BR			% of BR			% of BR
Rheumatology	XX	XX	XX	Rheumatology	XX	XX	Rheumatology	XX	XX	Rheumatology	XX	XX
Pediatrics	44	301,318	92.0%	Pediatrics	293,660	94.6%	Pediatrics	358,921	93.4%	Pediatrics	206,584	92.0%
Med Onc	XX	XX	XX	Internal Medicine	307,663	99.1%	Med Onc	XX	XX	Med Onc	XX	XX
Psychiatry	76	352,432	107.7%	Neurology	317,472	102.3%	Haematology	XX	XX	Haematology	XX	XX
Haematology	XX	XX	#VALUE!	Med Onc	XX	XX	Neurology	399,712	104.0%	Neurology	271,641	121.0%
Neurology	12	370,601	113.2%	Psychiatry	331,822	106.9%	Dermatology	428,358	111.4%	Psychiatry	278,344	124.0%
Dermatology	15	396,496	121.1%	Haematology	XX	XX	Internal Medicine	445,697	115.9%	Dermatology	290,622	129.5%
Internal Medicine	71	398,684	121.8%	Dermatology	384,198	123.8%	Psychiatry	470,078	122.3%	Internal Medicine	292,225	130.2%
Clinical Immunology and Allergy	5	423,012	129.2%	Orthopedics	396,855	127.8%	Orthopedics	501,066	130.3%	Orthopedics	298,628	133.1%
Orthopedics	31	425,034	129.8%	Plastic Surgery	421,744	135.9%	Pathology*	504,680	131.3%	Obs-Gyn	308,701	137.5%
Anaesthesia	52	461,791	141.1%	Anaesthesia	460,556	148.4%	Anaesthesia	514,396	133.8%	Clinical Immunology an	310,057	138.1%
Pathology*	14	465,367	142.2%	Pathology*	463,417	149.3%	Clinical Immunology	539,389	140.3%	Plastic Surgery	316,866	141.2%
Plastic Surgery	7	470,026	143.6%	General Surgery	503,098	162.1%	General Surgery	575,750	149.8%	General Surgery	351,446	156.6%
General Surgery	46	473,772	144.7%	Clinical Immunology	506,714	163.2%	Obs-Gyn	575,944	149.8%	Anaesthesia	376,906	167.9%
Obs-Gyn	41	492,344	150.4%	Obs-Gyn	526,513	169.6%	Plastic Surgery	586,974	152.7%	Pathology*	379,465	169.1%
Gastroenterology	5	572,006	174.7%	Gastroenterology	546,915	176.2%	Gastroenterology	605,240	157.4%	Gastroenterology	419,266	186.8%
Urology	25	646,271	197.4%	Cardiology	674,351	217.2%	Cardiology	729,824	189.8%	Otol	445,244	198.4%
Nephrology	16	648,930	198.2%	Urology	693,064	223.3%	Nephrology	774,308	201.4%	Urology	473,047	210.8%
Otol	14	657,961	201.0%	Otol	699,714	225.4%	Urology	827,107	215.1%	Nephrology	473,461	210.9%
Cardiology	10	674,624	206.1%	Nephrology	723,955	233.2%	Radiology	881,274	229.2%	Cardiology	494,482	220.3%
Radiology	104	755,321	230.7%	Radiology	728,423	234.6%	Otol	906,941	235.9%	Ophthalmology	568,842	253.4%
Ophthalmology	43	918,725	280.6%	Ophthalmology	945,574	304.6%	Ophthalmology	1,126,290	293.0%	Radiology	615,897	274.4%

* Does not include List B Stipends

Note: Does not include AFP payments

Physician groups with less than 5 have data removed due to confidentiality purposes.

Appendix B - Average/Median Billings by Specialty by Gender (\$100K Threshold) for 2023/24

Specialty	Gender Breakdown								
	# of Phys	Average	Median	Male			Female		
				# of Phys	Average	Median	# of Phys	Average	Median
Cardiology	10	674,624	674,351	10	674,624	674,351			
CLIA	5	423,012	506,714				5	423,012	506,714
Dermatology	15	396,496	384,198	5	500,846	514,417	10	344,322	370,108
Radiology	104	755,321	728,423	70	815,561	815,338	34	631,297	633,483
Anae - Total	52	461,791	460,556	37	471,470	461,696	15	437,915	451,259
Anae - FFS	35	487,386	456,253	26	498,021	462,909	9	456,660	451,259
Anae - APP	17	409,097	461,696	11	408,714	461,696	6	409,799	458,036
Pathology*	14	465,367	463,417	11	492,212	485,864	3	366,932	427,489
Family Medicine	815	327,371	310,435	397	357,331		418	298,915	
Family Medicine- FFS	378	298,613	260,869	201	340,206	292,385	177	251,380	228,574
Family Medicine- LFM	437	352,246	350,228	196	374,893	370,787	241	333,827	332,700
General Surgery	46	473,772	503,098	31	477,537	509,213	15	465,990	496,983
Gastroenterology	5	572,006	546,915	XX	XX	XX	XX	XX	XX
Haematology	XX	XX	XX	XX	XX	XX	XX	XX	XX
Internal Medicine	71	398,684	307,663	48	445,821	347,488	23	300,312	253,404
Med Onc	XX	XX	XX	XX	XX	XX			
Nephrology	16	648,930	723,955	12	641,981	731,670	XX	XX	XX
Neurology	12	370,601	317,472	8	428,782	323,690	XX	XX	XX
Obs-Gyn	41	492,344	526,513	14	540,714	577,421	27	467,263	486,793
Obs-Gyn - FFS	11	559,407	540,480	XX	XX	XX	7	536,533	540,480
Obs-Gyn - APP	30	467,754	509,644	10	517,226	577,421	20	443,018	483,352
Ophthalmology	43	918,725	945,574	30	1,034,705	1,032,475	13	651,080	664,834
Orthopedics	31	425,034	396,855	23	437,564	373,721	8	389,010	412,155
Otol	14	657,961	699,714	12	680,767	699,714	XX	XX	XX
Pediatrics	44	301,318	293,660	13	369,957	355,991	31	272,535	283,683
Peds - FFS	13	326,734	283,683	6	398,039	394,996	7	265,615	283,683
Peds - APP	31	290,660	299,574	7	345,886	355,991	24	274,553	289,605
Physical Medicine	XX	XX	XX				XX	XX	XX
Plastic Surgery	7	470,026	421,744	5	434,655	421,744	XX	XX	XX
Psychiatry	76	352,432	331,822	47	380,863	388,879	29	341,505	347,299
Rheumatology	XX	XX	XX	XX	XX	XX	XX	XX	XX
Respiratory Medicine	XX	XX	XX				XX	XX	XX
Thoracic Surgery	XX	XX	XX	XX	XX	XX			
Urology	25	646,271	693,064	21	682,069	724,626	XX	XX	XX
	1,457	413,726		803	470,971		654	344,997	

* Does not include the List B fees.

Physician groups with less than 5 have data removed due to confidentiality purposes.

APPENDIX C – CIHI PHYSICIAN FFS DATA \$60,000 THRESHOLD

Table A.6 Physicians who received at least \$60,000 in payments, by physician specialty and province/territory, 2022–2023

Average gross clinical payment per physician	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Y.T.	Total	% of CDN Ave	Rank
Family medicine	306,856	310,890	280,297	293,635	298,211	384,755	366,203	n/a	365,892	273,324	269,535	339,636	82.5%	8 out of 10
Medical specialties	389,977	361,553	340,379	419,185	406,720	424,744	451,658	n/a	467,972	401,124	303,584	423,215	80.4%	9 out of 10
Internal medicine	423,517	444,213	354,400	450,095	417,886	482,566	500,507	n/a	486,890	468,374	235,797	464,664	76.3%	9 out of 10
<i>Cardiology</i>	<i>549,310</i>	<i>n/a</i>	<i>393,095</i>	<i>527,584</i>	<i>556,517</i>	<i>715,249</i>	<i>772,244</i>	<i>n/a</i>	<i>807,503</i>	<i>795,571</i>	*	<i>682,927</i>	<i>57.6%</i>	<i>8 out of 8</i>
<i>Gastroenterology</i>	<i>536,880</i>	<i>n/a</i>	<i>361,259</i>	<i>655,852</i>	<i>482,474</i>	<i>685,964</i>	<i>636,939</i>	<i>n/a</i>	<i>426,394</i>	<i>652,310</i>	*	<i>576,264</i>	<i>62.7%</i>	<i>8 out of 8</i>
Neurology	303,924	446,655	354,300	358,312	339,182	331,484	334,515	n/a	359,115	361,033	*	344,340	102.9%	5 out of 9
Psychiatry	289,220	352,311	315,288	436,489	384,907	278,582	378,014	n/a	421,600	317,135	385,238	336,125	93.8%	8 out of 10
Pediatrics	345,350	286,306	269,885	310,422	358,751	344,952	355,043	n/a	400,520	332,916	219,619	351,285	76.8%	9 out of 10
Dermatology	650,133	*	444,132	525,600	378,028	431,369	796,553	n/a	1,046,817	398,931	*	510,446	87.0%	5 out of 8
Physical medicine	*	*	253,033	427,930	395,085	365,168	575,831	n/a	441,456	281,683	*	377,884	67.0%	6 out of 6
Anesthesia	462,531	269,316	384,987	404,114	476,062	554,478	476,949	n/a	471,239	418,580	*	497,306	77.4%	7 out of 8
Surgical specialties	536,565	559,376	526,392	518,041	483,344	568,975	581,905	n/a	703,315	575,798	523,377	565,597	93.1%	7 out of 10
General surgery	413,321	480,144	507,757	469,174	515,355	537,521	565,836	n/a	606,950	485,952	561,498	531,855	95.5%	6 out of 10
Thoracic/cardiovascular surgery	514,906	n/a	533,540	528,571	501,332	673,688	489,499	n/a	892,434	721,052	n/a	642,766	83.0%	4 out of 8
Urology	562,241	730,446	567,266	580,744	449,581	550,818	633,899	n/a	696,140	608,748	n/a	552,412	102.7%	6 out of 9
Orthopedic surgery	467,281	652,677	450,977	441,081	451,670	556,357	561,032	n/a	559,003	444,966	323,559	515,826	87.4%	7 out of 10
Plastic surgery	501,479	*	534,503	439,721	392,338	430,869	549,735	n/a	485,778	449,594	n/a	446,516	119.7%	2 out of 8
Neurosurgery	1,000,347	n/a	494,613	685,340	461,129	706,438	521,454	n/a	478,610	622,822	n/a	594,561	83.2%	6 out of 8
Ophthalmology	1,064,018	900,527	771,328	897,352	696,118	910,275	1,104,376	n/a	1,450,171	1,079,146	*	953,931	80.9%	8 out of 9
Otolaryngology	611,941	507,499	537,587	495,644	443,245	531,405	557,062	n/a	772,165	543,881	*	533,269	100.8%	5 out of 9
Obstetrics/gynecology	427,681	371,070	409,077	369,581	385,457	463,208	462,468	n/a	553,094	397,544	865,830	445,257	91.9%	6 out of 10
Total specialties	437,636	427,494	395,692	454,137	428,614	464,059	487,793	n/a	525,599	450,017	389,590	462,644	85.5%	9 out of 10
Total physicians	371,294	361,183	336,603	366,573	360,348	424,638	421,643	n/a	435,142	354,438	295,341	398,333	84.5%	9 out of 10

APPENDIX E – TOP FIVE BILLING CODES BY SECTION

				Low	High	Low	High	
				CDN AVE	CDN AVE	% of CDN AVE	% of CDN AVE	
CARDIOLOGY	11310	ECHOCARDIOGRAPHY - TWO DIMENSIONAL	47.56	137.92	90.50	90.50	152.4%	152.4%
	03.08	CONSULTATION, DESCRIBED AS COMPREHENSIVE	62.00	179.80	169.39	172.44	106.1%	104.3%
	11312	ECHOCARDIOGRAPHY - DOPPLER - QUANTITATIVE	30.45	88.31	77.47	77.47	114.0%	114.0%
	11311	ECHOCARDIOGRAPHY - M-MODE	25.44	73.78	75.52	75.52	97.7%	97.7%
	03.05	OTHER DIAGNOSTIC INTERVIEW AND EVALUATION	105.80	306.82	328.50	328.50	93.4%	93.4%
				134.06	120.05	120.53	111.7%	111.2%

				Low	High	Low	High	
				CDN AVE	CDN AVE	% of CDN AVE	% of CDN AVE	
CLINICAL IMMUNOLOGY AND ALLERG	03.08	CONSULTATION, DESCRIBED AS COMPREHENSIVE	62.00	179.80	180.15	183.20	99.8%	98.1%
	03.04	DIAGNOSTIC INTERVIEW AND EVALUATION, DESCRIBED AS COMPREHENSIVE	24.00	69.60	116.41	116.41	59.8%	59.8%
	98.89B	SCRATCH/INTRADERMAL TESTS FOR ALLERGENS PER SERIES	18.00	52.20	27.74	56.16	188.2%	92.9%
	13.99E	INGESTANT PROVOCATION STUDIES FOR LOW RISK PATIENTS	50.00	145.00	108.29	108.29	133.9%	133.9%
	03.03	DIAGNOSTIC INTERVIEW AND EVALUATION, DESCRIBED AS LIMITED	13.00	37.70	57.02	57.02	66.1%	66.1%
				97.63	98.93	106.07	98.7%	92.0%

				Low	High	Low	High	
				CDN AVE	CDN AVE	% of CDN AVE	% of CDN AVE	
DERMATOLOGY	03.08	CONSULTATION, DESCRIBED AS COMPREHENSIVE	52.00	150.80	106.81	124.15	141.2%	82.3%
	03.03	DIAGNOSTIC INTERVIEW AND EVALUATION, DESCRIBED AS LIMITED	12.00	34.80	43.95	43.95	79.2%	79.2%
	03.07	CONSULTATION, DESCRIBED AS LIMITED	28.00	81.20	70.94	70.94	114.5%	114.5%
	03.04	DIAGNOSTIC INTERVIEW AND EVALUATION, DESCRIBED AS COMPREHENSIVE	24.00	69.60	67.61	67.61	102.9%	102.9%
	98.99H	MOHS MICROGRAPHIC SURGERY (MMS) FOR THE REMOVAL OF A HISTOLOGICALLY CONFIRMED CUTANEOUS MALIGNANCY - INITIAL LEVEL AND DEBULKING	155.00	449.50	378.85	378.85	118.6%	118.6%
				123.39	103.85	108.69	118.8%	113.5%

				Low	High	Low	High	
				CDN AVE	CDN AVE	% of CDN AVE	% of CDN AVE	
RADIOLOGY	R1166	CT PELVIS WITH CONTRAST	42.33	122.76	105.07	105.07	116.8%	116.8%
	R1155	CT ABDOMEN WITH CONTRAST	42.33	122.76	114.57	114.57	107.1%	107.1%
	R1105	CT HEAD WITHOUT CONTRAST	42.33	122.76	78.83	78.83	155.7%	155.7%
	R1141	CT THORAX WITH CONTRAST	42.33	122.76	65.74	65.74	186.7%	186.7%
	R405	MULTIPLE VIEWS - chest	5.13	14.88	19.56	19.56	76.1%	76.1%
				74.10	60.61	60.61	122.3%	122.3%

				Low	High	Low	High	
				CDN AVE	CDN AVE	% of CDN AVE	% of CDN AVE	
GASTROENTEROLOGY	01.22E	COLONOSCOPY OF DESCENDING, TRANSVERSE & ASCENDING COLON	100.00	290.00	250.75	250.75	115.7%	115.7%
	03.08	CONSULTATION, DESCRIBED AS COMPREHENSIVE	62.00	179.80	183.46	191.19	98.0%	98.0%
	01.22B	POLYPECTOMY VIA COLONOSCOPY	20.00	58.00	89.58	89.58	64.7%	64.7%
	01.14D	OE SOPHAGO-GASTROSCOPY WITH BIOPSY	75.00	217.50	125.23	125.23	173.7%	173.7%
	03.07	CONSULTATION, DESCRIBED AS LIMITED	27.00	78.30	104.52	104.52	74.9%	74.9%
				180.73	165.15	167.13	109.4%	109.4%

				Low	High	Low	High	
				CDN AVE	CDN AVE	% of CDN AVE	% of CDN AVE	
FAMILY MEDICINE	03.03	DIAGNOSTIC INTERVIEW AND EVALUATION, DESCRIBED AS LIMITED	17.00	49.30	43.06	43.41	114.5%	113.6%
	03.03A	GERIATRIC OFFICE VISIT	20.99	60.87	51.03	55.52	119.3%	109.6%
	NPIV1	NEW PATIENT INTAKE VISIT	100.00	100.00	84.32	84.32	118.6%	118.6%
	CDM1	CHRONIC DISEASE MANAGEMENT INCENTIVE PROGRAM	100.00	100.00	78.65	78.65	127.1%	127.1%
	03.04	DIAGNOSTIC INTERVIEW AND EVALUATION, DESCRIBED AS COMPREHENSIVE	24.00	69.60	87.26	92.32	79.8%	75.4%
	87.98	DELIVERY NEC	282.24	818.50	632.92	632.92	129.3%	129.3%
				55.40	48.01	49.51	115.4%	111.9%

				Low	High	Low	High	
				CDN AVE	CDN AVE	% of CDN AVE	% of CDN AVE	
GENERAL SURGERY	01.22E	COLONOSCOPY OF DESCENDING, TRANSVERSE & ASCENDING COLON	100.00	290.00	250.06	250.06	116.0%	116.0%
	03.08	CONSULTATION, DESCRIBED AS COMPREHENSIVE	39.40	114.26	132.44	159.55	86.3%	71.6%
	63.12	TOTAL CHOLECYSTECTOMY	235.00	681.50	569.07	594.34	119.8%	114.7%
	03.03	DIAGNOSTIC INTERVIEW AND EVALUATION, DESCRIBED AS LIMITED	13.00	37.70	47.75	47.75	79.0%	79.0%
	01.22B	POLYPECTOMY VIA COLONOSCOPY	29.10	84.39	91.38	91.38	92.3%	92.3%
				115.43	124.98	134.56	92.4%	85.8%

				Low	High	Low	High	
				CDN AVE	CDN AVE	% of CDN AVE	% of CDN AVE	
INTERNAL MEDICINE	03.08	CONSULTATION, DESCRIBED AS COMPREHENSIVE	63.00	182.70	187.98	227.16	97.2%	80.4%
	03.03	DIAGNOSTIC INTERVIEW AND EVALUATION, DESCRIBED AS LIMITED	13.00	37.70	60.46	60.46	62.4%	62.4%
	03.05	OTHER DIAGNOSTIC INTERVIEW AND EVALUATION	105.80	306.82	290.88	290.88	105.5%	105.5%
	03.04	DIAGNOSTIC INTERVIEW AND EVALUATION, DESCRIBED AS COMPREHENSIVE	24.00	69.60	100.65	100.65	69.1%	69.1%
	11310	ECHOCARDIOGRAPHY - TWO DIMENSIONAL	47.45	137.61	90.50	90.50	152.1%	152.1%
				110.31	122.20	131.25	90.3%	84.0%

				Low	High	Low	High	
				CDN AVE	CDN AVE	% of CDN AVE	% of CDN AVE	
NEUROLOGY	03.08	CONSULTATION, DESCRIBED AS COMPREHENSIVE	62.00	179.80	189.40	212.73	94.9%	84.5%
	07.08C	NERVE CONDUCTION STUDIES, PER NERVE STUDIED	27.00	78.30	73.86	73.86	106.0%	106.0%
	03.03	DIAGNOSTIC INTERVIEW AND EVALUATION, DESCRIBED AS LIMITED	13.00	37.70	70.27	70.27	53.7%	53.7%
	13.590	INJECTION OF ONABOTULINUMTOXINA FOR THE TREATMENT OF CHRONIC MIGRAINE (PRIOR APPROVAL)						

Appendix E - Consult Comparison NS to Canadian Average

Specialty	Rate	FFS Volumes	SB Volumes
FAMILY MEDICINE	87.00	10,448	4,004
CARDIOLOGY	179.80	7,057	6,585
CLINICAL IMMUNOLOGY AND ALLERGY	179.80	4,384	419
DERMATOLOGY	150.80	16,081	3,913
GASTROENTEROLOGY	179.80	3,658	2,258
INTERNAL MEDICINE	179.80	26,558	28,434
NEUROLOGY	179.80	8,506	3,897
PEDIATRICS	205.90	5,043	8,836
PSYCHIATRY	306.68	3,102	511
GENERAL SURGERY	114.26	14,382	4,045
OBSTETRICS AND GYNAECOLOGY	116.29	8,669	17,956
OPHTHALMOLOGY	109.04	34,152	1,040
ORTHOAEDIC SURGERY	110.78	19,551	14,827
OTOLARYNGOLOGY	101.79	18,355	7,956
PLASTIC SURGERY	110.49	3,852	8,188
UROLOGY	103.24	20,703	1,050

Excludes NL		
CDN	CDN	CDN
Ave - Low	Ave - Mid	Ave - High
103.75	114.41	129.71
171.66		171.66
183.95		183.95
112.16		128.28
187.74		193.08
192.91	230.79	234.20
195.74		219.54
206.40	236.80	255.48
276.00		282.76
137.65		159.47
125.69		133.05
107.55		125.25
113.28		134.92
100.89	118.16	130.97
109.39		126.95
104.40		117.85

Difference		
NS - CDN	NS - CDN	NS - CDN
Ave - Low	Ave - Mid	Ave - High
-16.75	-27.41	-42.71
8.14		8.14
-4.15		-4.15
38.64		22.52
-7.94		-13.28
-13.11	-50.99	-54.40
-15.94		-39.74
-0.50	-30.90	-49.58
30.68		23.91
-23.39		-45.21
-9.40		-16.76
1.49		-16.21
-2.50		-24.14
0.90	-16.37	-29.18
1.10		-16.46
-1.16		-14.61

Appendix F - Billings per Service By Specialty By Year

	FFS Services	SB Services	FFS Billings	SB Billings		Cost / Service	% Change	MSU % Inc	Chg Vs MSU	Cumulative Change
ANAESTHESIA										
2020-03-31	63,545	75,708	13,089,360	21,691,153		249.76				
2021-03-31	56,207	74,201	11,894,034	22,284,878		262.09	4.9%	2.0%	2.9%	
2022-03-31	67,353	72,896	15,345,530	22,613,774		270.66	3.3%	2.0%	1.3%	
2023-03-31	68,248	76,208	16,598,233	25,290,431		289.98	7.1%	1.5%	5.6%	
2024-03-31	67,676	80,297	17,103,889	27,538,028		301.69	4.0%	3.0%	1.0%	
2025-03-31	68,887	90,599	18,119,268	31,204,103		309.26	2.5%	3.0%	-0.5%	10.4%
CARDIOLOGY										
2020-03-31	62,677	115,650	3,970,742	7,541,820		64.56				
2021-03-31	64,040	147,621	4,659,156	10,511,454		71.67	11.0%	2.0%	9.0%	
2022-03-31	83,990	149,861	6,347,957	10,709,461		72.94	1.8%	2.0%	-0.2%	
2023-03-31	97,279	137,425	7,285,950	10,594,498		76.18	4.4%	1.5%	2.9%	
2024-03-31	113,669	143,049	8,395,441	11,504,287		77.52	1.7%	3.0%	-1.3%	
2025-03-31	108,905	137,327	8,091,475	11,849,819		80.99	4.5%	3.0%	1.5%	12.0%
CARDIOVASCULAR / THORACIC SURGERY										
2020-03-31	434	7,536	135,568	2,284,927		303.70				
2021-03-31	872	4,758	246,893	1,665,747		339.72	11.9%	2.0%	9.9%	
2022-03-31	376	4,474	186,392	1,599,728		368.27	8.4%	2.0%	6.4%	
2023-03-31	-	4,117	-	1,573,030		382.08	3.7%	1.5%	2.2%	
2024-03-31	-	3,962	-	1,569,706		396.19	3.7%	3.0%	0.7%	
2025-03-31	-	4,626	-	1,920,534		415.16	4.8%	3.0%	1.8%	21.0%
CLINICAL IMMUNOLOGY AND ALLERGY										
2020-03-31	12,012	1,597	1,051,665	224,276		93.76				
2021-03-31	13,915	988	1,324,010	132,816		97.75	4.3%	2.0%	2.3%	
2022-03-31	15,521	1,139	1,429,317	145,773		94.54	-3.3%	2.0%	-5.3%	
2023-03-31	15,733	1,161	1,518,172	150,514		98.77	4.5%	1.5%	3.0%	
2024-03-31	18,116	1,058	1,856,600	131,972		103.71	5.0%	3.0%	2.0%	
2025-03-31	20,536	1,143	2,196,169	150,340		108.24	4.4%	3.0%	1.4%	3.3%
DERMATOLOGY										
2020-03-31	68,794	10,004	4,686,140	636,007		67.54				
2021-03-31	52,380	11,496	3,865,654	778,943		72.71	7.7%	2.0%	5.7%	
2022-03-31	62,108	12,018	4,947,782	832,425		77.98	7.2%	2.0%	5.2%	
2023-03-31	61,881	14,280	5,099,745	964,570		79.62	2.1%	1.5%	0.6%	
2024-03-31	63,800	15,012	5,769,090	1,030,269		86.27	8.3%	3.0%	5.3%	
2025-03-31	60,152	17,657	5,667,322	1,261,866		89.05	3.2%	3.0%	0.2%	17.1%
DIAGNOSTIC RADIOLOGY										
2020-03-31	1,131,460	44,135	58,970,110	2,154,282		51.99				
2021-03-31	839,571	130,312	48,629,386	7,568,825		57.94	11.4%	2.0%	9.4%	
2022-03-31	1,099,536	43,412	65,153,520	2,381,871		59.09	2.0%	2.0%	0.0%	
2023-03-31	1,146,411	47,062	67,706,056	2,560,549		58.88	-0.4%	1.5%	-1.9%	
2024-03-31	1,229,213	45,684	74,652,633	2,481,309		60.50	2.8%	3.0%	-0.2%	
2025-03-31	1,354,994	23,231	86,420,970	1,441,043		63.75	5.4%	3.0%	2.4%	9.7%
GASTROENTEROLOGY										
2020-03-31	17,237	18,519	1,865,331	2,181,502		113.18				
2021-03-31	17,012	16,422	1,866,534	1,843,932		110.98	-1.9%	2.0%	-3.9%	
2022-03-31	21,723	16,903	2,486,112	2,108,411		118.95	7.2%	2.0%	5.2%	
2023-03-31	21,459	16,139	2,723,984	2,177,442		130.36	9.6%	1.5%	8.1%	
2024-03-31	20,453	16,853	2,709,037	2,269,666		133.46	2.4%	3.0%	-0.6%	
2025-03-31	21,690	19,543	3,018,904	2,699,929		138.70	3.9%	3.0%	0.9%	9.6%
GENERAL PRACTITIONER										
2020-03-31	3,213,045	1,552,969	130,718,566	58,710,755		39.75				
2021-03-31	2,648,618	1,620,928	115,959,140	67,289,157		42.92	8.0%	2.0%	6.0%	
2022-03-31	2,730,664	1,589,202	132,438,717	70,971,567		47.09	9.7%	2.0%	7.7%	
2023-03-31	2,569,059	1,721,595	129,786,760	78,814,137		48.62	3.2%	1.5%	1.7%	
2024-03-31	2,163,637	2,107,297	114,786,549	103,697,718		51.16	5.2%	3.0%	2.2%	
2025-03-31	1,558,221	2,902,389	88,755,381	156,677,448		55.02	7.6%	3.0%	4.6%	22.2%
GENERAL SURGERY										
2020-03-31	128,506	37,103	16,279,953	5,895,117		133.90				
2021-03-31	99,689	45,409	13,464,075	7,546,417		144.80	8.1%	2.0%	6.1%	
2022-03-31	127,802	40,714	18,099,124	6,672,846		147.00	1.5%	2.0%	-0.5%	
2023-03-31	130,506	50,316	19,267,643	8,351,013		152.74	3.9%	1.5%	2.4%	
2024-03-31	131,693	62,883	19,645,352	10,692,572		155.92	2.1%	3.0%	-0.9%	
2025-03-31	130,613	64,916	20,765,289	11,503,307		165.03	5.8%	3.0%	2.8%	10.0%
NEPHROLOGY										
2020-03-31	80,465	-	7,085,920	-		88.06				
2021-03-31	145,910	415	7,948,414	42,240		54.61	-38.0%	2.0%	-40.0%	
2022-03-31	260,037	675	9,362,972	61,121		36.15	-33.8%	2.0%	-35.8%	
2023-03-31	263,798	1,129	9,593,311	81,956		36.52	1.0%	1.5%	-0.5%	
2024-03-31	264,356	737	9,953,717	52,383		37.75	3.4%	3.0%	0.4%	
2025-03-31	242,697	539	9,777,037	46,021		40.38	7.0%	3.0%	4.0%	-71.9%
NEUROLOGY										
2020-03-31	31,385	25,045	3,469,979	1,872,538		94.68				
2021-03-31	29,278	24,468	3,447,275	1,775,394		97.17	2.6%	2.0%	0.6%	
2022-03-31	35,383	26,107	4,139,494	1,880,624		97.90	0.8%	2.0%	-1.2%	
2023-03-31	35,003	24,432	4,201,731	1,901,610		102.69	4.9%	1.5%	3.4%	
2024-03-31	34,810	23,962	4,339,262	1,870,077		105.65	2.9%	3.0%	-0.1%	
2025-03-31	38,713	24,763	4,957,670	2,026,143		110.02	4.1%	3.0%	1.1%	3.8%
OBSTETRICS AND GYNAECOLOGY										
2020-03-31	175,614	30,257	14,116,058	2,389,200		80.17				
2021-03-31	68,903	114,605	7,819,768	10,795,662		101.44	26.5%	2.0%	24.5%	
2022-03-31	72,328	121,415	9,248,802	11,808,783		108.69	7.1%	2.0%	5.1%	
2023-03-31	73,805	123,080	9,934,507	11,977,740		111.29	2.4%	1.5%	0.9%	
2024-03-31	59,519	142,298	8,867,993	14,052,594		113.57	2.0%	3.0%	-1.0%	
2025-03-31	61,289	153,779	9,513,796	15,885,193		118.10	4.0%	3.0%	1.0%	30.6%
OPHTHALMOLOGY										
2020-03-31	365,016	6,666	26,223,251	402,713		71.64				
2021-03-31	301,727	33,445	23,269,331	2,403,532		76.60	6.9%	2.0%	4.9%	
2022-03-31	378,075	9,480	30,019,478	533,550		78.84	2.9%	2.0%	0.9%	
2023-03-31	405,700	8,310	33,983,863	486,229		83.26	5.6%	1.5%	4.1%	
2024-03-31	423,305	8,155	36,491,994	499,164		85.73	3.0%	3.0%	0.0%	

2025-03-31	450,708	7,809	40,546,193	510,005		89.54	4.4%	3.0%	1.4%	11.4%
ORTHOPAEDIC SURGERY										
2020-03-31	93,842	59,922	9,971,608	7,655,819		114.64				
2021-03-31	68,655	55,118	7,885,365	7,361,342		123.18	7.5%	2.0%	5.5%	
2022-03-31	87,653	52,377	10,103,238	6,698,872		119.99	-2.6%	2.0%	-4.6%	
2023-03-31	91,944	54,546	11,424,259	7,600,621		129.87	8.2%	1.5%	6.7%	
2024-03-31	98,406	55,371	12,768,655	7,958,149		134.78	3.8%	3.0%	0.8%	
2025-03-31	102,597	58,239	14,479,611	8,738,851		144.36	7.1%	3.0%	4.1%	12.5%
OTOLARYNGOLOGY										
2020-03-31	100,774	39,594	6,951,150	3,713,269		75.97				
2021-03-31	67,447	34,482	5,112,192	3,496,532		84.46	11.2%	2.0%	9.2%	
2022-03-31	94,428	29,764	7,660,436	3,238,838		87.76	3.9%	2.0%	1.9%	
2023-03-31	90,978	39,912	7,660,973	4,115,614		89.97	2.5%	1.5%	1.0%	
2024-03-31	100,684	40,131	8,802,369	4,420,693		93.90	4.4%	3.0%	1.4%	
2025-03-31	111,564	38,077	10,270,286	4,357,334		97.75	4.1%	3.0%	1.1%	14.6%
PEDIATRICS										
2020-03-31	38,519	90,786	4,286,300	8,475,814		98.70				
2021-03-31	28,508	71,685	3,325,407	7,244,811		105.50	6.9%	2.0%	4.9%	
2022-03-31	31,173	77,144	4,127,446	8,201,392		113.82	7.9%	2.0%	5.9%	
2023-03-31	30,972	83,188	4,315,231	9,642,709		122.27	7.4%	1.5%	5.9%	
2024-03-31	31,373	89,299	4,557,624	10,428,413		124.19	1.6%	3.0%	-1.4%	
2025-03-31	31,818	97,047	4,859,443	11,791,995		129.22	4.0%	3.0%	1.0%	16.3%
PLASTIC SURGERY										
2020-03-31	18,867	29,632	2,170,049	3,566,333		118.28				
2021-03-31	10,983	25,425	1,411,152	3,345,924		130.66	10.5%	2.0%	8.5%	
2022-03-31	16,970	26,003	2,205,873	3,391,211		130.25	-0.3%	2.0%	-2.3%	
2023-03-31	20,195	24,914	2,727,208	3,469,402		137.37	5.5%	1.5%	4.0%	
2024-03-31	21,618	24,322	3,061,972	3,569,860		144.36	5.1%	3.0%	2.1%	
2025-03-31	14,341	28,016	2,097,876	4,478,743		155.27	7.6%	3.0%	4.6%	16.8%
PSYCHIATRY										
2020-03-31	35,343	7,028	5,722,994	1,242,188		164.39				
2021-03-31	37,596	6,546	6,815,906	1,200,159		181.60	10.5%	2.0%	8.5%	
2022-03-31	34,022	6,356	6,822,073	1,214,997		199.05	9.6%	2.0%	7.6%	
2023-03-31	32,693	5,453	7,217,185	1,036,099		216.36	8.7%	1.5%	7.2%	
2024-03-31	32,101	4,809	7,272,367	775,769		218.05	0.8%	3.0%	-2.2%	
2025-03-31	33,456	4,702	7,958,898	664,502		225.99	3.6%	3.0%	0.6%	21.7%
THORACIC SURGERY										
2020-03-31	2,962	8,578	451,948	1,173,641		140.87				
2021-03-31	1,397	7,102	223,132	1,016,693		145.88	3.6%	2.0%	1.6%	
2022-03-31	3,153	8,387	550,997	1,141,151		146.63	0.5%	2.0%	-1.5%	
2023-03-31	2,983	8,522	524,121	1,297,380		158.32	8.0%	1.5%	6.5%	
2024-03-31	377	9,704	67,808	1,538,011		159.29	0.6%	3.0%	-2.4%	
2025-03-31	515	10,509	124,900	1,723,955		167.71	5.3%	3.0%	2.3%	6.4%
UROLOGY										
2020-03-31	98,189	3,054	10,752,212	294,066		109.11				
2021-03-31	85,964	12,718	9,772,495	1,512,904		114.36	4.8%	2.0%	2.8%	
2022-03-31	111,928	3,375	12,932,778	387,247		115.52	1.0%	2.0%	-1.0%	
2023-03-31	114,955	3,083	14,074,102	329,740		122.03	5.6%	1.5%	4.1%	
2024-03-31	124,359	2,797	15,356,147	284,777		123.01	0.8%	3.0%	-2.2%	
2025-03-31	127,944	3,143	16,816,487	406,871		131.39	6.8%	3.0%	3.8%	7.6%
VASCULAR SURGERY										
2020-03-31	1,944	18,361	140,103	1,841,525		97.59				
2021-03-31	8	13,900	372	1,593,197		114.58	17.4%	2.0%	15.4%	
2022-03-31	137	14,617	34,423	1,617,635		111.97	-2.3%	2.0%	-4.3%	
2023-03-31	41	13,453	14,540	1,721,214		128.63	14.9%	1.5%	13.4%	
2024-03-31	298	16,933	86,408	2,125,078		128.34	-0.2%	3.0%	-3.2%	
2025-03-31	412	18,683	118,304	2,649,570		144.95	12.9%	3.0%	9.9%	31.2%
TOTAL INTERNAL MEDICINE										
2020-03-31	394,321	244,448	23,621,061	17,392,210		64.21				
2021-03-31	324,257	244,217	18,803,925	18,270,692		65.22	1.6%	2.0%	-0.4%	
2022-03-31	408,065	230,891	23,258,454	18,362,042		65.14	-0.1%	2.0%	-2.1%	
2023-03-31	415,268	232,026	24,246,110	18,839,343		66.56	2.2%	1.5%	0.7%	
2024-03-31	415,765	252,965	24,608,098	20,805,358		67.91	2.0%	3.0%	-1.0%	
2025-03-31	437,277	309,788	25,679,969	26,626,865		70.02	3.1%	3.0%	0.1%	-2.7%
TOTAL PATHOLOGY										
2020-03-31	100,432	119,458	4,407,152	6,899,134		51.42				
2021-03-31	75,546	93,498	3,414,331	4,971,196		49.61	-3.5%	2.0%	-5.5%	
2022-03-31	98,246	122,824	4,852,946	6,261,660		50.28	1.4%	2.0%	-0.6%	
2023-03-31	107,333	120,115	5,858,856	6,668,472		55.08	9.5%	1.5%	8.0%	
2024-03-31	110,164	119,638	6,162,354	6,833,168		56.55	2.7%	3.0%	-0.3%	
2025-03-31	110,552	137,881	6,347,384	8,516,255		59.83	5.8%	3.0%	2.8%	4.3%
TOTAL BILLINGS										
2020-03-31	6,235,383	2,546,050	350,137,219	158,238,289		57.89				
2021-03-31	5,038,483	2,789,759	301,157,949	184,652,446		62.06	7.2%	2.0%	5.2%	
2022-03-31	5,840,671	2,660,034	371,753,861	182,834,979		65.24	5.1%	2.0%	3.1%	
2023-03-31	5,796,244	2,810,466	385,762,537	199,644,313		68.02	4.3%	1.5%	2.8%	
2024-03-31	5,525,392	3,267,216	387,315,359	236,129,020		70.91	4.2%	3.0%	1.2%	
2025-03-31	5,087,881	4,154,406	386,582,628	307,130,691		75.06	5.9%	3.0%	2.9%	15.2%

Internal Medicine includes General IM, Endocrinology, Haematology, Infectious Disease, Medical Genetics, Medical Microbiology, Med Onc, Physical Medicine, Rad Onc, Respiratory Med, Rheumatology

Pathology includes General, Anatomical, Haematological Pathology, Neuropathology

APPENDIX G – SUMMARY OF UNION CONTRACTS

Union Contract	% Increase														Annualized
	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24	2024/25	2025/26	2026/27		
Doctors Nova Scotia (MSU only)	4.0%	0.0%	0.0%	1.0%	1.5%	2.0%	2.0%	2.0%	2.0%	3.0%	3.0%	2.0%	2.0%	1.9%	
NS Council of Nursing (RN, LPN, RNs - NSNU/NSGEU)*	0.0%	0.0%	1.0%	1.5%	2.0%	2.0%	1.5%	1.5%	3.0%	3.0%	2.0%			1.6%	
NS Council of Nursing-IWK - RN, Undergrad, LPN*							1.5%	1.5%	3.0%	3.0%	2.0%			2.2%	
NS Council of Nursing-IWK - NP							1.5%	1.5%	11.0%	3.5%	2.0%			3.9%	
CUPE - Highway Workers Agreement	0.0%	1.0%	1.0%	2.0%	2.0%	0.50%				3%	2%	2%		1.5%	
PARI-MP^								1.50%	1.50%	4.0%	4.5%			2.9%	
NSGEU - EMC							1%	1.50%	2%	1.50%	2.00%			1.6%	
Province of Nova Scotia (Civil Service Agreement)								1.5%	1.5%	3.5%				2.2%	
Teachers (NSTU public school teachers 10k)						2.0%	2.0%	1.5%	1.5%	1.8%	3.0%	3.0%	2.0%	2.0%	
Teachers NSCC			1.0%	1.5%	2.0%	2.0%	0.50%	1.50%	1.50%	2.50%				1.6%	
							Average							2.2%	

* Increases are in November of year.

^ Increases start in November (1% + 3%) in 23/24 and (2.5% + 2.0%) in 24/25 - additional step increases in addition.

Appendix H - Physician Supply - Entry/Exit/Retirement Trends

	2018	%	2019	%	2020	%	2021		2022	%	2023	%	2024	%	YTD (Sept)	%	Total	%	Average
Adds	99		114		113		151		246		205		275		169				
Female	45	45.5%	61	53.5%	58	51.3%	79	52.3%	115	46.7%	92	44.9%	128	46.5%	73	43.2%	651	47.5%	
Male	54	54.5%	53	46.5%	55	48.7%	72	47.7%	131	53.3%	112	55.1%	147	53.5%	95	56.8%	719	52.5%	
Non-binary											1				1				
	99	100.0%	114	100.0%	113	100.0%	151	100.0%	246	100.0%	205	100.0%	275	100.0%	169	100.0%	1370	100.0%	172
Unknown		0.0%		0.0%		0.0%		0.0%		0.0%	1	0.5%	1	0.4%		0.0%	2	0.1%	
Anaesthesia	4	4.0%	8	7.0%	6	5.3%	3	2.0%	11	4.5%	8	3.9%	21	7.6%	10	5.9%	71	5.2%	
Emergency	2	2.0%	5	4.4%	8	7.1%	5	3.3%	10	4.1%	2	1.0%	8	2.9%	10	5.9%	50	3.6%	
Family Medicine	44	44.4%	52	45.6%	53	46.9%	77	51.0%	116	47.2%	75	36.6%	115	41.8%	65	38.5%	597	43.5%	
Medical	14	14.1%	15	13.2%	12	10.6%	21	13.9%	37	15.0%	41	20.0%	55	20.0%	32	18.9%	227	16.5%	
Obs/Gyn	3	3.0%	3	2.6%	3	2.7%	5	3.3%	4	1.6%	5	2.4%	9	3.3%	3	1.8%	35	2.6%	
Pain Mgmt		0.0%		0.0%		0.0%		0.0%		0.0%		0.0%		0.0%		0.0%	0	0.0%	
Pathology	4	4.0%	2	1.8%	2	1.8%	2	1.3%	6	2.4%	2	1.0%	4	1.5%	2	1.2%	24	1.7%	
Peds	3	3.0%	3	2.6%	6	5.3%	7	4.6%	7	2.8%	12	5.9%	13	4.7%	12	7.1%	63	4.6%	
Psychiatry	7	7.1%	7	6.1%	7	6.2%	16	10.6%	14	5.7%	25	12.2%	20	7.3%	7	4.1%	103	7.5%	
Public Health		0.0%		0.0%		0.0%	1	0.7%	2	0.8%	1	0.5%	1	0.4%	0	0.0%	5	0.4%	
Radiology	5	5.1%	7	6.1%	2	1.8%	1	0.7%	10	4.1%	9	4.4%	6	2.2%	6	3.6%	46	3.4%	
Surgery	13	13.1%	12	10.5%	14	12.4%	13	8.6%	29	11.8%	24	11.7%	22	8.0%	22	13.0%	149	10.9%	
	99	100%	114	100%	113	100%	151	100%	246	100%	205	100%	275	100%	169	100%	1372	100%	172
Moved																			
Unknown										0.0%		0.0%	8	7.8%	8	9.6%	16	5.4%	
Anae									1	3.2%	3	3.7%	11	10.7%	7	8.4%	22	7.4%	
Emergency									1	3.2%	4	4.9%	4	3.9%	3	3.6%	12	4.0%	
Family Medicine									13	41.9%	40	49.4%	36	35.0%	24	28.9%	113	37.9%	
Medical									9	29.0%	7	8.6%	14	13.6%	12	14.5%	42	14.1%	
Obs-Gyn										0.0%	2	2.5%	1	1.0%	3	3.6%	6	2.0%	
Pain Mgmt										0.0%		0.0%	1	1.0%		0.0%	1	0.3%	
Pathology										0.0%	4	4.9%	7	6.8%	4	4.8%	15	5.0%	
Peds									3	9.7%	1	1.2%	9	8.7%	2	2.4%	15	5.0%	
Psychiatry									1	3.2%	5	6.2%	4	3.9%	4	4.8%	14	4.7%	
Public Health										0.0%	1	1.2%	2	1.9%		0.0%	3	1.0%	
Radiology										0.0%	3	3.7%	1	1.0%	1	1.2%	5	1.7%	
Surgery									3	9.7%	11	13.6%	5	4.9%	15	18.1%	34	11.4%	
									31	100.0%	81	100.0%	103	100.0%	83	100.0%	298	100.0%	75
Retired																			
Unknown										0.0%	1	1.6%		0.0%		0.0%	1	0.7%	
Anae									2	12.5%	3	4.7%	1	2.6%	2	8.0%	8	5.6%	
Emergency										0.0%	4	6.3%	2	5.3%		0.0%	6	4.2%	
Family Medicine									8	50.0%	30	46.9%	20	52.6%	9	36.0%	67	46.9%	
Medical									2	12.5%	5	7.8%	8	21.1%	3	12.0%	18	12.6%	
Obs-Gyn										0.0%	2	3.1%	1	2.6%	2	8.0%	5	3.5%	
Pain Mgmt										0.0%		0.0%		0.0%		0.0%	0	0.0%	
Pathology										0.0%		0.0%	1	2.6%	1	4.0%	2	1.4%	
Peds									1	6.3%	6	9.4%	2	5.3%		0.0%	9	6.3%	
Psychiatry									1	6.3%	4	6.3%	2	5.3%	3	12.0%	10	7.0%	
Public Health										0.0%		0.0%		0.0%		0.0%	0	0.0%	
Radiology										0.0%	4	6.3%		0.0%		0.0%	4	2.8%	
Surgery									2	12.5%	5	7.8%	1	2.6%	5	20.0%	13	9.1%	
									16	100.0%	64	100.0%	38	100.0%	25	100.0%	143	100.0%	36
Net																			
Unknown	0	0.0%	0	0.0%						0.0%	0	0.0%	-7	-5.2%	-8	-13.1%	-15	-3.3%	
Anae	8	4.0%	2	3.3%						4.0%	2	3.3%	9	6.7%	1	1.6%	20	4.4%	
Emergency	9	4.5%	-6	-10.0%						4.5%	-6	-10.0%	2	1.5%	7	11.5%	12	2.6%	
Family Medicine	95	47.7%	5	8.3%						47.7%	5	8.3%	59	44.0%	32	52.5%	191	42.1%	
Medical	26	13.1%	29	48.3%						13.1%	29	48.3%	33	24.6%	17	27.9%	105	23.1%	
Obs-Gyn	4	2.0%	1	1.7%						2.0%	1	1.7%	7	5.2%	-2	-3.3%	10	2.2%	
Pain Mgmt	0	0.0%	0	0.0%						0.0%	0	0.0%	-1	-0.7%	0	0.0%	-1	-0.2%	
Pathology	6	3.0%	-2	-3.3%						3.0%	-2	-3.3%	-4	-3.0%	-3	-4.9%	-3	-0.7%	
Peds	3	1.5%	5	8.3%						1.5%	5	8.3%	2	1.5%	10	16.4%	20	4.4%	
Psychiatry	12	6.0%	16	26.7%						6.0%	16	26.7%	14	10.4%	0	0.0%	42	9.3%	
Public Health	2	1.0%	0	0.0%						1.0%	0	0.0%	-1	-0.7%	0	0.0%	1	0.2%	
Radiology	10	5.0%	2	3.3%						5.0%	2	3.3%	5	3.7%	5	8.2%	22	4.8%	
Surgery	24	12.1%	8	13.3%						12.1%	8	13.3%	16	11.9%	2	3.3%	50	11.0%	
	199	100.0%	60	100.0%						100.0%	60	100.0%	134	100.0%	61	100.0%	454	100.0%	114

Appendix I - Physician Count By Billing By Specialty for 2019-20 to 2024-25

Specialty Group	19-20		20-21		21-22		22-23		23-24		24-25		Cumulative % Inc		Average % Inc		Cumulative % Inc Since 22/23	
	# of Phys	# of Phys > \$100K	# of Phys	# of Phys > \$100K	# of Phys	# of Phys > \$100K	# of Phys	# of Phys > \$100K	# of Phys	# of Phys > \$100K	# of Phys	# of Phys > \$100K	# of Phys	# of Phys > \$100K	# of Phys	# of Phys > \$100K	# of Phys	# of Phys > \$100K
GENERAL PRACTITIONER	1,188	702	1,144	683	1,202	729	1,224	752	1,248	790	1,295	834	9.0%	18.8%	1.8%	3.8%	5.8%	10.9%
EMERGENCY MEDICINE	40	11	105	18	127	29	136	29	137	26	137	33	242.5%	200.0%	48.5%	40.0%	0.7%	13.8%
COMMUNITY MEDICINE	2	-	-	-	-	-	1	-	1	-	2	-	0.0%	n.a.	0.0%	n.a.	100.0%	n.a.
GERIATRIC MEDICINE	5	5	5	2	5	2	4	1	4	2	6	2	20.0%	-60.0%	4.0%	-12.0%	50.0%	100.0%
PHYSICAL MEDICINE & REHABILITATION	11	5	13	4	14	6	13	7	13	10	13	9	18.2%	80.0%	3.6%	16.0%	0.0%	28.6%
FAMILY MEDICINE SPECIALTIES	1,246	723	1,269	707	1,350	766	1,378	789	1,403	828	1,453	878	16.6%	21.4%	3.3%	4.3%	5.4%	11.3%
ANAESTHESIA	166	130	158	131	169	139	173	144	181	148	196	160	18.1%	23.1%	3.6%	4.6%	13.3%	11.1%
CARDIOLOGY	32	28	39	36	42	38	42	37	44	41	44	40	37.5%	42.9%	7.5%	8.6%	4.8%	8.1%
CLINICAL IMMUNOLOGY AND ALLERGY	4	4	6	6	6	6	6	6	6	6	6	6	50.0%	50.0%	10.0%	10.0%	0.0%	0.0%
DERMATOLOGY	18	17	18	16	19	18	21	17	23	19	25	19	38.9%	11.8%	7.8%	2.4%	19.0%	11.8%
ENDOCRINOLOGY / MEDICINE	8	4	6	3	9	4	9	3	9	4	8	4	0.0%	0.0%	0.0%	0.0%	-11.1%	33.3%
GASTROENTEROLOGY	15	15	16	15	15	15	16	15	16	15	18	14	20.0%	-6.7%	4.0%	-1.3%	12.5%	-6.7%
HAEMATOLOGY	6	3	7	3	10	6	12	6	10	6	9	5	50.0%	66.7%	10.0%	13.3%	-25.0%	-16.7%
INFECTIOUS DISEASES	5	2	8	2	9	2	10	2	8	1	8	2	60.0%	0.0%	12.0%	0.0%	-20.0%	0.0%
INTERNAL MEDICINE	168	101	153	94	158	102	167	100	190	114	218	126	29.8%	24.8%	6.0%	5.0%	30.5%	26.0%
MEDICAL GENETICS	5	-	5	-	6	-	6	-	6	-	6	-	20.0%	n.a.	4.0%	n.a.	0.0%	n.a.
MEDICAL MICROBIOLOGY	2	-	2	-	2	-	2	-	3	-	3	-	50.0%	n.a.	10.0%	n.a.	50.0%	n.a.
MEDICAL ONCOLOGY	7	7	19	5	18	4	17	7	18	8	19	6	11.8%	-14.3%	2.4%	-2.9%	11.8%	-14.3%
MEDICAL BIOCHEMISTRY	1	-	-	-	-	-	1	-	1	-	1	-	0.0%	n.a.	0.0%	n.a.	0.0%	n.a.
NEPHROLOGY	14	13	14	13	17	14	17	14	18	16	16	14	14.3%	7.7%	2.9%	1.5%	-5.9%	0.0%
NEUROLOGY	27	20	28	19	25	21	30	19	28	22	30	24	11.1%	20.0%	2.2%	4.0%	0.0%	26.3%
NEUROLOGY PAEDIATRIC	1	-	1	-	-	-	2	-	1	-	1	-	0.0%	n.a.	0.0%	n.a.	-50.0%	n.a.
PAEDIATRICS	120	58	118	41	123	49	126	55	136	62	149	66	24.2%	13.8%	4.8%	2.8%	18.3%	20.0%
PSYCHIATRY	118	25	112	25	134	31	127	24	124	22	127	21	7.6%	-16.0%	1.5%	-3.2%	0.0%	-12.5%
RADIATION ONCOLOGY	18	-	19	-	18	-	18	-	20	-	22	-	22.2%	n.a.	4.4%	n.a.	22.2%	n.a.
RESPIRATORY MEDICINE	6	5	7	6	7	6	7	6	8	4	9	5	50.0%	0.0%	10.0%	0.0%	28.6%	-16.7%
RHEUMATOLOGY	8	4	11	6	11	6	12	6	12	6	12	7	50.0%	75.0%	10.0%	15.0%	0.0%	16.7%
INTERNAL MEDICINE SPECIALTIES	759	436	747	421	799	461	821	461	862	494	927	519	22.1%	19.0%	4.4%	3.8%	12.9%	12.6%
CARDIOVASCULAR / THORACIC SURGERY	9	7	8	5	8	5	6	5	8	3	8	4	-11.1%	-42.9%	-2.2%	-8.6%	33.3%	-20.0%
GENERAL SURGERY	77	54	79	61	85	64	84	68	94	69	94	70	22.1%	29.6%	4.4%	5.9%	11.9%	2.9%
NEUROSURGERY	11	10	11	11	11	11	12	10	12	10	12	8	9.1%	-20.0%	3.8%	-4.0%	0.0%	-20.0%
OBSTETRICS AND GYNAECOLOGY	74	53	80	23	79	61	79	63	84	65	99	73	33.8%	37.7%	6.8%	7.5%	25.3%	15.9%
OPHTHALMOLOGY	51	41	52	42	57	41	58	47	58	45	64	49	25.5%	19.5%	5.1%	3.9%	10.3%	4.3%
ORTHOPAEDIC SURGERY	60	49	59	47	66	50	63	50	71	53	86	55	43.3%	12.2%	8.7%	2.4%	36.5%	10.0%
OTOLARYNGOLOGY	32	26	30	25	30	24	30	25	30	24	35	28	9.4%	7.7%	1.9%	1.5%	16.7%	12.0%
PLASTIC SURGERY	16	15	16	14	16	14	17	15	19	16	22	15	37.5%	0.0%	7.5%	0.0%	29.4%	0.0%
THORACIC SURGERY	5	5	5	5	6	6	7	6	7	6	7	6	40.0%	20.0%	8.0%	4.0%	0.0%	0.0%
UROLOGY	27	22	27	21	31	26	33	26	34	27	34	29	25.9%	31.8%	5.2%	6.4%	3.0%	11.5%
VASCULAR SURGERY	9	6	7	6	6	5	7	5	9	6	11	7	22.2%	16.7%	4.4%	3.3%	57.1%	40.0%
SURGICAL SPECIALTIES	371	288	374	260	395	307	396	320	426	324	472	344	27.2%	19.4%	5.4%	3.9%	19.2%	7.5%
DIAGNOSTIC RADIOLOGY	120	106	108	103	112	104	117	103	125	110	138	118	15.0%	11.3%	3.0%	2.3%	17.9%	14.6%
NUCLEAR MEDICINE	3	2	3	3	4	4	4	4	4	3	4	3	33.3%	50.0%	6.7%	10.0%	0.0%	-25.0%
DIRD SPECIALTIES	123	108	111	106	116	108	121	107	129	113	142	121	15.4%	12.0%	3.1%	2.4%	17.4%	13.1%
ANATOMICAL PATHOLOGY	36	33	33	32	34	31	36	30	35	31	36	33	0.0%	0.0%	0.0%	0.0%	0.0%	10.0%
GENERAL PATHOLOGY	7	6	6	4	6	6	7	6	9	6	8	8	14.3%	33.3%	2.9%	6.7%	14.3%	33.3%
HAEMATOLOGICAL PATHOLOGY	9	1	8	-	7	1	8	4	8	3	8	4	-11.1%	300.0%	-2.2%	60.0%	0.0%	0.0%
NEUROPATHOLOGY	2	-	2	-	2	-	2	-	2	-	2	-	0.0%	n.a.	0.0%	n.a.	0.0%	n.a.
PATHOLOGY SPECIALTIES	54	40	49	36	49	38	53	40	54	40	54	45	0.0%	12.5%	0.0%	2.5%	1.9%	12.5%
TOTAL NS PHYSICIANS	2,553	1,595	2,550	1,530	2,709	1,680	2,769	1,717	2,874	1,799	3,048	1,907	19.4%	19.6%	3.9%	3.9%	10.1%	11.1%

APPENDIX J – CONSUMER PRICE INDEX

Year	Canada	NS	NL	PE	NB	QC	ON	MB	SK	AB	BC
2015	1.12%	0.39%	0.47%	-0.61%	0.48%	1.05%	1.19%	1.20%	1.63%	1.13%	1.09%
2016	1.42%	1.24%	2.71%	1.16%	2.23%	0.72%	1.81%	1.26%	1.07%	1.12%	1.83%
2017	1.56%	1.15%	2.42%	1.83%	2.34%	1.04%	1.70%	1.64%	1.66%	1.55%	2.12%
2018	2.30%	2.19%	1.62%	2.33%	2.13%	1.65%	2.35%	2.53%	2.31%	2.40%	2.72%
2019	1.95%	1.63%	1.02%	1.17%	1.72%	2.09%	1.85%	2.24%	1.75%	1.78%	2.34%
2020	0.74%	0.29%	0.22%	0.00%	0.22%	0.84%	0.65%	0.51%	0.57%	1.12%	0.76%
2021	3.36%	4.06%	3.65%	5.08%	3.81%	3.77%	3.47%	3.27%	2.63%	3.18%	2.79%
2022	6.78%	7.53%	6.36%	8.90%	7.26%	6.68%	6.77%	7.89%	6.58%	6.43%	6.91%
2023	3.90%	4.02%	3.31%	2.85%	3.55%	4.49%	3.79%	3.52%	3.96%	3.27%	3.92%
2024	2.42%	2.31%	1.82%	1.85%	2.22%	2.34%	2.39%	1.07%	1.44%	2.93%	2.65%
Cumulative % Inc	25.54%	24.79%	23.60%	24.56%	25.97%	24.67%	25.98%	25.13%	23.60%	24.92%	27.13%
Average % Inc	2.55%	2.48%	2.36%	2.46%	2.60%	2.47%	2.60%	2.51%	2.36%	2.49%	2.71%
Ranking		6	9	8	3	7	2	3	9	5	1

Source: Stats Can Website

APPENDIX K – AVERAGE WEEKLY EARNINGS TRENDS

Year	Canada		NS		NL		PE		NB		QC		ON		MB		SK		AB		BC	
2014	934		822		993		781		880		920		980		880		940		1,080		930	
2015	955	2.2%	835	1.6%	1,017	2.4%	798	2.2%	895	1.7%	940	2.2%	1,000	2.0%	895	1.7%	960	2.1%	1,095	1.4%	950	2.2%
2016	975	2.1%	857	2.6%	1,038	2.1%	815	2.1%	910	1.7%	960	2.1%	1,025	2.5%	915	2.2%	980	2.1%	1,110	1.4%	975	2.6%
2017	996	2.2%	879	2.6%	1,059	2.0%	832	2.1%	928	2.0%	985	2.6%	1,050	2.4%	935	2.2%	1,000	2.0%	1,125	1.4%	1,000	2.6%
2018	1,012	1.6%	902	2.6%	1,088	2.7%	850	2.2%	945	1.8%	1,010	2.5%	1,080	2.9%	960	2.7%	1,030	3.0%	1,145	1.8%	1,030	3.0%
2019	1,040	2.8%	930	3.1%	1,112	2.2%	872	2.6%	980	3.7%	1,040	3.0%	1,110	2.8%	985	2.6%	1,060	2.9%	1,170	2.2%	1,060	2.9%
2020	1,073	3.2%	964	3.7%	1,142	2.7%	895	2.6%	1,010	3.1%	1,070	2.9%	1,145	3.2%	1,015	3.0%	1,090	2.8%	1,200	2.6%	1,095	3.3%
2021	1,118	4.2%	991	2.8%	1,185	3.8%	930	3.9%	1,050	4.0%	1,115	4.2%	1,190	3.9%	1,050	3.4%	1,130	3.7%	1,240	3.3%	1,140	4.1%
2022	1,168	4.5%	1,017	2.6%	1,210	2.1%	965	3.8%	1,085	3.3%	1,150	3.1%	1,230	3.4%	1,090	3.8%	1,170	3.5%	1,280	3.2%	1,185	3.9%
2023	1,201	2.8%	1,069	5.1%	1,239	2.4%	1,030	6.7%	1,119	3.1%	1,184	3.0%	1,274	3.6%	1,128	3.5%	1,202	2.8%	1,320	3.2%	1,245	5.1%
2024	1,242	3.4%	1,140	6.6%	1,274	2.9%	1,086	5.4%	1,152	2.9%	1,228	3.7%	1,316	3.3%	1,153	2.1%	1,250	4.0%	1,355	2.6%	1,298	4.2%
2025	1,297	4.4%	1,157	1.6%	1,287	1.0%	1,092	0.5%	1,180	2.5%	1,250	1.8%	1,330	1.0%	1,162	0.8%	1,260	0.8%	1,362	0.5%	1,310	1.0%
Cumulative	38.87%		40.81%		29.65%		39.78%		34.15%		35.90%		35.68%		32.08%		34.08%		26.15%		40.91%	
Average	3.03%		3.17%		2.39%		3.10%		2.71%		2.83%		2.82%		2.57%		2.71%		2.14%		3.17%	

Source: Stats Canada

APPENDIX L – TAX RATES BY PROVINCE – PERSONAL, SMALL BUSINESS, LARGE CORPORATION & SALES

Summary of Taxes Across Canada

Highest Personal Marginal Tax Rate For Salary/Interest			Small Business Tax			Large Corporation Tax		Sales Tax includes GST/HST/PST	
Province	2025	Marginal Threshold	Province	2025	Small Business Limit	Province	2025	Province	2025
NS	54.00%	>\$253,411	NS	10.5%	500,000	NS	29.0%	NS	14.0%
NB	52.50%	>\$253,414	NB	11.5%	500,000	NB	29.0%	NB	15.0%
PE	52.00%	>\$253,414	PE	10.0%	600,000	PE	30.0%	PE	15.0%
NL	54.80%	>\$1,128,858	NL	11.5%	500,000	NL	30.0%	NL	15.0%
ON	53.53%	>\$253,414	ON	12.2%	500,000	ON	26.5%	ON	13.0%
QC	53.31%	>\$253,414	QC	12.2%	500,000	QC	26.5%	QC	14.980%
MB	51.25%	>\$253,414	MB	9.0%	500,000	MB	27.0%	MB	12.0%
SK	47.50%	>\$253,414	SK	10.0%	600,000	SK	27.0%	SK	11.0%
AB	48.00%	>\$362,961	AB	11.0%	500,000	AB	23.0%	AB	5.0%
BC	53.50%	>\$259,829	BC	11.0%	500,000	BC	27.0%	BC	12.0%

Summary: NS has the 2nd highest (behind NL) marginal tax rate for personal income, 7th highest small business tax rate, 3rd highest large corporate taxes (tied with NB) and 5th highest sales tax (recent decline to 14%).

Source: Websites: Taxtips.ca

APPENDIX M – POPULATION TRENDS

Geography	Q4 2015	Q4 2016	Q4 2017	Q4 2018	Q4 2019	Q4 2020	Q4 2021	Q4 2022	Q4 2023	Q4 2024	Q4 2025
Canada	35,823,591	36,257,421	36,722,075	37,259,485	37,828,162	38,027,406	38,460,257	39,284,491	40,467,722	41,494,132	41,575,585
Newfoundland and Labrador	528,843	530,368	530,153	528,926	528,442	526,046	528,342	533,194	541,126	548,402	549,738
Prince Edward Island	144,949	147,699	150,595	153,906	157,025	159,179	163,580	168,939	176,173	180,877	182,508
Nova Scotia	938,914	946,623	956,074	967,578	982,592	989,154	1,006,562	1,033,146	1,062,825	1,088,273	1,091,857
New Brunswick	759,971	764,820	768,029	772,793	780,907	783,814	795,691	816,420	840,130	863,841	868,630
Quebec	8,190,074	8,246,383	8,326,075	8,418,646	8,521,542	8,551,865	8,604,508	8,718,914	8,882,501	9,038,268	9,058,089
Ontario	13,759,762	13,948,180	14,161,084	14,413,055	14,666,727	14,757,582	14,947,417	15,305,369	15,823,956	16,228,152	16,191,372
Manitoba	1,298,120	1,319,800	1,340,426	1,357,856	1,373,884	1,381,809	1,396,656	1,424,475	1,462,439	1,500,464	1,507,057
Saskatchewan	1,125,588	1,139,492	1,151,044	1,159,648	1,167,271	1,165,963	1,168,934	1,188,295	1,222,152	1,256,983	1,266,234
Alberta	4,163,048	4,207,139	4,253,530	4,311,439	4,376,860	4,412,013	4,451,129	4,560,275	4,752,173	4,957,075	5,040,871
British Columbia	4,795,547	4,886,638	4,962,706	5,052,131	5,148,047	5,173,896	5,269,491	5,406,059	5,572,694	5,696,852	5,683,201
Yukon	37,730	38,724	39,705	40,533	41,460	42,109	43,129	44,169	45,898	47,939	48,261
Northwest Territories 5	44,443	44,471	44,825	44,487	44,512	44,395	44,573	44,559	44,566	45,520	45,848
Nunavut 5	36,602	37,084	37,829	38,487	38,893	39,581	40,245	40,677	41,089	41,486	41,919

Canada		1.2%	1.3%	1.5%	1.5%	0.5%	1.1%	2.1%	3.0%	2.5%	0.2%	16.1%
Newfoundland and Labrador		0.3%	0.0%	-0.2%	-0.1%	-0.5%	0.4%	0.9%	1.5%	1.3%	0.2%	4.0%
Prince Edward Island		1.9%	2.0%	2.2%	2.0%	1.4%	2.8%	3.3%	4.3%	2.7%	0.9%	25.9%
Nova Scotia		0.8%	1.0%	1.2%	1.6%	0.7%	1.8%	2.6%	2.9%	2.4%	0.3%	16.3%
New Brunswick		0.6%	0.4%	0.6%	1.0%	0.4%	1.5%	2.6%	2.9%	2.8%	0.6%	14.3%
Quebec		0.7%	1.0%	1.1%	1.2%	0.4%	0.6%	1.3%	1.9%	1.8%	0.2%	10.6%
Ontario		1.4%	1.5%	1.8%	1.8%	0.6%	1.3%	2.4%	3.4%	2.6%	-0.2%	17.7%
Manitoba		1.7%	1.6%	1.3%	1.2%	0.6%	1.1%	2.0%	2.7%	2.6%	0.4%	16.1%
Saskatchewan		1.2%	1.0%	0.7%	0.7%	-0.1%	0.3%	1.7%	2.8%	2.8%	0.7%	12.5%
Alberta		1.1%	1.1%	1.4%	1.5%	0.8%	0.9%	2.5%	4.2%	4.3%	1.7%	21.1%
British Columbia		1.9%	1.6%	1.8%	1.9%	0.5%	1.8%	2.6%	3.1%	2.2%	-0.2%	18.5%
Yukon		2.6%	2.5%	2.1%	2.3%	1.6%	2.4%	2.4%	3.9%	4.4%	0.7%	27.9%
Northwest Territories 5		0.1%	0.8%	-0.8%	0.1%	-0.3%	0.4%	0.0%	0.0%	2.1%	0.7%	3.2%
Nunavut 5		1.3%	2.0%	1.7%	1.1%	1.8%	1.7%	1.1%	1.0%	1.0%	1.0%	14.5%

Source: Stats Canada, Table: 17-10-0009-01 (formerly CANSIM 051-0005)

APPENDIX N – POPULATION BY AGE DEMOGRAPHICS

Geography		Nova Scotia									
Age group	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
All ages	937,419	942,984	952,159	962,072	975,799	989,168	999,908	1,024,034	1,053,005	1,082,769	1,093,245
0 to 4 years	42,633	42,633	42,737	42,841	43,031	42,852	42,040	42,158	42,083	41,854	41,311
5 to 9 years	45,276	46,016	46,655	46,665	46,843	47,192	47,656	48,781	50,092	51,055	50,391
10 to 14 years	45,603	45,776	45,704	46,463	47,190	48,411	49,084	50,828	52,304	53,729	54,503
15 to 19 years	52,924	52,223	51,832	51,134	50,870	50,171	48,907	50,195	52,400	53,756	54,642
20 to 24 years	59,989	59,542	60,021	60,544	62,223	63,071	62,837	64,197	65,720	69,702	67,646
25 to 29 years	56,903	57,979	59,385	60,890	62,956	64,344	66,000	68,542	72,673	78,303	80,441
30 to 34 years	53,848	54,679	56,118	57,265	58,884	61,140	63,436	67,172	72,497	76,552	77,460
35 to 39 years	54,459	54,083	55,000	56,629	58,050	59,333	60,772	63,717	67,160	70,978	73,616
40 to 44 years	59,794	58,459	57,325	56,737	57,044	57,894	58,853	61,215	64,572	67,308	68,951
45 to 49 years	64,387	63,316	62,721	62,382	62,122	61,778	60,896	60,862	61,468	62,437	63,360
50 to 54 years	78,830	76,870	74,120	70,998	68,027	65,815	65,164	65,116	65,275	65,388	64,989
55 to 59 years	76,502	77,693	78,747	79,439	80,173	80,172	78,223	75,986	73,222	70,204	67,832
60 to 64 years	68,869	70,541	72,452	74,433	75,698	76,836	78,255	79,957	80,909	81,745	81,351
65 to 69 years	61,723	63,488	63,485	63,816	65,384	67,272	69,075	71,496	73,648	74,825	75,926
70 to 74 years	42,972	45,170	49,177	52,590	55,295	57,837	59,659	59,690	60,095	61,680	63,415
75 to 79 years	30,357	31,309	32,790	34,381	36,076	37,879	40,152	43,772	46,683	48,925	51,004
80 to 84 years	21,318	21,730	22,149	22,809	23,645	24,392	25,470	26,534	27,796	29,109	30,465
85 to 89 years	12,825	13,149	13,470	13,710	13,962	14,415	14,752	14,985	15,491	16,052	16,576
90 to 94 years	6,178	6,125	6,031	6,128	6,128	6,172	6,449	6,669	6,817	6,994	7,174
95 to 99 years	1,771	1,926	1,943	1,927	1,882	1,877	1,891	1,814	1,763	1,840	1,859
100 years and over	258	277	297	291	316	315	337	348	337	333	333
Median age	44.4	44.8	45	45.1	45.2	45.1	45	45	44.6	44	43.3

Geography		Canada									
Age group	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
All ages	35,704,498	#####	#####	#####	#####	#####	#####	#####	#####	#####	#####
0 to 4 years	1,930,005	1,943,799	1,948,684	1,952,216	1,949,121	1,937,161	1,902,883	1,887,192	1,874,658	1,874,025	1,871,184
5 to 9 years	1,969,407	2,004,040	2,026,743	2,043,748	2,056,265	2,067,384	2,072,565	2,090,692	2,120,248	2,151,780	2,138,350
10 to 14 years	1,895,854	1,920,169	1,952,245	2,001,618	2,047,524	2,092,804	2,114,016	2,146,637	2,187,386	2,232,438	2,251,628
15 to 19 years	2,100,302	2,089,925	2,081,573	2,083,934	2,089,984	2,082,685	2,059,975	2,140,739	2,230,085	2,313,964	2,319,393
20 to 24 years	2,399,432	2,394,672	2,418,375	2,457,110	2,489,653	2,473,470	2,404,398	2,465,156	2,589,895	2,741,716	2,703,780
25 to 29 years	2,432,054	2,469,206	2,520,707	2,591,885	2,653,167	2,679,330	2,674,655	2,747,627	2,897,646	3,031,487	2,995,647
30 to 34 years	2,456,947	2,484,570	2,507,762	2,544,390	2,598,609	2,660,337	2,704,004	2,805,364	2,984,138	3,145,235	3,175,724
35 to 39 years	2,368,174	2,405,969	2,451,236	2,512,312	2,573,416	2,618,643	2,643,161	2,699,898	2,809,310	2,950,432	3,032,523
40 to 44 years	2,347,219	2,338,366	2,349,618	2,378,146	2,419,939	2,459,921	2,505,252	2,570,133	2,675,092	2,796,675	2,859,631
45 to 49 years	2,444,314	2,429,060	2,416,270	2,406,846	2,398,221	2,392,795	2,381,758	2,403,418	2,457,114	2,538,433	2,593,361
50 to 54 years	2,782,245	2,733,227	2,661,668	2,574,487	2,498,513	2,441,944	2,427,770	2,424,801	2,430,337	2,444,797	2,447,311
55 to 59 years	2,613,963	2,665,387	2,697,223	2,729,826	2,754,235	2,747,541	2,690,509	2,624,381	2,549,619	2,492,843	2,446,446
60 to 64 years	2,242,875	2,312,728	2,387,488	2,458,662	2,516,589	2,565,102	2,612,928	2,645,150	2,681,436	2,712,778	2,708,208
65 to 69 years	1,902,798	1,969,001	1,993,484	2,031,297	2,091,884	2,161,130	2,226,492	2,304,280	2,379,499	2,442,866	2,494,286
70 to 74 years	1,357,604	1,422,775	1,532,211	1,623,616	1,705,206	1,784,158	1,845,779	1,870,380	1,910,982	1,973,110	2,044,533
75 to 79 years	982,945	1,014,229	1,056,966	1,108,116	1,162,495	1,213,690	1,272,339	1,372,752	1,458,583	1,535,283	1,609,542
80 to 84 years	734,960	742,361	750,000	763,954	786,478	810,325	841,433	875,752	917,461	963,055	1,008,273
85 to 89 years	467,131	480,565	492,635	501,535	509,176	514,268	521,396	527,824	540,339	558,478	579,797
90 to 94 years	214,913	223,084	228,108	233,776	239,644	246,060	255,977	262,016	266,566	270,684	275,677
95 to 99 years	53,447	59,038	63,228	66,092	68,830	69,996	71,970	74,788	77,288	80,331	84,078
100 years and older	7,909	8,632	8,851	9,054	9,546	9,894	10,604	11,152	11,406	11,919	12,281
Median age	40.6	40.7	40.8	40.7	40.7	40.8	41	40.9	40.6	40.3	40.6

APPENDIX O – CHRONIC DISEASE STATISTICS

Age-standardized prevalence, percent - Year 2023	Canada	NL	PE	NB	QC	ON	MB	SK	AB	BC	NS	Rank
Overweight (BMI - 25-29.99)	35.50	34.60	34.20	32.60	36.20	35.60	34.70	32.60	36.90	34.70	33.90	8 out of 10
Obesity (BMI-30+)	30.20	41.10	39.70	41.10	29.10	30.00	35.10	40.20	31.20	24.30	38.30	6 out of 10
Arthritis	20.60	29.70	25.30	26.00	18.10	20.80	23.40	21.30	20.60	20.10	27.10	2 out of 10
High Blood Pressure	19.90	27.50	25.00	27.00	18.40	20.50	21.00	22.50	18.40	18.00	24.80	4 out of 10
Diabetes	8.00	11.10	10.00	9.10	8.20	8.10	7.70	9.20	7.50	6.80	10.50	2 out of 10
Heart Disease	6.30	8.40	7.00	6.40	6.60	5.90	6.70	7.50	5.10	6.40	8.70	1 out of 10
Stroke	1.20	1.40	2.20	1.00	1.00	1.40	1.30	1.10	1.00	1.20	1.60	2 out of 10

Sources: Statistics Canada, Canadian Community Health Survey, 2022 and

1= Worst

10 = Best

APPENDIX P - LABOUR FORCE, EMPLOYMENT AND UNEMPLOYMENT TRENDS

Geography	Labour force characteristics	15-Dec	16-Dec	17-Dec	18-Dec	19-Dec	20-Dec	21-Dec	22-Dec	23-Dec	24-Dec	25-Dec	2021 over 2011
Canada	Population	29,192	29,547	29,957	30,437	30,898	31,178	31,510	32,112	33,168	34,285.10	34,723.00	18.95%
	Labour force	19,198	19,408	19,673	19,887	20,249	20,299	20,612	21,050	21,797	22,422.80	22,694.40	18.21%
	Employment	17,819	18,051	18,516	18,741	19,082	18,493	19,376	19,999	20,533	20,917.40	21,143.70	18.66%
	Full-time employment	14,473	14,555	14,971	15,188	15,485	15,120	15,797	16,427	16,854	17,150.70	17,278.30	19.38%
	Part-time employment	3,346	3,496	3,545	3,553	3,598	3,373	3,579	3,572	3,679	3,766.60	3,865.40	15.52%
	Unemployment	1,379	1,357	1,157	1,146	1,166	1,805	1,236	1,051	1,265	1,505.50	1,550.70	12.45%
	Unemployment rate	7.2	7	5.9	5.8	5.8	8.9	6	5	5.8	6.7	6.8	-5.56%
	Participation rate	65.8	65.7	65.7	65.3	65.5	65.1	65.4	65.6	65.7	65.4	65.4	-0.61%
	Employment rate	61	61.1	61.8	61.6	61.8	59.3	61.5	62.3	61.9	61	60.9	-0.16%
	Newfoundland and Labrador	Population	447	448	448	446	446	445	446	455.6	462.8	469.3	472.7
Labour force		272	268	265	258	253	256	253	265.4	268.9	271.7	273.1	0.40%
Employment		233	226	224	227	221	222	223	239.8	241	243.2	243.8	4.64%
Full-time employment		196	189	191	191	186	186	190	202.9	204.6	208.5	206.8	5.51%
Part-time employment		37	37	34	36	35	36	33	36.9	36.3	34.7	37	0.00%
Unemployment		39	42	41	31	32	34	30	25.6	27.9	28.5	29.2	-25.13%
Unemployment rate		14.3	15.5	15.4	12.1	12.7	13.2	11.9	9.6	10.4	10.5	10.7	-25.17%
Participation rate		60.7	59.7	59.2	57.9	56.8	57.5	56.7	58.3	58.1	57.9	57.8	-4.78%
Employment rate		52	50.4	50.1	50.8	49.6	49.9	50	52.6	52.1	51.8	51.6	-0.77%
Prince Edward Island		Population	120	122	125	128	131	133	136	141.5	147.9	152.4	155.3
	Labour force	80	81	83	85	88	86	91	89.1	100.2	103.4	102.3	27.88%
	Employment	72	72	75	77	82	78	84	84.1	92.3	94.6	94.8	31.67%
	Full-time employment	60	59	64	65	69	66	68	70.7	79.8	78.8	81.4	35.67%
	Part-time employment	12	14	12	12	13	12	15	13.3	12.6	15.8	13.4	11.67%
	Unemployment	8	8	8	8	7	9	7	5.1	7.9	8.8	7.5	-6.25%
	Unemployment rate	9.8	10.3	9.7	9.6	7.8	10.2	7.7	5.7	7.9	8.5	7.3	-25.51%
	Participation rate	66.3	65.8	66.6	66.1	67.3	64.8	66.3	63	67.7	67.8	65.9	-0.60%
	Employment rate	59.8	59	60.1	59.8	62	58.3	61.2	59.4	62.4	62.1	61	2.01%
	Nova Scotia	Population	778	784	791	800	811	817	828	861.7	888.4	909.4	917.8
Labour force		478	484	489	491	504	500	511	534	549.4	563.1	560.3	17.22%
Employment		436	443	449	456	463	454	470	500.5	516.6	527.7	523.9	20.16%
Full-time employment		361	352	364	375	378	377	383	416.8	424.5	439.8	434.3	20.30%
Part-time employment		75	91	85	81	84	78	87	83.8	92	87.8	89.6	19.47%
Unemployment		42	41	40	35	41	45	42	33.5	32.8	35.4	36.4	-13.33%
Unemployment rate		8.9	8.5	8.1	7.1	8.2	9	8.1	6.3	6	6.3	6.5	-26.97%
Participation rate		61.5	61.7	61.7	61.4	62.1	61.1	61.7	62	61.8	61.9	61	-0.81%
Employment rate		56	56.5	56.7	57	57	55.6	56.7	58.1	58.1	58	57.1	1.96%
New Brunswick		Population	628	631	635	639	646	648	655	676.9	698	716.7	724.3
	Labour force	388	394	391	391	392	400	395	413.1	420.8	433.2	436.3	12.45%
	Employment	353	357	360	358	361	360	363	382.3	393.5	400	407.4	15.41%
	Full-time employment	302	300	308	305	311	302	309	323.5	337.7	336.8	346	14.57%
	Part-time employment	51	56	52	53	51	58	54	58.8	55.8	63.2	61.4	20.39%
	Unemployment	36	37	31	33	30	39	32	30.8	27.3	33.2	28.9	-19.72%
	Unemployment rate	9.2	9.4	7.8	8.5	7.8	9.8	8.2	7.5	6.5	7.7	6.6	-28.26%
	Participation rate	61.8	62.4	61.6	61.3	60.7	61.6	60.3	61	60.3	60.4	60.2	-2.59%
	Employment rate	56.2	56.5	56.8	56	56	55.6	55.4	56.5	56.4	55.8	56.2	0.00%
	Quebec	Population	6,761	6,807	6,878	6,960	7,029	7,078	7,120	7,171.00	7,327.50	7,522.80	7,599.20
Labour force		4,379	4,409	4,446	4,504	4,568	4,514	4,576	4,645.40	4,774.30	4,893.90	4,928.60	12.55%
Employment		4,035	4,111	4,222	4,258	4,326	4,204	4,360	4,453.00	4,548.00	4,619.90	4,664.90	15.61%
Full-time employment		3,245	3,314	3,419	3,452	3,514	3,452	3,584	3,661.60	3,686.60	3,801.50	3,765.10	16.03%
Part-time employment		790	797	803	806	812	751	777	791.4	861.4	818.4	899.7	13.89%
Unemployment		344	298	223	246	241	311	216	192.4	226.3	274	263.7	-23.34%
Unemployment rate		7.9	6.8	5	5.5	5.3	6.9	4.7	4.1	4.7	5.6	5.4	-31.65%
Participation rate		64.8	64.8	64.6	64.7	65	63.8	64.3	64.8	65.2	65.1	64.9	0.15%
Employment rate		59.7	60.4	61.4	61.2	61.5	59.4	61.2	62.1	62.1	61.4	61.4	2.85%
Ontario		Population	11,330	11,503	11,701	11,930	12,147	12,275	12,420	12,688.70	13,142.00	13,605.10	13,751.50
	Labour force	7,372	7,448	7,586	7,662	7,895	8,014	8,139	8,303.10	8,574.30	8,870.00	8,978.60	21.79%
	Employment	6,878	6,963	7,147	7,231	7,472	7,233	7,639	7,864.00	8,036.60	8,201.40	8,273.10	20.28%
	Full-time employment	5,618	5,636	5,794	5,868	6,107	5,964	6,259	6,516.20	6,679.80	6,743.70	6,816.40	21.33%
	Part-time employment	1,260	1,326	1,353	1,362	1,365	1,269	1,380	1,347.80	1,356.80	1,457.80	1,456.70	15.61%
	Unemployment	494	486	440	431	423	781	499	439	537.7	668.5	705.5	42.81%
	Unemployment rate	6.7	6.5	5.8	5.6	5.4	9.7	6.1	5.3	6.3	7.5	7.9	17.91%
	Participation rate	65.1	64.8	64.8	64.2	65	65.3	65.5	65.4	65.2	65.2	65.3	0.31%
	Employment rate	60.7	60.5	61.1	60.6	61.5	58.9	61.5	62	61.2	60.3	60.2	-0.82%
	Manitoba	Population	989	1005	1020	1034	1046	1049	1054	1,088.60	1,123.90	1,163.00	1,181.70
Labour force		671	673	682	698	694	685	702	726.2	747.7	777.6	788.1	17.45%
Employment		632	632	645	655	658	627	665	693.8	715.5	729.1	742.8	17.53%
Full-time employment		505	509	516	533	524	510	534	570.2	587.3	598.6	615.2	21.82%
Part-time employment		127	124	129	122	135	117	131	123.6	128.2	130.5	127.6	0.47%
Unemployment		39	41	38	42	36	58	37	32.4	32.2	48.5	45.2	15.90%
Unemployment rate		5.8	6	5.5	6.1	5.1	8.4	5.3	4.9	4.3	6.2	5.7	-1.72%
Participation rate		67.8	66.9	66.9	67.5	66.4	65.3	66.5	67	66.5	66.9	66.7	-1.62%
Employment rate		63.9	62.9	63.2	63.4	63	59.8	63.1	63.7	63.7	62.7	62.9	-1.56%
Saskatchewan		Population	855	864	873	880	887	888	891	903.1	928.8	956.6	973.1
	Labour force	594	596	598	604	609	595	604	605.7	633.5	647	659.9	11.09%
	Employment	561	557	558	570	572	547	571	579.4	601.9	608.2	617.2	10.02%

Geography	Labour force characteristics	15-Dec	16-Dec	17-Dec	18-Dec	19-Dec	20-Dec	21-Dec	22-Dec	23-Dec	24-Dec	25-Dec	2021 over 2011
	Full-time employment	466	457	453	466	469	448	470	470.8	497	500.9	517.6	11.07%
	Part-time employment	95	100	105	104	103	99	101	108.6	104.9	107.2	99.6	4.84%
	Unemployment	34	39	40	34	37	48	33	26.3	31.6	38.8	42.7	25.59%
	Unemployment rate	5.7	6.5	6.6	5.6	6.1	8.1	5.5	4.3	5	6	6.5	14.04%
	Participation rate	69.5	69	68.5	68.6	68.7	67	67.8	67.1	68.2	67.6	67.8	-2.45%
	Employment rate	65.6	64.5	63.9	64.7	64.5	61.6	64.1	64.2	64.8	63.6	63.4	-3.35%
Alberta	Population	3,299	3,329	3,369	3,423	3,482	3,525	3,568	3,644.00	3,811.40	3,991.40	4,100.40	24.29%
	Labour force	2,389	2,404	2,423	2,432	2,458	2,442	2,485	2,536.60	2,655.50	2,758.50	2,822.00	18.12%
	Employment	2,217	2,196	2,253	2,274	2,277	2,168	2,300	2,393.10	2,486.90	2,572.70	2,630.90	18.67%
	Full-time employment	1,819	1,789	1,838	1,863	1,844	1,770	1,868	1,959.30	2,019.00	2,120.40	2,155.30	18.49%
	Part-time employment	399	407	415	411	433	398	432	433.8	467.9	452.3	475.7	19.22%
	Unemployment	172	208	170	158	181	275	185	143.5	168.5	185.8	191	11.05%
	Unemployment rate	7.2	8.6	7	6.5	7.4	11.2	7.5	5.7	6.3	6.7	6.8	-5.56%
	Participation rate	72.4	72.2	71.9	71	70.6	69.3	69.7	69.6	69.7	69.1	68.8	-4.97%
	Employment rate	67.2	66	66.9	66.4	65.4	61.5	64.5	65.7	65.2	64.5	64.2	-4.46%
	British Columbia	Population	3,986	4,052	4,118	4,197	4,273	4,319	4,391	4,480.70	4,637.80	4,798	4,847
Labour force		2,577	2,653	2,710	2,763	2,787	2,807	2,857	2,930.90	3,072.90	3,105	3,145	22.05%
Employment		2,404	2,495	2,583	2,636	2,650	2,601	2,702	2,808.40	2,900.50	2,921	2,945	22.49%
Full-time employment		1,901	1,951	2,025	2,070	2,083	2,045	2,133	2,234.70	2,337.20	2,322	2,340	23.10%
Part-time employment		503	544	558	565	567	556	569	573.7	563.3	598.9	604.6	20.20%
Unemployment		172	158	127	127	137	206	155	122.5	172.4	183.9	200.6	16.63%
Unemployment rate		6.7	5.9	4.7	4.6	4.9	7.3	5.4	4.2	5.6	5.9	6.4	-4.48%
Participation rate		64.6	65.5	65.8	65.8	65.2	65	65.1	65.4	66.3	64.7	64.9	0.46%
Employment rate		60.3	61.6	62.7	62.8	62	60.2	61.5	62.7	62.5	60.9	0	-0.16%

Source: Stats Canada

Gross Domestic Product (GDP)
By Province, Canada
For 2011 to 2021

APPENDIX Q – GROSS DOMESTIC PRODUCT

	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2014 to 2024
Canada	1,893,533.60	1,910,490.70	1,930,819.50	1,990,785.70	2,048,038.90	2,089,274.90	1,987,208.40	2,105,504.10	2,195,001.10	2,232,504.90	2,268,036.80	
Newfoundland and Labrador	30,483.20	30,153.10	30,619.00	31,002.60	30,128.60	31,306.80	29,848.00	30,157.40	29,659.50	28,952.60	29,645.20	
Prince Edward Island	5,686.40	5,768.50	5,892.00	6,156.50	6,267.30	6,559.40	6,366.40	6,873.70	7,189.90	7,338.60	7,604.70	
Nova Scotia	37,736.20	38,025.30	38,542.00	39,329.10	40,021.60	41,404.30	39,525.30	42,101.00	43,555.40	44,453.40	45,644.60	
New Brunswick	31,165.00	31,418.40	31,708.50	32,456.40	32,900.50	33,347.60	32,134.50	33,903.00	34,605.90	35,207.20	35,836.70	
Quebec	366,088.20	369,733.70	375,695.60	386,407.50	398,857.90	410,746.60	391,038.50	419,899.50	434,498.20	437,230.90	442,865.80	
Ontario	708,787.60	727,609.60	743,976.20	764,464.80	789,531.60	807,274.50	769,942.00	817,265.50	850,461.90	865,859.60	876,619.70	
Manitoba	62,077.40	62,936.30	63,878.20	66,007.10	67,372.80	68,085.80	65,309.90	66,336.70	69,231.90	70,527.80	71,271.80	
Saskatchewan	74,424.50	73,866.10	73,627.80	75,302.10	76,509.80	75,969.80	72,791.30	71,076.80	76,120.60	77,895.70	80,518.80	
Alberta	329,203.40	317,733.10	306,174.00	319,212.00	325,837.80	326,213.10	300,801.40	316,815.70	336,275.00	344,149.00	353,296.80	
British Columbia	238,305.60	243,845.50	251,036.30	260,220.30	270,106.40	277,848.20	269,189.90	290,177.50	302,118.60	309,420.40	313,136.80	
Yukon	2,752.50	2,543.40	2,726.90	2,781.00	2,857.80	2,825.40	2,875.00	3,143.90	3,378.80	3,438.70	3,326.10	
Northwest Territories	4,323.50	4,367.70	4,319.40	4,476.60	4,541.00	4,347.00	3,968.30	4,105.40	4,214.30	4,199.50	4,152.50	
Nunavut	2,500.10	2,490.00	2,623.60	2,969.70	3,105.80	3,346.40	3,417.90	3,648.00	3,691.10	3,831.50	4,117.30	
Canada		0.9%	1.1%	3.1%	2.9%	2.0%	-4.9%	6.0%	4.3%	1.7%	1.6%	19.8%
Newfoundland and Labrador		-1.1%	1.5%	1.3%	-2.8%	3.9%	-4.7%	1.0%	-1.7%	-2.4%	2.4%	-2.7%
Prince Edward Island		1.4%	2.1%	4.5%	1.8%	4.7%	-2.9%	8.0%	4.6%	2.1%	3.6%	33.7%
Nova Scotia		0.8%	1.4%	2.0%	1.8%	3.5%	-4.5%	6.5%	3.5%	2.1%	2.7%	21.0%
New Brunswick		0.8%	0.9%	2.4%	1.4%	1.4%	-3.6%	5.5%	2.1%	1.7%	1.8%	15.0%
Quebec		1.0%	1.6%	2.9%	3.2%	3.0%	-4.8%	7.4%	3.5%	0.6%	1.3%	21.0%
Ontario		2.7%	2.2%	2.8%	3.3%	2.2%	-4.6%	6.1%	4.1%	1.8%	1.2%	23.7%
Manitoba		1.4%	1.5%	3.3%	2.1%	1.1%	-4.1%	1.6%	4.4%	1.9%	1.1%	14.8%
Saskatchewan		-0.8%	-0.3%	2.3%	1.6%	-0.7%	-4.2%	-2.4%	7.1%	2.3%	3.4%	8.2%
Alberta		-3.5%	-3.6%	4.3%	2.1%	0.1%	-7.8%	5.3%	6.1%	2.3%	2.7%	7.3%
British Columbia		2.3%	2.9%	3.7%	3.8%	2.9%	-3.1%	7.8%	4.1%	2.4%	1.2%	31.4%
Yukon		-7.6%	7.2%	2.0%	2.8%	-1.1%	1.8%	9.4%	7.5%	1.8%	-3.3%	20.8%
Northwest Territories 5		1.0%	-1.1%	3.6%	1.4%	-4.3%	-8.7%	3.5%	2.7%	-0.4%	-1.1%	-4.0%
Nunavut 5		-0.4%	5.4%	13.2%	4.6%	7.7%	2.1%	6.7%	1.2%	3.8%	7.5%	64.7%

Source: Stats Canada

Gross Domestic Product (GDP)
By Province, Canada
For 2011 to 2021

APPENDIX R – GROSS DOMESTIC PRODUCT per CAPITA

	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2014 to 2024
Canada	53,256	53,331	53,253	54,212	54,967	55,231	52,257	54,745	55,874	55,168	54,659	
Newfoundland and Labrador	57,704	57,017	57,732	58,479	56,962	59,244	56,740	57,079	55,626	53,504	54,057	
Prince Edward Island	39,395	39,797	39,892	40,881	40,722	41,773	39,995	42,020	42,559	41,656	42,043	
Nova Scotia	40,224	40,499	40,715	41,136	41,363	42,138	39,959	41,827	42,158	41,826	41,942	
New Brunswick	41,050	41,342	41,459	42,259	42,573	42,704	40,998	42,608	42,387	41,907	41,485	
Quebec	44,849	45,144	45,559	46,409	47,378	48,201	45,726	48,800	49,834	49,224	48,999	
Ontario	51,883	52,880	53,339	53,983	54,779	55,041	52,173	54,676	55,566	54,718	54,018	
Manitoba	48,434	48,483	48,400	49,243	49,617	49,557	47,264	47,497	48,602	48,226	47,500	
Saskatchewan	66,737	65,624	64,615	65,421	65,977	65,083	62,430	60,805	64,059	63,737	64,057	
Alberta	80,221	76,322	72,775	75,046	75,575	74,531	68,178	71,176	73,740	72,419	71,271	
British Columbia	50,238	50,848	51,372	52,435	53,464	53,972	52,028	55,067	55,885	55,524	54,967	
Yukon	73,946	67,411	70,419	70,042	70,506	68,148	68,275	72,895	76,497	74,920	69,382	
Northwest Territories	98,192	98,276	97,128	99,868	102,075	97,659	89,386	92,105	94,578	94,231	91,224	
Nunavut	69,255	68,029	70,747	78,503	80,697	86,041	86,352	90,645	90,742	93,249	99,246	
Canada		0.1%	-0.1%	1.8%	1.4%	0.5%	-5.4%	4.8%	2.1%	-1.3%	-0.9%	2.6%
Newfoundland and Labrador		-1.2%	1.3%	1.3%	-2.6%	4.0%	-4.2%	0.6%	-2.5%	-3.8%	1.0%	-6.3%
Prince Edward Island		1.0%	0.2%	2.5%	-0.4%	2.6%	-4.3%	5.1%	1.3%	-2.1%	0.9%	6.7%
Nova Scotia		0.7%	0.5%	1.0%	0.6%	1.9%	-5.2%	4.7%	0.8%	-0.8%	0.3%	4.3%
New Brunswick		0.7%	0.3%	1.9%	0.7%	0.3%	-4.0%	3.9%	-0.5%	-1.1%	-1.0%	1.1%
Quebec		0.7%	0.9%	1.9%	2.1%	1.7%	-5.1%	6.7%	2.1%	-1.2%	-0.5%	9.3%
Ontario		1.9%	0.9%	1.2%	1.5%	0.5%	-5.2%	4.8%	1.6%	-1.5%	-1.3%	4.1%
Manitoba		0.1%	-0.2%	1.7%	0.8%	-0.1%	-4.6%	0.5%	2.3%	-0.8%	-1.5%	-1.9%
Saskatchewan		-1.7%	-1.5%	1.2%	0.8%	-1.4%	-4.1%	-2.6%	5.4%	-0.5%	0.5%	-4.0%
Alberta		-4.9%	-4.6%	3.1%	0.7%	-1.4%	-8.5%	4.4%	3.6%	-1.8%	-1.6%	-11.2%
British Columbia		1.2%	1.0%	2.1%	2.0%	0.9%	-3.6%	5.8%	1.5%	-0.6%	-1.0%	9.4%
Yukon		-8.8%	4.5%	-0.5%	0.7%	-3.3%	0.2%	6.8%	4.9%	-2.1%	-7.4%	-6.2%
Northwest Territories 5		0.1%	-1.2%	2.8%	2.2%	-4.3%	-8.5%	3.0%	2.7%	-0.4%	-3.2%	-7.1%
Nunavut 5		-1.8%	4.0%	11.0%	2.8%	6.6%	0.4%	5.0%	0.1%	2.8%	6.4%	43.3%

Source: Stats Canada