

Auditing Physician Billings

<https://policybase.cma.ca/en/permalink/policy1878>

Policy Type: Policy document
 Last Reviewed: 2019-Mar-03
 Date: 2004-Dec-04
 Topics: Physician practice/ compensation/ forms

Documents



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Physical activity

<https://policybase.cma.ca/en/permalink/policy1881>

Policy Type: Policy resolution
 Last Reviewed: 2019-Mar-03
 Date: 2004-Dec-04
 Topics: Health human resources
 Physician practice/ compensation/ forms

Resolution: The Canadian Medical Association urges federal/provincial/territorial governments to explore tax incentives as a possible component of a broad comprehensive strategy to increase physical activity.



Tobacco industry donations or grants

<https://policybase.cma.ca/en/permalink/policy1882>

Policy Type: Policy resolution
Last Reviewed: 2017-Mar-04
Date: 2004-Dec-04
Topics: Ethics and medical professionalism
Resolution: The Canadian Medical Association recommends and advocates that all Canadian medical schools adopt policies banning donations and/or grants from the tobacco industry.



Bill C-12: An Act to prevent the introduction and spread of communicable disease : CMA's Submission to the House of Commons Standing Committee on Health

<https://policybase.cma.ca/en/permalink/policy1948>

Policy Type: Parliamentary submission
Last Reviewed: 2012-Mar-03
Date: 2004-Nov-23
Topics: Population health/ health equity/ public health

Documents

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BR2005-02.pdf

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Aligning health and economic policy in the interest of Canadians : CMA's 2004 Pre-Budget Submission to the Standing Committee on Finance

<https://policybase.cma.ca/en/permalink/policy1949>

Policy Type: Parliamentary submission
Last Reviewed: 2012-Mar-03
Date: 2004-Nov-18
Topics: Health systems, system funding and performance


Documents




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Canada Health Access Fund

<https://policybase.cma.ca/en/permalink/policy1490>

Policy Type: Policy resolution
Last Reviewed: 2017-Mar-04
Date: 2004-Aug-18
Topics: Health human resources
Health systems, system funding and performance
Resolution: The Canadian Medical Association calls on the federal and provincial/territorial governments to establish a Canada Health Access Fund to assure that individual Canadians can obtain portable and timely access to care at the time and to the extent of their needs.



Wait time protocols and benchmarks

<https://policybase.cma.ca/en/permalink/policy1491>

Policy Type: Policy resolution

Last Reviewed: 2017-Mar-04

Date: 2004-Aug-18

Topics: Ethics and medical professionalism

Health human resources

Health systems, system funding and performance

Physician practice/ compensation/ forms

Resolution: The Canadian Medical Association will ensure that practising physicians are involved in the development of wait time protocols and benchmarks that are based on the available evidence, that are administratively straightforward and that are satisfactory to the needs of patients and physicians.



Increasing the number of family physicians

<https://policybase.cma.ca/en/permalink/policy1494>

Policy Type: Policy resolution

Last Reviewed: 2017-Mar-04

Date: 2004-Aug-18

Topics: Health human resources

Health systems, system funding and performance

Physician practice/ compensation/ forms

Resolution: The Canadian Medical Association calls on federal, provincial and territorial governments to work together to expand the number of comprehensive family physicians across Canada through the combined approach of training, recruitment and retention initiatives that are incentive based and developed with the input of actively practicing physicians.



Interest-free postponement of student loan debt during residency

<https://policybase.cma.ca/en/permalink/policy1497>

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| Policy Type: | Policy resolution |
| Last Reviewed: | 2017-Mar-04 |
| Date: | 2004-Aug-18 |
| Topics: | Health human resources |
| Resolution: | The Canadian Medical Association, in conjunction with the Canadian Federation of Medical Students, the Canadian Association of Internes and Residents, the Fédération des étudiants en médecine du Québec and the Fédération des médecins résidents du Québec, advocates the federal government to modify relevant federal law in order to postpone federal student loan debt repayment while maintaining interest-free loan status until the completion of the residency period. |



Family physicians and hospital affiliation

<https://policybase.cma.ca/en/permalink/policy1502>

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| Policy Type: | Policy resolution |
| Last Reviewed: | 2017-Mar-04 |
| Date: | 2004-Aug-18 |
| Topics: | Ethics and medical professionalism Health human resources Health systems, system funding and performance Physician practice/ compensation/ forms |
| Resolution: | The Canadian Medical Association calls on the federal, provincial and territorial governments to work together with the Association and its divisions and affiliates to develop initiatives that are incentive based to encourage family physicians to retain hospital affiliation and provide hospital care in supporting the provision of the full continuum of primary care to patients. |



Compensation for remote consultation

<https://policybase.cma.ca/en/permalink/policy1505>

Policy Type: Policy resolution

Last Reviewed: 2017-Mar-04

Date: 2004-Aug-18

Topics: Health human resources

Health information and e-health

Physician practice/ compensation/ forms

Resolution: The Canadian Medical Association recommends that provincial and territorial authorities recognize that any type of remote consultation such as telemedicine and teleconsultation is a medical act to be duly compensated.



Payment for discussions of patient health with other health professionals

<https://policybase.cma.ca/en/permalink/policy1508>

Policy Type: Policy resolution

Last Reviewed: 2017-Mar-04

Date: 2004-Aug-18

Topics: Ethics and medical professionalism

Health systems, system funding and performance

Physician practice/ compensation/ forms

Resolution: The Canadian Medical Association recommends that provincial and territorial authorities recognize that any discussion regarding a patient's health between a physician and another health professional is a medical act to be duly compensated.



Physician health and well-being

<https://policybase.cma.ca/en/permalink/policy1512>

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| Policy Type: | Policy resolution |
| Last Reviewed: | 2017-Mar-04 |
| Date: | 2004-Aug-18 |
| Topics: | Ethics and medical professionalism Health human resources Physician practice/ compensation/ forms |
| Resolution: | The Canadian Medical Association supports the educational needs of physician leaders with respect to physician health and well-being through the creation of professional development opportunities and programs. |



Combined fertilizer / pesticides

<https://policybase.cma.ca/en/permalink/policy1514>

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| Policy Type: | Policy resolution |
| Last Reviewed: | 2017-Mar-04 |
| Date: | 2004-Aug-18 |
| Topics: | Health care and patient safety Population health/ health equity/ public health |
| Resolution: | The Canadian Medical Association calls on the federal government to rescind the registration of combined fertilizer/pesticides. |



Federal cash transfers for health care

<https://policybase.cma.ca/en/permalink/policy1515>

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|----------------|---|
| Policy Type: | Policy resolution |
| Last Reviewed: | 2017-Mar-04 |
| Date: | 2004-Aug-18 |
| Topics: | Health systems, system funding and performance |
| Resolution: | The Canadian Medical Association calls on the federal government, in the context of the upcoming First Ministers' Meeting, to commit to a Health Partnership Guarantee to ensure federal cash transfers for health care will never again fall below a minimum threshold of 25% of provincial and territorial health care costs. |



Role of physicians in private delivery of publicly funded medical services

<https://policybase.cma.ca/en/permalink/policy1516>

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| Policy Type: | Policy resolution |
| Last Reviewed: | 2017-Mar-04 |
| Date: | 2004-Aug-18 |
| Topics: | Health human resources Health systems, system funding and performance Physician practice/ compensation/ forms |
| Resolution: | The Canadian Medical Association calls upon federal, provincial and territorial governments to respect the role and the independence of physicians in their private delivery of publicly funded medical services. |



Annual report on the status of Canada's health care system and its funding

<https://policybase.cma.ca/en/permalink/policy1517>

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| Policy Type: | Policy resolution |
| Last Reviewed: | 2017-Mar-04 |
| Date: | 2004-Aug-18 |
| Topics: | Population health/ health equity/ public health Health systems, system funding and performance |
| Resolution: | The Canadian Medical Association will ensure the development of an annual report on the status of Canada's health care system, including a component on the financial sustainability of the publicly funded medicare program. |



Adoption and implementation of sustainable funding framework for medicare

<https://policybase.cma.ca/en/permalink/policy1518>

Policy Type: Policy resolution
Last Reviewed: 2017-Mar-04
Date: 2004-Aug-18
Topics: Population health/ health equity/ public health
Health systems, system funding and performance
Resolution: The Canadian Medical Association advocates for the adoption and implementation of a sustainable funding framework for medicare based on the policy objectives set out in the Canada Health Access Fund.



Medicare cost

<https://policybase.cma.ca/en/permalink/policy1519>

Policy Type: Policy resolution
Last Reviewed: 2017-Mar-04
Date: 2004-Aug-18
Topics: Health systems, system funding and performance
Physician practice/ compensation/ forms
Resolution: The Canadian Medical Association requests that in order to enhance the transparency and accountability of Medicare, the government should identify in their annual public accounts the sum of money expended on insured physician services and acute hospital care (Medicare cost).



Sustainability of health care system

<https://policybase.cma.ca/en/permalink/policy1520>

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| Policy Type: | Policy resolution |
| Last Reviewed: | 2017-Mar-04 |
| Date: | 2004-Aug-18 |
| Topics: | Health systems, system funding and performance |
| Resolution: | The Canadian Medical Association states that the key parameters used in the debate on the sustainability of our healthcare system should include an analysis of various organization of work models and the concepts of effectiveness and efficiency. |