



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: BD05-03-55

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.



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: GC04-11

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: GC04-21

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.



Family physicians and hospital affiliation

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

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: GC04-36

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: GC04-41

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: GC04-44

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>

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: GC04-48

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.



Role of physicians in private delivery of publicly funded medical services

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

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: GC04-83

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.



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: GC04-86

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).



Compensation ceilings for GP's and access to front-line services

<https://policybase.cma.ca/en/permalink/policy1524>

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: GC04-51

The Canadian Medical Association recommends that compensation ceilings for general practitioners where they exist be removed in order to improve access to front-line services.