




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



PD05-01.pdf

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Coercive legislation

<https://policybase.cma.ca/en/permalink/policy8539>

Policy Type: Policy resolution
 Last Reviewed: 2020-Feb-29
 Date: 2006-Aug-23
 Topics: Physician practice/ compensation/ forms
 Resolution: GC06-69

The Canadian Medical Association and its divisions staunchly oppose any form of coercive legislation in regard to the negotiation of working conditions and compensation of physicians.



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.



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.



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.



Goods and Services tax (GST)

<https://policybase.cma.ca/en/permalink/policy670>

Policy Type: Policy resolution

Last Reviewed: 2017-Mar-04

Date: 1997-Aug-20

Topics: Physician practice/ compensation/ forms

Resolution: GC97-9

That General Council support the continuation of an aggressive strategy at the federal level aimed at establishing equitable application of federal GST/HST tax policy.



The impact of the Goods and Services Tax (GST) and the proposed Harmonized Sales Tax (HST) on Canadian physicians : Brief submitted to the House of Commons Standing Committee on Finance

<https://policybase.cma.ca/en/permalink/policy2023>

Policy Type: Parliamentary submission
Last Reviewed: 2019-Mar-03
Date: 1997-Jan-21
Topics: Health human resources
Physician practice/ compensation/ forms

Documents

BR1997-04.pdf

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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.



Initiatives to reduce wait times

<https://policybase.cma.ca/en/permalink/policy1530>

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: GC04-15

The Canadian Medical Association, consistent with A Prescription for Sustainability, advocates to reduce wait times through the following initiatives: a) development of pan-Canadian wait time benchmarks based on available evidence; b) a network of regional registries and referral programs for specialized care; c) streamlined referral for investigation and specialty consultations; and d) Canadian Health Access Fund designed to support inter-jurisdictional portability of care.



Medical Council of Canada

<https://policybase.cma.ca/en/permalink/policy510>

Policy Type: Policy resolution

Last Reviewed: 2014-Mar-01

Date: 1989-Aug-23

Topics: Health human resources

Physician practice/ compensation/ forms

Resolution: GC89-71

That the Canadian Medical Association reaffirm its endorsement of the Medical Council of Canada as a national examination corporation.