Disclosure of COVID-19 Vaccination Status by Physicians

POLICY TYPE
Policy document

DATE
2021-10-22

TOPICS
Physician practice, compensation, forms

Documents

Disclosure of COVID-19 Vaccination Status by Physicians

In its position recommendation:
1. Physicians should disclose their COVID-19 vaccination status to patients.
2. Physicians should provide patients with information on the safety and effectiveness of COVID-19 vaccines.
3. Physicians should ensure that patient information is obtained with respect to the patient's consent.
4. Physicians should provide information to patients on the potential benefits and risks of COVID-19 vaccines.
5. Physicians should maintain confidentiality of patient information as required by law.

In its policy recommendation:
6. Physicians should disclose their COVID-19 vaccination status to patients.
7. Physicians should ensure that patient information is obtained with respect to the patient's consent.
8. Physicians should provide information to patients on the potential benefits and risks of COVID-19 vaccines.
9. Physicians should maintain confidentiality of patient information as required by law.

There is no automatic patient right to know their physician's COVID-19 vaccination status unless patient consent is obtained.
COVID-19 Vaccine Global Intellectual Property Policy

1. The CMA encourages the Government of Canada to participate in the global dialogue, including the World Trade Organization, the World Intellectual Property Organization, and the World Health Organization, to address global health security and access issues.

2. The CMA encourages the Government of Canada to support a transparent, multilateral, and non-commercial approach to vaccine intellectual property rights, including waiving considerations of waiving intellectual property rights for vaccines.

3. The CMA recommends that the Government of Canada support a transparent, multilateral, and non-commercial approach to vaccine intellectual property rights, including waiving considerations of waiving intellectual property rights for vaccines.

4. The CMA recommends that the Government of Canada support a transparent, multilateral, and non-commercial approach to vaccine intellectual property rights, including waiving considerations of waiving intellectual property rights for vaccines.

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CMA Pre-budget Submission
https://policybase.cma.ca/link/policy14259

POLICY TYPE
Parliamentary submission

DATE
2020-08-07

TOPICS
Physician practice, compensation, forms
Health information and e-health
Health care and patient safety
Health systems, system funding and performance

Documents
Submission in Response to the Consultation on the Canada Emergency Wage Subsidy: Keeping Medical Clinic Employees on the Payroll
https://policybase.cma.ca/link/policy14258

POLICY TYPE
Parliamentary submission

DATE
2020-06-05

TOPICS
Physician practice, compensation, forms
Health systems, system funding and performance

Documents

Submission in Response to the Consultation on the Canada Emergency Wage Subsidy:
Keeping Medical Clinic Employees on the Payroll
June 5, 2020
Federal measures to recognize the significant contributions of Canada’s front-line health care workers during the COVID-19 pandemic

https://policybase.cma.ca/link/policy14247

POLICY TYPE
Parliamentary submission

DATE
2020-06-02

TOPICS
Physician practice, compensation, forms
Protecting and supporting Canada’s health-care providers during COVID-19
https://policybase.cma.ca/link/policy14260

POLICY TYPE
Parliamentary submission

DATE
2020-03-23

TOPICS
Physician practice, compensation, forms
Health systems, system funding and performance
Health human resources

Documents
Rural and remote practice issues
https://policybase.cma.ca/link/policy211

POLICY TYPE
Policy document

LAST REVIEWED
2020-02-29

DATE
2000-05-09

REPLACES
Promoting medicine as a career for rural high school students (Resolution BD88-03-78)

TOPICS
Physician practice, compensation, forms

Documents
The treating physician's role in helping patients return to work after an illness or injury (Update 2013)

https://policybase.cma.ca/link/policy10754

POLICY TYPE
Policy document

LAST REVIEWED
2020-02-29

DATE
2013-05-25

REPLACES
The physician's role in helping patients return to work after an illness or injury (Update 2010)

TOPICS
Physician practice, compensation, forms
Standing Committee on Health’s study on violence faced by healthcare workers
https://policybase.cma.ca/link/policy14052

POLICY TYPE
Parliamentary submission

DATE
2019-05-14

TOPICS
Health care and patient safety
Ethics and medical professionalism
Health human resources
Physician practice, compensation, forms

Documents

May 14, 2019

Rev. Craig, M.D.

Chair, Special Committee on Health of Healthcare Workers

Re: Standing Committee on Health’s study on violence faced by healthcare workers

Dear Rev. Craig,

I was pleased to learn that the Standing Committee on Health of Healthcare Workers has initiated a study on violence faced by healthcare workers. Understanding the risks and challenges faced by healthcare workers is crucial to ensuring a safe and supportive work environment.

In my capacity as [Your Position], I have extensive experience in [Your Field of Expertise]. I believe that addressing this issue requires a comprehensive approach that includes not only safety protocols but also support systems for healthcare workers.

The Canadian Medical Association (CMA) has been advocating for policies and programs that promote the well-being of healthcare workers. Our recommendations focus on [Specific Areas of Concern].

I would be happy to share additional information or insights on this topic. Please let me know if you would like to schedule a meeting or if there is any specific information you require.

Sincerely,

[Your Name]

[Your Position]

[Your Contact Information]
Auditing Physician Billings
https://policybase.cma.ca/link/policy1878

Policy document

2004-12-04

Physician practice, compensation, forms

Documents

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**CMA POLICY**

**Auditing Physician Billings**

- **Purpose:**
  - The CMA has determined that many problems with physician billing procedures are related to the use of automated billing systems. It is therefore important to develop procedures to ensure that these systems are reliable.

- **Recommendations:**
  - All physicians should ensure that their billing systems are reliable. They should also ensure that their systems are able to produce a comprehensive listing of patients who have been referred for a procedure.

- **References:**
  - The CMA encourages physicians to develop procedures for auditing their billing systems. These procedures should be reviewed and updated on a regular basis.

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A new vision for Canada: family practice—the patient's medical home 2019

CMA Policybase - Canadian Medical Association
A new vision for Canada: family practice— the patient’s medical home 2019
https://policybase.cma.ca/link/policy14024

POLICY TYPE  Policy endorsement
DATE  2019-03-02
TOPICS  Physician practice, compensation, forms
Health systems, system funding and performance

Documents
Maintaining Ontario’s leadership on prohibiting the use of sick notes for short medical leaves

https://policybase.cma.ca/link/policy13934

POLICY TYPE  Parliamentary submission
DATE  2018-11-15
TOPICS  Physician practice, compensation, forms
             Health systems, system funding and performance

Documents
Physician compensation (Update 2013)

https://policybase.cma.ca/link/policy11060

POLICY TYPE
Policy document

LAST REVIEWED
2018-03-03

DATE
2013-12-07

REPLACES
Physician Compensation (Update 2001)

TOPICS
Physician practice, compensation, forms

Documents

CMA POLICY

PHYSICIAN COMPENSATION

Policy Statement

Physician compensation as defined generally as the remuneration or financial reward for medical services.

Physician's income includes both full-time and part-time compensation. Full-time compensation includes salary, benefits, and other financial incentives. Part-time compensation includes fees for service, consulting fees, and other financial incentives.

Physician compensation is influenced by a variety of factors, including patient volume, patient mix, and the complexity of care. Additionally, compensation may be influenced by the type of practice setting, whether it be hospital-based, office-based, or a combination of both. Compensation may also be influenced by the geographic location of the practice.

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South African perspective

South African perspective

Several factors influence physician compensation, including the type of practice, the geographic location of the practice, and the type of compensation. Compensation may be influenced by the type of practice setting, whether it be hospital-based, office-based, or a combination of both. Compensation may also be influenced by the geographic location of the practice.

The type of practice setting may influence compensation, with hospital-based practices typically offering higher compensation than office-based practices. Additionally, compensation may be influenced by the geographic location of the practice, with urban practices typically offering higher compensation than rural practices.

The type of compensation may also influence physician compensation, with fee-for-service compensation typically offering higher compensation than salary compensation. Additionally, compensation may be influenced by the type of practice setting, whether it be hospital-based, office-based, or a combination of both. Compensation may also be influenced by the geographic location of the practice.

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A medical industry perspective – supporting small business, the economic engine of Canada
https://policybase.cma.ca/link/policy13731

POLICY TYPE  Parliamentary submission
DATE  2017-10-02
TOPICS  Physician practice, compensation, forms

Documents

CMA submission:
A MEDICAL INDUSTRY PERSPECTIVE – SUPPORTING SMALL BUSINESS, THE ECONOMIC ENGINE OF CANADA

Submission to the Department of Finance consultation on tax planning using private corporations
October 3, 2017
Third-party forms (Update 2017)
https://policybase.cma.ca/link/policy13643

POLICY TYPE
Policy document

DATE
2017-05-27

REPLACES
Third-party Forms: The Physician’s Role (Update 2010)
Short-Term Illness Certificate

TOPICS
Physician practice, compensation, forms

Documents
The physician appointment and reappointment process 2016

https://policybase.cma.ca/link/policy13564

POLICY TYPE
Policy document

DATE
2016-12-03

TOPICS
Health human resources
Physician practice, compensation, forms

Documents
Federal tax proposal risks negative consequences for health care delivery

https://policybase.cma.ca/link/policy11960

POLICY TYPE
Parliamentary submission

DATE
2016-11-18

TOPICS
Physician practice, compensation, forms

Documents
Avoiding negative consequences to health care delivery from federal taxation policy

https://policybase.cma.ca/link/policy11957

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<td>2016-08-31</td>
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<tr>
<td>TOPICS</td>
<td>Health human resources</td>
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<td>Physician practice, compensation, forms</td>
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Documents

[Image of CMA Submission]
Small business perspectives of physician medical practices in Canada
https://policybase.cma.ca/link/policy11846

POLICY TYPE
Parliamentary submission

DATE
2016-03-21

TOPICS
Physician practice, compensation, forms
Health human resources

Documents
Guiding principles for physicians recommending mobile health applications to patients

https://policybase.cma.ca/link/policy11521

POLICY TYPE
Policy document

DATE
2015-05-30

TOPICS
Health information and e-health
Physician practice, compensation, forms

Documents

CMA POLICY

GUIDING PRINCIPLES FOR PHYSICIANS RECOMMENDING MOBILE HEALTH APPLICATIONS TO PATIENTS

This document is designed to provide guidance to physicians about how to use mobile health applications. These applications may be used to support or enhance the care of the patient's health, health care and health information.

These guiding principles are based on the Canadian Medical Association's (CMA) Personal Health Information Privacy Guidelines and the CMA's Code of Ethics.

Background

1. Mobile health applications are software or hardware tools that are designed to collect, store, transmit or share health information about an individual (personal health information). These applications are typically used on mobile devices such as smartphones or tablets.

2. Physicians may recommend mobile health applications to patients for various reasons, such as improving patient engagement, enhancing health information management, or supporting disease management.

3. Mobile health applications can be used to collect, store, transmit or share health information about an individual (personal health information).

4. Physicians should be aware of their professional and ethical obligations when recommending mobile health applications to patients.

5. Physicians should ensure that patients understand the purpose, benefits, and potential risks associated with using mobile health applications.

6. Physicians should ensure that patients understand the privacy and security measures in place to protect their personal health information.

7. Physicians should ensure that patients have access to the personal health information they collect using mobile health applications.

8. Physicians should ensure that patients have the ability to control access to their personal health information.

9. Physicians should ensure that patients understand the implications of using mobile health applications on their health care and health information.

Guiding Principles

1. Physicians should ensure that patients understand the purpose, benefits, and potential risks associated with using mobile health applications.

2. Physicians should ensure that patients understand the privacy and security measures in place to protect their personal health information.

3. Physicians should ensure that patients have access to the personal health information they collect using mobile health applications.

4. Physicians should ensure that patients have the ability to control access to their personal health information.

5. Physicians should ensure that patients understand the implications of using mobile health applications on their health care and health information.

CMA Policybase - Canadian Medical Association