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

RURAL AND REMOTE PRACTICE ISSUES

The Canadian Medical Association (CMA) believes that all Canadians should have access to quality medical care. This policy is intended to address issues unique to rural and remote practice environments.

Rural and remote practice environments face several challenges that affect physician recruitment and retention. These challenges include shorter patient waiting times, limited access to specialists, and higher practice costs. The CMA supports efforts to improve access to healthcare services in these areas.

The CMA advocates for policies that support rural and remote practice environments, including:

- Enhanced training programs for rural and remote practitioners
- Increased funding for rural and remote healthcare facilities
- Improved telehealth and virtual care services

The CMA also supports the development of strategies to attract and retain physicians in rural and remote practice environments.

Conclusion

The CMA believes that all Canadians should have access to quality medical care, regardless of their location. The organization supports policies and initiatives that promote rural and remote practice environments and address the unique challenges faced by these communities.

Endnotes


Auditing Physician Billings
https://policybase.cma.ca/link/policy1878

POLICY TYPE Policy document
LAST REVIEWED 2019-03-03
DATE 2004-12-04
TOPICS Physician practice, compensation, forms

Documents

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CMA POLICY

Auditing Physician Billings:

Purpose:

The CMA has developed an auditing program to track the volume and distribution of medical and non-medical services provided by physicians. The program is designed to ensure that physicians are billed in accordance with the terms of their contracts. The program also provides a means for addressing potential billing errors or irregularities.

Instructions:

Billing and auditing of physician services may take place at any level of a physician's practice. The following guidelines are provided as a general guide for physicians and their billing staff.

- Ensure that all services are recorded accurately. This includes both medical and non-medical services.
- Keep all documentation related to billing services. This includes copies of claims, receipts, and any other relevant correspondence.
- Follow up on any discrepancies or billing errors. If a billing error is discovered, it should be corrected as soon as possible.
- Maintain ongoing education and training in auditing and billing practices.

In summary, the goal of the auditing program is to ensure that physicians are accurately billing for the services they provide. This helps to maintain the integrity of the billing process and ensures that patients are charged appropriately for the services they receive.
CMA's Submission to Finance Canada regarding proposed amendments to the Income Tax Act
https://policybase.cma.ca/link/policy10353

POLICY TYPE  Parliamentary submission
DATE  2012-02-14
TOPICS  Physician practice, compensation, forms

Documents
CMA’s Submission to the House of Commons Standing Committee on Finance: Amending Bill C-25 to expand the PRPP framework to provide value to self-employed Canadians
https://policybase.cma.ca/link/policy10355

POLICY TYPE  Parliamentary submission
DATE           2012-02-24
TOPICS         Physician practice, compensation, forms
Canadian Medical Association Submission on Motion 315 (Income Inequality)
https://policybase.cma.ca/link/policy10715

POLICY TYPE          Parliamentary submission
DATE                2013-04-25
TOPICS              Physician practice, compensation, forms

Documents

April 25, 2013

A healthy population and a stable economy are closely linked. Health care is both an investment and a necessity for our economic vitality and social cohesion.аем
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

Documents
Canadian Medical Association Submission on Bill C-462 Disability Tax Credit Promoters Restrictions Act
https://policybase.cma.ca/link/policy10812

POLICY TYPE              Parliamentary submission
DATE                    2013-05-22
TOPICS                   Physician practice, compensation, forms

Documents
PHYSICIAN COMPENSATION

Policy document

2013-12-07

Physician Compensation (Update 2001)

Physician practice, compensation, forms

Documents
Response to the consultation paper Pension Innovation for Canadians: The Target benefit plan
https://policybase.cma.ca/link/policy11213

POLICY TYPE  Response to consultation
DATE  2014-06-23
TOPICS  Physician practice, compensation, forms

Documents

POLICY TYPE: Parliamentary submission
DATE: 2015-02-23
TOPICS: Physician practice, compensation, forms

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**

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**CMA POLICY**

GUIDING PRINCIPLES FOR PHYSICIANS RECOMMENDING MOBILE HEALTH APPLICATIONS TO PATIENTS

The document is designed to provide guidance to physicians about how to offer mobile health applications to patients. This is in accordance with the policies of the Canadian Medical Association (CMA) on the use of technology in health care.

**Background**

- Use of mobile applications, devices, and related technologies may require additional oversight to ensure they are safe and effective.
- Physicians should be aware of the potential risks and benefits associated with mobile health applications.
- Physicians should discuss the benefits and limitations of mobile health applications with patients.
- Physicians should seek additional training or education to ensure they are adequately prepared to use mobile health applications.
- Physicians should be aware of the privacy and security implications of using mobile health applications.

**Additional Information**

- Physicians should ensure that patients are aware of the use of mobile health applications and that they consent to its use.
- Physicians should ensure that patients understand the potential risks and limitations of using mobile health applications.
- Physicians should ensure that patients understand the privacy and security implications of using mobile health applications.

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CMA Policybase - Canadian Medical Association
Small business perspectives of physician medical practices in Canada
https://policybase.cma.ca/link/policy11846

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

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

POLICY TYPE  Response to consultation
DATE  2016-08-31
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
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
RATIONAL

In Canada’s health care system, requests for third-party forms (e.g., disability, insurance, and proof of care) are on the rise. This presents a conflict of interest for physicians. Physicians are expected to provide the best patient care possible, but they may be conflicted when their work helps generate a benefit for themselves or their families. Physicians need to be aware of the potential for conflicts of interest and take steps to manage them.

SCOPE OF POLICY

The purpose of this policy is to provide guidance to physicians about the use of third-party forms to support patient care and the physician’s role in the Canadian health care system.

GENERAL PRINCIPLES

1. Physicians should not accept compensation for their services when they provide third-party forms.

2. Physicians should not bill patients for the time spent on third-party forms.

3. Physicians should not accept gifts or other forms of remuneration in exchange for providing third-party forms.

4. Physicians should not accept compensation for the time spent on third-party forms that they provide to patients.

5. Physicians should not accept compensation for the time spent on third-party forms that they provide to patients for the benefit of a third party.

6. Physicians should not accept compensation for the time spent on third-party forms that they provide to patients for the benefit of a third party if the third party is not a patient.

7. Physicians should not accept compensation for the time spent on third-party forms that they provide to patients for the benefit of a third party if the third party is not a patient and the physician is not a family member of the patient.

8. Physicians should not accept compensation for the time spent on third-party forms that they provide to patients for the benefit of a third party if the third party is not a patient and the physician is not a family member of the patient and the third party is not a patient.
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
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