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
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

Auditing Physician Billings

Purpose:
The CMA has determined that many physicians are being overcharged for supplies and equipment by service providers. These problems, in addition to the difficulties involved in billing patients for the services these physicians are providing, may be resolved by auditing physician billings in conjunction with an appropriate billing process.

Assessment:
To prevent physicians from overcharging patients through service providers, the CMA has determined that physicians should be able to track all charges made to their patients. Auditing physician billings should be carried out by service providers to ensure that all charges are reasonable and necessary.

Reimbursements:
Reimbursements for physician services should be made on the basis of the actual costs incurred. A detailed explanation of the charges, including all costs incurred, should be provided to patients.

Recommendations:
Physicians should be encouraged to submit claims for services on a timely basis. The CMA recommends that physicians ensure that all charges are reasonable and necessary before submitting claims to third-party payers.

CMA POLICY

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Recommendations:
Physicians should be encouraged to submit claims for services on a timely basis. The CMA recommends that physicians ensure that all charges are reasonable and necessary before submitting claims to third-party payers.
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
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

CMA POLICY

PHYSICIAN COMPENSATION
(UPDATE 2013)

Objectives
Physician compensation is a complex and dynamic area, influenced by a variety of factors, including, but not limited to:

1. Supply and demand of physician services
2. Economic conditions and inflation
3. Rate of technological change and development
4. Health care system and public policy decisions
5. Physician training and education costs
6. Patient demographics and needs
7. Competition from other health care providers
8. Ethical and moral considerations

Key elements of physician compensation

1. Physician training and education costs: These costs are incurred during the years of medical school and residency training
2. Economic conditions: These include factors such as inflation, employment rates, and economic growth
3. Supply and demand of physician services: This includes both the number of physicians and the number of patients requiring services
4. Technological advancements: These can affect the demand for certain types of medical services
5. Public policy decisions: These can include regulations on compensation and the support of health care systems
6. Patient demographics: This includes the age, gender, and health status of patients
7. Competition from other health care providers: This includes other medical professionals and non-medical providers
8. Ethical considerations: These include the principles of equity, fairness, and sustainability

Consequences
Physician compensation is an important factor in attracting and retaining qualified medical professionals. Adequate compensation is necessary to cover the costs of training and education, as well as to provide a reasonable return on investment for the health care system. Inadequate compensation can lead to shortages of physicians, which can have negative consequences for patient care and public health.
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
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

Background

Guiding principles for physicians recommending mobile health applications to patients

The document is designed to provide guidance to physicians about how to properly use mobile health applications in the management of patient health, health care, and health information.

These guidelines are based on the Canadian Medical Association (CMA) Privacy Guidelines for the Electronic Collection and Use of Personal Health Information.

Guidelines

1. Physicians should ensure that patients are adequately informed about the purposes for which their personal health information will be used.
2. Physicians should ensure that patients are aware of the rights they have to access and correct their personal health information.
3. Physicians should use mobile health applications that are secure and comply with all relevant laws and regulations.
4. Physicians should obtain patient consent before using mobile health applications for diagnostic or treatment purposes.
5. Physicians should ensure that mobile health applications do not compromise patient confidentiality or privacy.
6. Physicians should be aware of the potential risks and limitations of mobile health applications.
7. Physicians should be familiar with the ethical considerations associated with the use of mobile health applications.

Endnotes

a. Canadian Health Privacy Act.
b. Mobile health applications are defined as software programs that run on mobile devices and are designed to collect, store, or transmit personal health information.

d. Patient consent is defined as voluntary authorization by a patient to have personal health information collected, stored, or transmitted.

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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
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

Documents

CMA Submission
Federal Tax Proposal Risks Negative Consequences for Health Care Delivery

Submission to the House of Commons Standing Committee on Finance

Bill C-20, Budget Implementation Act, 2016, No. 2

November 18, 2016
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
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

THIRD-PARTY FORMS
(Update 2017)

RATIONALE

In Canada's managed health care system, third-party forms are vital for ensuring the efficiency and accountability of medical practice. These forms provide a standardized method for documenting health care services, facilitating reimbursement processes, and ensuring that patients receive the necessary care in a timely manner. The Canadian Medical Association (CMA) has developed a policy addressing the use of third-party forms, which are essential for ensuring that medical practitioners are compensated fairly for their services. This policy is intended to provide guidance for medical practitioners on the use of third-party forms and to ensure that the interests of patients are protected.

SCOPE OF POLICY

The CMA's position is that physicians should use third-party forms to ensure that patients receive the necessary care and that medical practitioners are compensated fairly. The policy outlines best practices for the use of third-party forms, including guidelines for the completion of such forms and recommendations for ensuring that patients are not unduly burdened by the administrative requirements of third-party forms.

GENERAL PRINCIPLES


1. The physician should be provided with the necessary information about the patient's condition in a clear and concise manner.
2. The physician should be compensated fairly for the services provided.
3. The patient should be informed of any costs associated with the treatment.
4. The physician should be able to complete the third-party form accurately and effectively.

The CMA Policybase - Canadian Medical Association
p. 16
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
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

CMA submission:

MAINTAINING ONTARIO’S LEADERSHIP ON PROHIBITING THE USE OF SICK NOTES FOR SHORT MEDICAL LEAVES

Submission to the Standing Committee on Finance and Economic Affairs
November 15, 2018
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
Response to “Consultation Document – Disability Tax Credit Public Consultations” CMA Submission to Canada Revenue Agency
https://policybase.cma.ca/link/policy14025

POLICY TYPE  Parliamentary submission
DATE  2014-12-19
TOPICS  Health systems, system funding and performance
Physician practice, compensation, forms

Documents