Auditing Physician Billings

Purpose:
The CMA has developed an audit computer program to evaluate the accuracy of physician billings
with Medicare. The program is designed to provide an objective method of ensuring that
billing is consistent with Medicare guidelines. It avoids the potential for subjective
interpretation of billing practices.

Recommendations:
1. To promote physician accuracy through
   - Regular audits of physician billing
   - Establishment of billing procedures
   - Identification of potential errors
   - Implementation of corrective actions

2. To reduce potential conflicts of interest
   - Avoiding personal financial gain through
     billing
   - Maintaining integrity in billing practices

3. To ensure compliance with Medicare guidelines
   - Regular audits of physician billing
   - Establishment of billing procedures
   - Identification of potential errors
   - Implementation of corrective actions

4. To promote physician accuracy through
   - Regular audits of physician billing
   - Establishment of billing procedures
   - Identification of potential errors
   - Implementation of corrective actions

5. To ensure compliance with Medicare guidelines
   - Regular audits of physician billing
   - Establishment of billing procedures
   - Identification of potential errors
   - Implementation of corrective actions
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
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
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
CMA’s Response to CRA’s Questions, Public consultation on the Disability Tax Credit Promoters Restrictions Act regulations
https://policybase.cma.ca/link/policy14027

POLICY TYPE
Parliamentary submission

DATE
2015-05-15

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

Documents

[Image of document page]

CMA Policybase - Canadian Medical Association
## CMA's Submission to Finance Canada regarding proposed amendments to the Income Tax Act

https://policybase.cma.ca/link/policy10353

<table>
<thead>
<tr>
<th>POLICY TYPE</th>
<th>Parliamentary submission</th>
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<tbody>
<tr>
<td>DATE</td>
<td>2012-02-14</td>
</tr>
<tr>
<td>TOPICS</td>
<td>Physician practice, compensation, forms</td>
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### 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

Documents
Disclosure of COVID-19 Vaccination Status by Physicians

https://policybase.cma.ca/link/policy14457

Policy document

2021-10-22

Physician practice, compensation, forms

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 key cases, recommendations:

1. The health care system is structured to prioritize the health and well-being of patients. This prioritization extends to the provision of care to ensure safe, effective, and equitable health outcomes for all patients. Therefore, recommendations should be made to ensure that patients can make informed decisions about their care, which includes disclosing information about the health status of their health care providers.

2. Confidentiality and patient consent are critical to maintaining trust and patient safety. Health care providers should inform patients about their vaccination status in a manner that respects patient confidentiality and consent. This includes providing clear and transparent information about the risks, benefits, and potential side effects associated with vaccination.

3. Disclosure of vaccination status should be voluntary and based on informed consent. Patients should be informed about the vaccination status of their health care provider and be given the option to request information about the health status of their care team.

4. Health care providers should be encouraged to disclose their vaccination status to patients, either in an initial consultation or during subsequent visits, to build trust and confidence in the care they provide. This information can be provided in written or verbal form.

5. Health care providers should be supported in obtaining information about their vaccination status, such as through access to public health databases or other reliable sources. This information should be updated regularly to ensure that patients have access to the most current and accurate data.

6. Health care providers should be trained in the ethical and legal considerations related to disclosure of vaccination status, including the importance of maintaining patient confidentiality and the potential implications for patient care.

7. Health care providers should be encouraged to consider the potential impact of vaccination status on patient care and the importance of sharing this information with patients in a manner that is respectful and non-stigmatizing.

8. Health care providers should be supported in addressing the potential challenges and barriers to disclosing vaccination status, such as concerns about patient confidentiality or potential backlash from other health care providers or the public.

9. Health care providers should be encouraged to engage in ongoing learning and professional development to stay informed about best practices and guidelines related to disclosure of vaccination status.

10. Health care providers should be supported in addressing the potential challenges and barriers to disclosing vaccination status, such as concerns about patient confidentiality or potential backlash from other health care providers or the public.

11. Health care providers should be encouraged to consider the potential impact of vaccination status on patient care and the importance of sharing this information with patients in a manner that is respectful and non-stigmatizing.

12. Health care providers should be supported in addressing the potential challenges and barriers to disclosing vaccination status, such as concerns about patient confidentiality or potential backlash from other health care providers or the public.

13. Health care providers should be encouraged to engage in ongoing learning and professional development to stay informed about best practices and guidelines related to disclosure of vaccination status.

14. Health care providers should be supported in addressing the potential challenges and barriers to disclosing vaccination status, such as concerns about patient confidentiality or potential backlash from other health care providers or the public.

15. Health care providers should be encouraged to consider the potential impact of vaccination status on patient care and the importance of sharing this information with patients in a manner that is respectful and non-stigmatizing.

16. Health care providers should be supported in addressing the potential challenges and barriers to disclosing vaccination status, such as concerns about patient confidentiality or potential backlash from other health care providers or the public.

17. Health care providers should be encouraged to engage in ongoing learning and professional development to stay informed about best practices and guidelines related to disclosure of vaccination status.

18. Health care providers should be supported in addressing the potential challenges and barriers to disclosing vaccination status, such as concerns about patient confidentiality or potential backlash from other health care providers or the public.

19. Health care providers should be encouraged to consider the potential impact of vaccination status on patient care and the importance of sharing this information with patients in a manner that is respectful and non-stigmatizing.

20. Health care providers should be supported in addressing the potential challenges and barriers to disclosing vaccination status, such as concerns about patient confidentiality or potential backlash from other health care providers or the public.

21. Health care providers should be encouraged to engage in ongoing learning and professional development to stay informed about best practices and guidelines related to disclosure of vaccination status.

22. Health care providers should be supported in addressing the potential challenges and barriers to disclosing vaccination status, such as concerns about patient confidentiality or potential backlash from other health care providers or the public.

23. Health care providers should be encouraged to consider the potential impact of vaccination status on patient care and the importance of sharing this information with patients in a manner that is respectful and non-stigmatizing.

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27. Health care providers should be encouraged to consider the potential impact of vaccination status on patient care and the importance of sharing this information with patients in a manner that is respectful and non-stigmatizing.

28. Health care providers should be supported in addressing the potential challenges and barriers to disclosing vaccination status, such as concerns about patient confidentiality or potential backlash from other health care providers or the public.

29. Health care providers should be encouraged to engage in ongoing learning and professional development to stay informed about best practices and guidelines related to disclosure of vaccination status.
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

Documents

[Image of policy document]

June 3, 2020

[Author names and affiliations]

For further information:

Hours: 9:00 a.m. – 5:00 p.m.
Monday to Friday

709-401-2000

CMA@policybase.ca

[Policy document content]

1. [Paragraph 1]

2. [Paragraph 2]

3. [Paragraph 3]

CMA Policybase - Canadian Medical Association
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
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
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**
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
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
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
Response of the Canadian Medical Association to the Canada Revenue Agency Draft GST/HST Policy Statement* (GST/HST Notices – Notice 286)
https://policybase.cma.ca/link/policy11479

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

Documents