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

CMA POLICY

Auditing Physician Billings

Purpose:
The CMA has determined that many problems can be identified and resolved by an examination of patient care practices through the process of auditing physician billings. This process can be performed by an independent consultant or a qualified accounting firm. Electronic data collection and computerized accounting systems allow for more detailed examination of physician billing practices.

Background:
Auditing physician billings through patient care panels or managed care systems is often handled through a billing system, which may require initial review of all physician claims. The system should allow for an accurate and efficient method of checking claims against accepted procedures or expected charges. The procedure is designed to verify the accuracy and completeness of the claims submitted.

In addition, the process may require the review of the physician's practice to ensure that billing practices are consistent with the guidelines of the managed care system.

Recommendations:
The audit of physician billings may involve the examination of all claims, including those for services rendered in the office setting. This process should be completed by a qualified third party, such as an independent consultant or a qualified accounting firm. The consultant or firm should have expertise in the area of physician billing and be familiar with the managed care system.

Billing practices should be reviewed and analyzed to ensure that they are consistent with the guidelines of the managed care system. Billing practices that are inconsistent with the guidelines may result in overcharges or undercharges for services rendered.

The results of the audit should be shared with the physician to allow for correction of any billing errors or omissions. The physician should be provided with a detailed report of the audit findings, including a list of any discrepancies and the recommended actions to be taken.

The audit process should be an ongoing one, with regular reviews of billing practices to ensure compliance with the guidelines of the managed care system. This will help to ensure that the physician's billing practices are consistent with the guidelines and that any billing errors or omissions are corrected.

Conclusion:
The audit of physician billings is an important process for ensuring the accuracy and completeness of claims submitted to the managed care system. This process helps to identify and correct any billing errors or omissions, ensuring that the physician's billing practices are consistent with the guidelines of the managed care system.

CMA Policybase - Canadian Medical Association
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**
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

CMA Pre-budget Submission

Addendum to the Canadian Medical Association Pre-budget Submission

December 2020

The Canadian Medical Association (CMA) pleased to submit the following addendum to the Pre-budget Submission (PBM) on physician compensation, health information and e-health, health care and patient safety, and health systems, system funding and performance.

RECOMMENDATION 1
Full-time physicians should not have payments based on fee-for-service, which rewards physicians for providing more services, rather than focusing on quality and patient outcomes. It is essential that physicians have the freedom to choose the type of care they wish to provide to their patients.

RECOMMENDATION 2
It is important to recognize and support the continued education of health care professionals, including physicians, nurses, and other health care providers. Continuous professional development is vital to maintaining high-quality care.

RECOMMENDATION 3
It is crucial to consider the implementation of strategies to improve physician retention, such as offering incentives for physicians to work in underserved areas or providing support for rural medical education.

RECOMMENDATION 4
The government should continue to support medical research and innovation, which is essential for improving health outcomes and addressing emerging health challenges.

RECOMMENDATION 5
It is necessary to address the growing concerns about the electronic medical record (EMR) system, which has resulted in increased administrative burden and decreased patient care.

CMA Pre-budget Submission
CMA's Response to CRA's Questions, Public consultation on the Disability Tax Credit Promoters Restrictions Act regulations
https://policybase.cma.ca/link/policy4027

POLICY TYPE
Parliamentary submission

DATE
2015-05-15

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

Documents
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

Documents
COVID-19 Vaccine Global Intellectual Property Policy

Documents

1. The COVID-19 pandemic requires a global strategy to ensure equitable access to vaccines, therapeutics, and diagnostics. The Canadian Medical Association (CMA) encourages governments to prioritize the health and well-being of Canadians and worldwide populations.

2. The CMA recommends that governments support a transparent, multilateral approach to achieving global vaccine access. This approach should include a mechanism to ensure that intellectual property rights do not hinder equitable access.

3. The CMA advocates for the establishment of a global mechanism to facilitate vaccine sharing and promote equitable access to COVID-19 vaccines.

4. The CMA supports the implementation of measures to streamline the approval process for vaccines and therapeutics, ensuring timely access to effective treatments.

5. The CMA encourages the development and implementation of policies that safeguard public health and uphold the principles of justice and equity.

6. The CMA recommends that governments collaborate with international organizations, such as the World Health Organization (WHO) and the World Trade Organization (WTO), to address intellectual property challenges.

7. The CMA supports the inclusion of provisions in international trade agreements that promote public health and prioritize the needs of developing countries.

8. The CMA encourages the use of intellectual property flexibilities under international trade agreements to facilitate access to COVID-19 vaccines and therapeutics.

9. The CMA supports the development of public health policies that balance intellectual property protection with the needs of public health and global access to vital health technologies.
Disclosure of COVID-19 Vaccination Status by Physicians

In the context of recommendations:

1. The Canadian Medical Association (CMA) recognizes that physicians are free to choose how they disclose their vaccination status. However, to ensure the confidentiality of their patients, physicians may choose to disclose this information to ensure patients' health and safety.

2. Physicians are encouraged to communicate their vaccination status in a clear and straightforward manner, prioritizing the health and safety of their patients.

3. Physicians should consider the context in which disclosure is made, ensuring that it is appropriate and does not cause undue concern or discrimination.

4. Disclosure should be guided by prevailing public health recommendations, ensuring that patients' privacy and confidentiality are maintained.

5. Physicians should remain vigilant in monitoring public health advisories and adjustments, adapting their disclosure practices as necessary.

6. Physicians may choose to disclose their vaccination status to patients, colleagues, or other health care providers, ensuring transparency and trust in the medical community.

7. Physicians should be aware of the legal and ethical considerations surrounding disclosure, ensuring compliance with relevant regulations and guidelines.

8. Disclosure should be made in a manner that respects patient autonomy, ensuring that patients are informed and consent to any additional disclosure by the physician.

9. Physicians should remain committed to providing high-quality patient care, prioritizing the well-being of their patients and the overall health of the community.

10. Physicians are encouraged to participate in ongoing professional development and research, staying informed about the latest recommendations and guidelines related to COVID-19 vaccination.

For more information, please visit the Canadian Medical Association's website at https://policybase.cma.ca/link/policy14457.
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
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

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 13, 2018
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
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

CMA POLICY

THE PHYSICIAN APPOINTMENT AND
REAPPOINTMENT PROCESS 2016

Introduction

Physician appointment and reappointment is a complex process. Physicians, hospitals, and groups are all involved in the process. The process is governed by laws, regulations, and policies. The process is often time-consuming and stressful for all parties involved. The process can be improved by clear communication, clear expectations, and fair and transparent decision-making.

The CMA Policy on Physician Appointment and Reappointment provides guidance for all parties involved in the process. The policy outlines the roles and responsibilities of each party, including the physician, the hospital, and the group.

The policy also provides guidance on the following:

- The process for appointment and reappointment
- The roles and responsibilities of each party involved in the process
- The criteria for appointment and reappointment
- The process for addressing disputes during the appointment and reappointment process

The CMA Policy on Physician Appointment and Reappointment is available for download on the CMA Policybase website.
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

**POLICY TYPE**  Parliamentary submission

**DATE**  2015-02-23

**TOPICS**  Physician practice, compensation, forms

**Documents**