

# Joint statement on preventing and resolving ethical conflicts involving health care providers and persons receiving care

<https://policybase.cma.ca/link/policy202>

POLICY TYPE	Policy document
LAST REVIEWED	2019-03-03
DATE	1998-12-05
TOPICS	Ethics and medical professionalism

## Documents

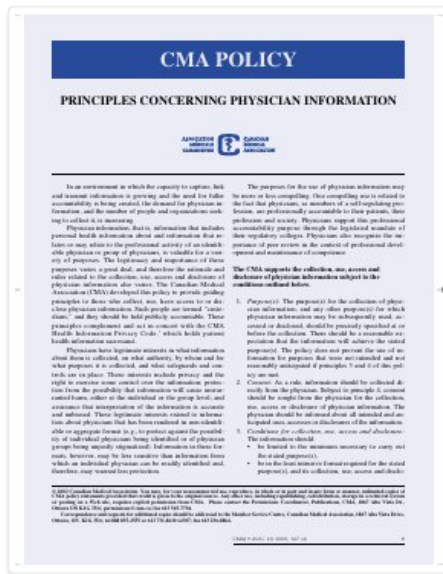


# Principles concerning physician information

<https://policybase.cma.ca/link/policy208>

POLICY TYPE	Policy document
LAST REVIEWED	2019-03-03
DATE	2002-06-02
TOPICS	Health information and e-health Ethics and medical professionalism

## Documents



# The future of medicine

<https://policybase.cma.ca/link/policy209>

POLICY TYPE	Policy document
LAST REVIEWED	2017-03-04
DATE	2000-08-12
TOPICS	Health systems, system funding and performance Ethics and medical professionalism

## 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

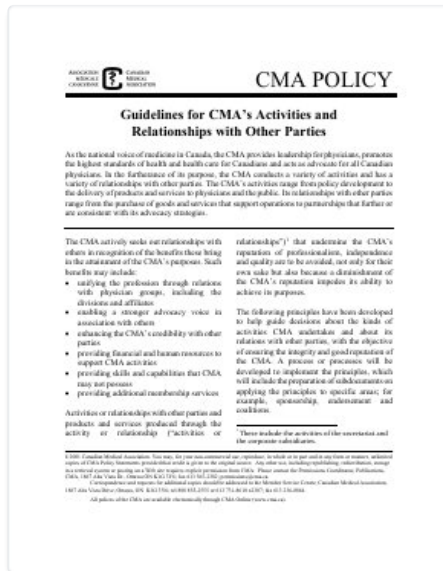


# Guidelines for CMA's activities and relationships with other parties

<https://policybase.cma.ca/link/policy234>

POLICY TYPE	Policy document
LAST REVIEWED	2018-03-03
DATE	2001-05-28
TOPICS	Ethics and medical professionalism

## 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

## Documents

ASSOCIATION OF CANADIAN COLLEGIATE PHYSICIANS

**CMA POLICY**

### Auditing Physician Billings

**Purpose:**  
The CMA has developed a set of guiding principles to assist in the formation and modification of provincial/territorial billing audit processes. These principles will ensure that billing audit systems are fair, transparent, effective and timely, and that they uphold their original objective of ensuring the accountability of public expenditures and educating physicians on appropriate billing practices.

**Background:**  
As payments to physicians are made through public monies, the integrity of the payment system is validated through physician billing audits and reviews. Audits and reviews are usually perceived by billings that appear to be outside of the "norm," patient complaints, physician complaints or a "focus" on a particular jurisdiction of practice group of physicians. Each province/territory is responsible for and has in place particular processes and procedures to review physician billing.

Billing audits can be successful events that, regardless of the audit outcomes, have had adverse effects on a physician's health and practice. Although changes over the years in billing audit practices have occurred, they have not addressed all of the physicians' concerns. Inadequacies in the existing procedures, such as the lack of a clear decision-making process, established review timelines and options for recourse still remain.

In response to this situation, many province/territories are reviewing and modifying their existing billing audit process. The CMA and Canada's physicians believe in an open, accountable and transparent health care financing system. It is for this reason that the CMA has developed this set of principles related to the key components of the audit process to ensure it is fair, efficient, effective and serves the purpose it was originally intended – to ensure the accountability of public funds and to educate physicians on proper billing practices.

**Principles:**  
**Educational on proper billing practices:**  
The audit and review process must be undertaken in an educational manner. In a fee based system, billing codes and interpretations are complex and can often lead to unintentional errors. For when inconsistency occur, the physician must be

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A complete and current list of all CMA policies and procedures is available on the CMA website at [www.cma.ca](http://www.cma.ca).  
All policies of the CMA are available electronically through [www.cma.ca/policybase](http://www.cma.ca/policybase).

# Medical professionalism (Update 2005)

<https://policybase.cma.ca/link/policy1936>

POLICY TYPE	Policy document
LAST REVIEWED	2018-03-03
DATE	2005-12-03
REPLACES	Medical professionalism (2002)
TOPICS	Ethics and medical professionalism

## Documents



# Putting Patients First : Comments on Bill C 6 (Personal Information Protection and Electronic Documents Act) : Submission to the Senate Standing Committee on Social Affairs, Science and Technology

<https://policybase.cma.ca/link/policy1979>

POLICY TYPE	Parliamentary submission
LAST REVIEWED	2019-03-03
DATE	1999-11-25
TOPICS	Ethics and medical professionalism Health care and patient safety Health information and e-health

## Documents

**"Putting Patients First"**

**Comments on Bill C-6**  
*(Personal Information Protection and Electronic Documents Act)*

**Submission to the Senate Standing Committee  
on Social Affairs, Science and Technology**

Nov. 25 1999  
Ottawa, Ontario

For further information, contact  
CMA's Public Affairs Directorate: 1 800 287-8700

Leadership for Physicians - Modèle for Canadians  
Leadership pour des médecins - Modèle pour les Canadiens

**"Putting Patients First"**

**Comments on Bill C-6**  
*(Personal Information Protection and Electronic Documents Act)*

**Submission to the Senate Standing Committee on Social Affairs, Science and  
Technology**

Nov. 25 1999

**Executive Summary**

CMA commends the federal government for taking this important first step that begins the debate on privacy and the protection of personal information. The issues are complex and the stakes are high. CMA welcomes the opportunity to provide comments on Bill C-6 and hopes that its input will strengthen the Bill by ensuring that patient privacy and the confidentiality of medical records are adequately protected.

CMA's chief concern with Bill C-6 is the inadequacy of its provisions to protect the right of privacy of patients and the confidentiality of their health information. The right of privacy encompasses both the right to keep information about oneself to oneself if so wished and to exercise control over what subsequently happens to information so critical to trust for the purposes of receiving health care. In recent years, this right and the ability of physicians to guarantee meaningful confidentiality, have become increasingly threatened.

Computerization of health information facilitates easy transfer, duplication, linkage and consolidation of health information. Copied in electronic form, patient information is potentially more useful for the purposes of providing care. However, this captured, it also becomes much more valuable and technically accessible to various third parties - private and public, governmental and commercial - wishing to use the information for other purposes unrelated to providing direct care. An additional concern is that the demand for health information, referred to by some commentators as "data lust", is growing, partly as a consequence of "information hungry" policy trends such as population health. There is also a disturbing tendency toward "function creep", whereby information collected for one purpose is used for another, often without consent or even knowledge of the individual concerned and without public knowledge or scrutiny.

Furthermore, litigation concerning health information technology tends to be dominated by those who seek access to this information for secondary purposes. From this perspective, privacy may appear less as a fundamental right than as a hindrance or even roadblock. As we move further into the information age there is some danger that we will become so spell-bound by the promise of information centralization and database linkages that we lose sight

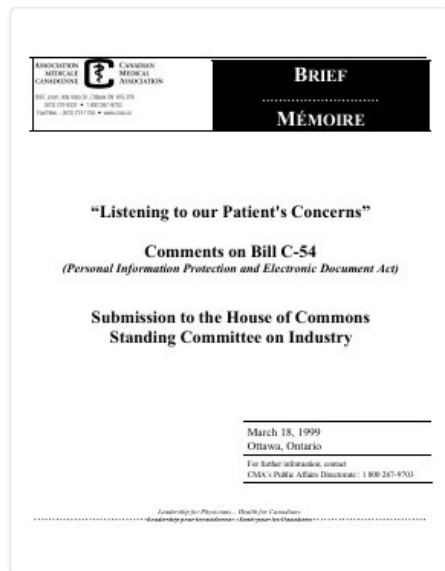


# Listening to our Patient's Concerns : Comments on Bill C 54 (Personal Information Protection and Electronic Document Act) : Submission to the House of Commons Standing Committee on Industry

<https://policybase.cma.ca/link/policy1980>

POLICY TYPE	Parliamentary submission
LAST REVIEWED	2019-03-03
DATE	1999-03-18
TOPICS	Health care and patient safety Health information and e-health Ethics and medical professionalism

## Documents



# Caring in a Crisis: The Ethical Obligations of Physicians and Society During a Pandemic

<https://policybase.cma.ca/link/policy9109>

POLICY TYPE	Policy document
LAST REVIEWED	2019-03-03
DATE	2008-02-23
TOPICS	Ethics and medical professionalism Population health, health equity, public health

## Documents



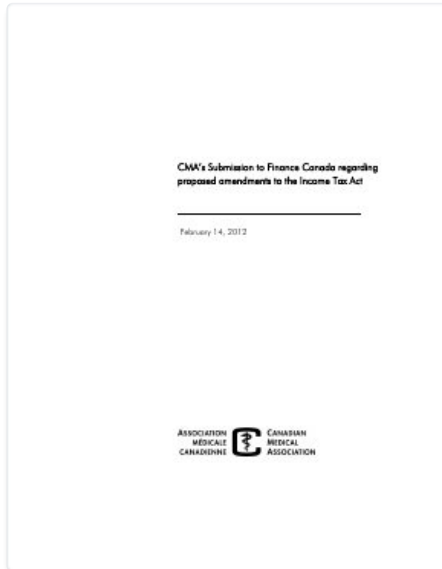
# CMA's Submission to Finance Canada regarding proposed amendments to the Income Tax Act

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

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

## Documents

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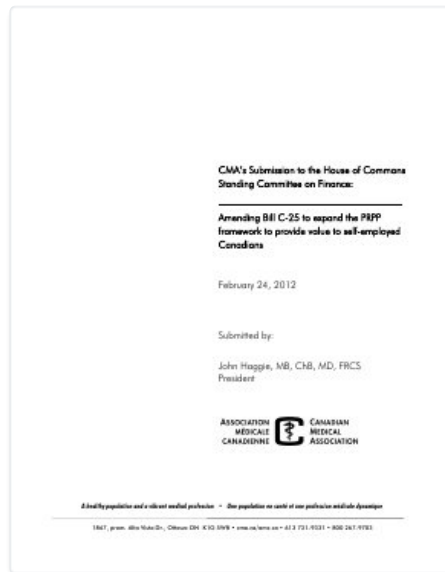
# CMA's Submission to the House of Commons Standing Committee on Finance: Amending Bill C-25 to expand the PRPP framework to provide value to self-employed Canadians

<https://policybase.cma.ca/link/policy10355>

POLICY TYPE Parliamentary submission  
DATE 2012-02-24  
TOPICS Physician practice, compensation, forms

## Documents

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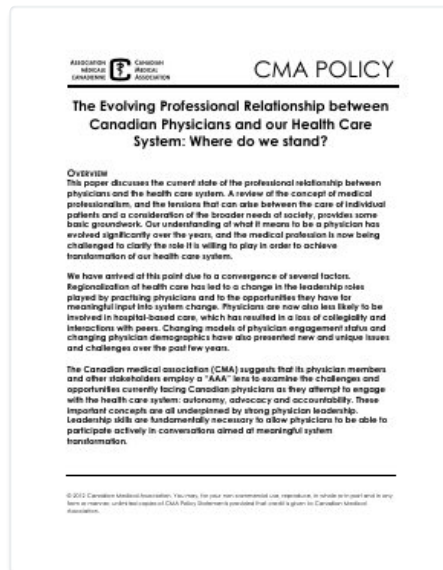
# The evolving professional relationship between Canadian physicians and our health care system: Where do we stand?

<https://policybase.cma.ca/link/policy10389>

POLICY TYPE	Policy document
LAST REVIEWED	2019-03-03
DATE	2012-05-26
TOPICS	Ethics and medical professionalism

## Documents

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# Corporate privacy policy respecting the collection, use and disclosure of personal information (Update 2012)

<https://policybase.cma.ca/link/policy10633>

POLICY TYPE	Policy document
LAST REVIEWED	2017-03-04
DATE	2012-10-20
REPLACES	Corporate Privacy Policy Respecting the Collection, Use and Disclosure of Personal Information (Update 2007)
TOPICS	Ethics and medical professionalism

## Documents



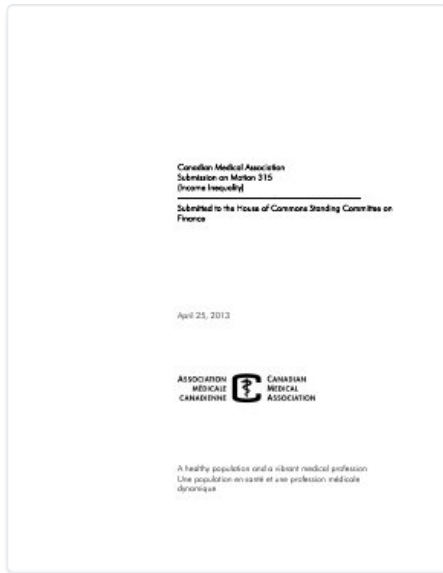
# Canadian Medical Association Submission on Motion 315 (Income Inequality)

<https://policybase.cma.ca/link/policy10715>

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

## Documents

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# 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

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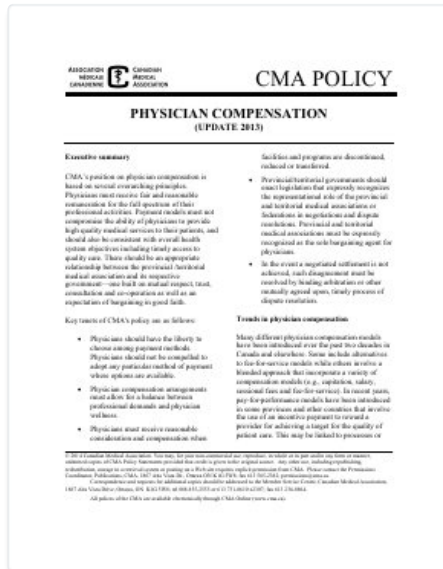


# Physician compensation (Update 2013)

<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



# Amendments to PIPEDA, Bill S-4

<https://policybase.cma.ca/link/policy11194>

POLICY TYPE	Parliamentary submission
DATE	2014-06-09
TOPICS	Health information and e-health Ethics and medical professionalism

## Documents

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# 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

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