

Terms of Reference

BILLING COMMITTEE

Department of Medicine
Dalhousie University/Capital District Health Authority

Purpose:

The Billing Committee is responsible for developing, documenting and communicating billing policies which ensure compliance with MSI requirements and for optimizing efficiency, accuracy and completeness of billing.

Membership:

- 3 physician representatives who shall typically each serve 3 year terms. (Initially, physician representatives will serve 3, 2, and 1 year terms). At least one physician member should have billing experience and/or private practice experience.
- Department of Medicine Chief Financial Officer
- Department of Medicine Administrator
- Department of Medicine Data Manager
- Department of Medicine Physician Services Supervisor

Chair:

A physician member who shall be appointed initially for a three-year term. Thereafter, the longest serving physician member on the committee will act as Chair for a one-year term before rotating off the committee.

Voting/Quorum:

At least one physician shall attend each meeting of the committee.
Admin staff are non voting members of the committee.

Frequency of Meetings:

The committee as a whole will meet bi-monthly (minimum of 6 meetings per year). Administrative staff committee members will meet more frequently to ensure committee work progresses.

Attendance:

Representatives are to attend at least 50% of the meetings.

Reports to:

This Committee reports directly to the Department of Medicine Executive/Divisional Chiefs Committee, and will be expected to provide an update report to the Executive Committee at least once annually.

Specific Responsibilities of the Billing Committee include:

1. Ensure billing accuracy and completeness;
2. Maximize billing potential for Department of Medicine physicians;
3. Automate billing processes where possible while also improving data capture;
4. Ensure effective communication to physician members and administrative staff regarding billing policies and best practices;
5. Develop policies aimed at maximizing physician compliance with billing practices. This includes creating dis-incentives for non-compliance at divisional and individual levels.

Approved by DoM Executive/Divisional Chiefs Committee: *February 03, 2010.*

Note: All Terms of Reference are to be filed with the DoM Administrative Office.
All revisions to be approved by the DoM Executive/Divisional Chiefs and/or Department Head (see Reports to section)