

# **GREATER FLINT HEALTH COALITION**

## **TERMS OF REFERENCE**

### **AD HOC COMMITTEE ON PROMPT PAYMENT FOR PHYSICIANS & HOSPITALS (2008)**

#### **MISSION:**

Improve health status of residents of Genesee County. To improve the quality and cost effectiveness of the health care system in our community.

#### **VISION OF THE COALITION:**

A healthy Genesee County community practicing healthy lifestyles with access to the best and most effective health and medical care.

#### **CORE VALUES:**

Consensus  
Collaboration  
Fairness  
Integrity  
Continuous Improvement  
Innovation  
Public Participation

#### **VISION OF THE TASK FORCE:**

Timely payments for physicians and hospitals for services rendered.

#### **OUTCOME OPTIONS:**

- Collection of data on timeliness (or lack there of) of payments for physicians and hospitals.
- Describe the process for information gathering to resolve issues presented.
- Present options for problem resolution.
  - Current recommendation is for all payer organizations in Michigan to adopt a single set of rules for claim submission and processing, to ensure uniform interpretation across payers

#### **OUTCOME OPTION IMPACT ON 2007 – 2012 GOAL FRAMEWORK:**

Improved health status is promoted collectively through the focus areas of cost. Specifically:

- Cost is improved by reducing the administrative inefficiency associated with medical claim submission and processing. Streamlining the procedures for claim submission

and processing across payers will reduce the number of claims rejected due to incorrect billing procedures. Resources saved by reduced inefficiency can be reallocated to other areas.

**MEASURABLE HEALTH OUTCOMES:**

- Adoption of single, standardized list of rules for billing and processing medical claims by all payer organizations in Michigan.

**AD HOC GROUP MEMBERSHIP:**

The ad hoc group will be no larger than 20 individuals. All individuals will either be appointed by their organizations' chief executive officer/director or the president of the Coalition. The individuals should be senior enough to be able to influence and represent their organization's policies on the subject matter.

**Commitments:** The ad hoc group will meet as needed for one and a half hours at the Coalition offices with a time to be determined by members.

The membership will be categorized by the Coalition "sectors":

Providers (9)	Genesys Health System Genesee County Medical Society Hurley Medical Center McLaren Regional Medical Center Physician Representative Group Manager (2) Billing Specialist Michigan Medical Billers Association
Insurers (7)*	Blue Cross Blue Shield of Michigan Blue Care Network Cofinity HealthPlus of Michigan Medicare Medicaid Michigan Association of Health Plans <i>*As insurance companies make penetration into the Genesee County market, additional insurer organizations will be added</i>
Consumer	UAW

Chair Executive Director, Genesee County Medical Society

Ex-officio members: President, Greater Flint Health Coalition  
Chair, Cost & Resource Planning Committee

**REPORTING:**

The ad hoc group will report to the Cost & Resource Planning Committee.

**STAFFING:**

The staffing of the ad hoc group will be handled by Coalition staff.

On October 18, 1999 the board approved the REACH Task Force Terms of Reference. In doing so, the board recommended the vision and outcome option of REACH (Racial and Ethnic Approaches to Community Health) become part of the operational terms of reference of every committee/task force of the Coalition.

THE REACH TASK FORCE

Vision:

To keep before the Coalition the issue of ethnic & racial disparities in health care.

Outcome Options:

- To assist a broad base of community leaders in health care in understanding the multifaceted challenges of race relations and its impact on individual community member's health.
- To keep front and center the issue of ethnic and racial disparities in the work of the Coalition.

Approved by the Prompt Payment Task Force on July 15, 2008.

Approved by the Board of Directors on November 17, 2008.