Maine Medical Center Successful in Transforming Billing Practices: Pilot Study Reveals Key Improvement Areas

Overview

Ben Harrington, MS, CMD, a medical dosimetrist at Maine Medical Center in Portland, Maine, led the recent initiative to improve billing practices for the radiation oncology department. The center supports four EBRT treatment sites equipped with five linacs and treats approximately 150 patients per day. The team offers a broad array of modalities, including SRS, SBRT, superficial radiotherapy, and HDR brachytherapy.

While the treatment options are robust, the department has lacked a radiation oncology billing specialist, placing the burden of charge capture review on senior therapists. This longstanding process was inherently limited by the absence of formal training and a lack of effective feedback from Revenue Integrity on their day-to-day practices.

The Challenge

Over time, discrepancies were flagged by various team members. These included issues such as the timing of special physics charges, coding conflicts, and inconsistencies in image approval.

A key contributor to the issues was the lack of a feedback loop between Revenue Integrity and the Radiation Oncology team. Charges rejected on the backend were not communicated in a way that allowed the department to learn and adjust practices.

"Our billing review process was historically handled by senior therapists without formal training in radiation oncology billing. They would have gladly handed this responsibility to a billing specialist. What Radformation's QuickCode did was allow us to shine a bright light on the inefficiencies in our process, which we knew existed all along," **says Harrington.**

Harrington set clear objectives for the department that included:

✓ Ensure accurate billing practices to maintain fairness for patients, payers, and the department

✓ Identify and reduce errors

✓ Minimize staff workload through automation and more effective process

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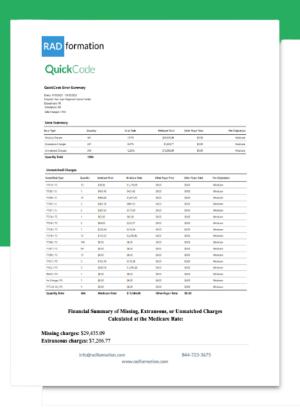
The Solution

With prior familiarity of Radformation's product suite, the department turned to QuickCode. QuickCode verifies billing code accuracy by analyzing treatment and plan data against pre-configured templates aligned with published guidelines.

Compatible with both ARIA® and MOSAIQ,® QuickCode syncs with the department's Oncology Information System (OIS) to flag discrepancies before billing data is exported.

To explore QuickCode's capabilities, Maine Medical Center participated in a Pilot Study. This involved an extensive 244-day retrospective review of billing data, comparing it to national guidelines and best practices. The resulting ROI report identified compliance gaps, missed charges, and overbillings, offering actionable insights for improvement.

*The **QuickCode** Pilot Study is a comprehensive assessment offered to departments interested in improving their billing practices. By analyzing at least 90 days of billing data and comparing it against published guidelines and industry best practices, the study generates a detailed ROI report, highlighting compliance gaps, identifies missed revenue opportunities, and provides actionable insights to optimize billing processes.*

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Maine Health's Pilot Study Insights

The Pilot Study analysis revealed over $550k in missed charges and more than $100k in extraneous. Extrapolated to an annual figure, the estimated missed revenue would be approximately $850k if similar billing trends persisted year-round.

Of particular concern were stereotactic treatment billing patterns, which were not only inaccurate but often timed incorrectly. Diagnosis codes frequently went un-updated when patients underwent multiple courses of treatment. Additionally, incorrect application of planning charges for special procedures involving inverse planning had led to revenue capture issues, to the tune of approximately $1,000 per patient.

Notably, some of these issues were compounded by practices within Revenue Integrity, which had quietly rejected charges without informing the clinical team. This meant the department was unaware of rejected charge patterns and unable to correct them.

90+ days of all billing data, QuickCode Uncovered...

$550K in missed charges

$100k in extraneous charges

"The Pilot Study made a strong argument for adopting QuickCode. The numbers were compelling, with $254K in missed annual revenue from special procedures (SRS/SRT/SBRT) alone. In addition to raw figures, we also gained valuable insights into recurring patterns that helped us address the underlying issues," **says Harrington.**

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Clinical Adoption and Future Plans

Following the Pilot Study, Quickcode was implemented on the main campus and subsequently rolled out to satellite locations. Dosimetrists now run QuickCode during the plan printout phase, applying relevant templates and validating plan and simulation charges. This proactive approach ensures that billing errors are corrected in real time, avoiding the need for time-consuming retroactive fixes.

The department plans to expand QuickCode's use beyond dosimetry to nursing and other operational roles, enhancing billing transparency and ensuring continued compliance.

Since adopting QuickCode, Maine Medical Center has:

✓ **Significantly reduced billing errors**

✓ **Captured previously unrealized revenue**

✓ **Improved administrative efficiency,** enabling the team to focus on higher-value clinical work

Conclusion

By embracing QuickCode, Maine Medical Center has taken a critical step toward addressing systemic billing issues. What began as a patchwork review process has evolved into a data-driven, automated workflow that improves compliance, reduces errors, and boosts revenue integrity. The transformation stands as a model for other departments navigating similar challenges in a complex billing landscape.

"With QuickCode, we were able to identify and correct recurring errors that we didn't even know were happening—from special procedure billing to correct usage of course diagnosis codes. Combined with targeted training and vendor feedback, the software has enabled us to drastically reduce mistakes."

-Ben Harrington, MS, CMD | Medical Dosimetrist