**Marjerie**

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Career Objectives: To work as an advancing medical coding professional in a challenging and intriguing working atmosphere with the utilization of adept coding expertise and proficiencies.

**EDUCATIONAL BACKGROUND**

2003-2007 CENTRO ESCOLAR UNIVERSITY

Bachelor of Science in Nursing

1993-2003 ST. THOMAS MONTESSORI LEARNING CENTER

Graduated Elementary and High School

**JOB EXPERIENCE**

**Company: ARMCO HEALTHCARE SERVICES, INC.**

**Position: Inpatient Medical Coder**

**Year: July2015-present**

Duties and Responsibilities:

Reviews and abstracts clinical data from patient’s electronic medical records regarding events concerning a patient’s surgical procedures and related professional charges. Codes and diagnoses all procedures using standardized classification systems (e.g. ICD 9/10), PCS, CPT, etc.) and actively researches and resolves all coding edits/denials in collaboration with the physician/surgeon. Functions as a coding and reimbursement resource on all coding questions to both the manager and physicians.

Proficient skills in the execution of inpatient hospital coding procedures in an exact way.

Inspiring abilities in the operation of VMS systems and Microsoft oriented software applications such as PowerPoint, Excel, and Word.

Possesses knowledge of utmost quality related to medical coding methods and guidelines, including DRGs, ICD-9/10, HCPCS, and CPT-4.

Coordinating with the information coding consulting services for the completion of clinical documentation plans related to DRG assurance.

Obtains acceptable productivity/quality rates as defined per coding policy.

Queries physicians when code assignments are not straightforward or documentation in the record is inadequate, ambiguous, or unclear for coding purposes.

Keeps abreast of and complies with coding guidelines and reimbursement reporting requirements.

Must at all times safeguard and protect the patient’s right to privacy by ensuring that only authorized individuals have access to the patient’s medical information and that all releases of information are in compliance with the request, authorization, company policy and HIPAA regulations.

**Company: E-DATA SERVICES PHILS. INC.**

**Position: Medical Transcriptionist/Editor**

**Year: October 2009-May 2014**

Duties and Responsibilities:

Accurately transcribe the patient-identifying information such as name and Medical Record or Social Security Number.

Transcribe accurately, utilizing correct punctuation, grammar and spelling, and edit for inconsistencies. Decide which information should be included or excluded in reports. Review medical records.

Process Workers' Compensation report including initial report, progress report, consultation report, permanent and stationary report, as well as QME/AME report.

Insert appropriate citations for the requested treatments using MTUS, ACOEM, ODG, and other related resources. Familiar in using ICD-9 as well as CPT code.

Distinguish between homonyms, and recognize inconsistencies and mistakes in medical terms, referring to dictionaries, drug references, and other sources on anatomy, physiology, and medicine. Identify mistakes in reports, and check with doctors to obtain the correct information.

Perform quality assurance check.

Return dictated reports in printed or electronic form for physicians' review, signature, and corrections, and for inclusion in patients' medical records in a timely fashion.

**Company: ITO-SEISAKUSHO PHILS., INC.**

**Position: Company Nurse /HR Assistant**

**Year: May 2008- May 2009**

Duties and Responsibilities:

Administer first aid treatments and provide medications for employees as needed. Assist all injured employees to the nearest hospital.

Monitor and record the patient's condition. Maintain all employees medical and other similar records

Secure and ensure that the sick employees submit "fit to work" certificate. Interpret and evaluate diagnostic test based on the verification of medical certificates.

Schedule (every first quarter of the year) and assist annual medical examination of all employees.

Process enrollment for Health Maintenance Organization (HMO)

Generate medical reimbursement report every month. Conduct inventory of medicines and other supplies twice a month.

**Company: CG WORLD SERVICES INC.**

**Position: Online Casino Dealer**

**Year: July 2007-December 2007**

Duties and Responsibilities:

Dealing cards

Play Baccarat according to the rules

Maintain no offense on the table

Shows honesty and respect to the co-workers especially to the players.

**TRAINING**

Inpatient Coder Development Program Training - IOD (July 2015)

Medical Coding Training – Teledevelopment Services, Inc. (January 2015-May 2015)

**LICENSURE/CERTIFICATION**

Passed ICD-10 Proficiency Assessment

AAPC Certified Professional Coder (CPC) - June 2015

Philippine Nursing Licensure Exam - Registered Nurse - June 2007

**SKILLS AND STRENGTHS**

Coding skills (ICD-9/10, PCS, CPT)

Knowledgeable in using the computer software including MSWord, Excel, Word Perfect, PowerPoint as well as EPIC, 3M, VMS, Webstrat, etc.

Basic nursing skills

Transcribing and reviewing medical records

Excellent typing skills (60 wpm)

Fast learner, flexible, have strong analytical skills, able to multi-task

Organized person, friendly, enthusiastic, well determined and hardworking

Love to learn new ideas that will be helpful to improve my skills, knowledge and personality

Self-motivated and independent person

Ability to work professionally, effectively, and efficiently in a team environment with customers, management and co-workers

Dedicated and focused to accomplish and complete multiple tasks efficiently and on time

**PERSONAL INFORMATION**

Date of Birth: November 2, 1986

Place of Birth: San Pablo, Laguna Civil Status: Married

Nationality: Filipino Religion: Roman Catholic