**Murali**

**Murali.360871@2freemail.com**

**Career Objective:**

Results-driven, energetic with 6 years & 10Months of experience in Outpatient & Inpatient Auditing, Coding& Authorization.Highly skilled in performing coder duties pertinent to HAAD standards and techniques.A team-player who is known for his ability to develop and maintain professional relationships with co-workers and seniors.

**Educational Qualification:**

Graduation - Bachelor ofPhysiotherapy (B.PT)

 M.SC (Fitness.Exercise.Rehabilitation& Nutrition)

Certification - Certified Professional Coder (CPC)

 Certified Coding Specialist (CCS)

ICD-10-CM Proficiency

**Professional Experience:**

Current Employer - Al Salama Hospital,

 Abu Dhabi, UAE

 Past Employer - Intelenet Global Service Pvt. Ltd

Omega Healthcare Management service Pvt Ltd.

 Medigain, Pvt Ltd.

**A few highlights include:**

•Demonstrated expertise in Inpatient&Outpatient Charts.

• I got excellent knowledge in ICD-9, ICD-10 and CPT.

• I learned and exposed to manage multiple Specialty facilities group practice.

• At first I started my career as medical coder for one year. Afterwards, because of my excellent dedicated work, I was given the chance of auditing internal reports.

• In that internal auditing, I was exposed to multiple practices, where I learned each and every small thing in different practices

• I was exposed to very tuff projects in all divisions of coding.

• I learned excellent coding management, interpersonal and business communication skills with the experience required to remain highly focused and exceptionally productive in fast-paced, high pressure settings.

**Experiencein AlSalama Hospital: From July 2015– At Present.**

• Coding Outpatient & Inpatient charts using proper E/M codes& ICD Codes using 3M & Encoder pro when I was joined. After 6 months I was promoted to do auditing for all Outpatient, Inpatient and Surgery practices& maintaining quality scores by effective management for my Facility.We have not failed in HAAD audit during my working tenure (2015-2016).

• Maintaining abreast of clinical coding standards, reporting, and information policies according to AHIMA Standards and further develop standards according to HAAD (Health Authority of Abu Dhabi) healthcare requirements.

• Extensive use of 3M encoder software to compute IR-DRG to code all Inpatient records& to code Outpatient Visits.

• Reviewing the rejected claims from the insurance & resubmitting the claims per guidelines.

• Codes assigned for inpatient and/or outpatient diagnoses and procedures using current ICD-9 & 10 CM and/or CPT-4 classifications.

• Performing in different specialties E&M, Radiology, Pathology, General Medicine, Anesthesia, Surgery - ENT, Ophthalmology, Cardiology, Urology, Gastroenterology services & Diagnostic testing etc.

• Provide coding and documentation advice to the Physicians, coding unit, clinical and professional staff to increase the Revenue to the Hospital

• Analyze Documents to improve coding data accuracy for reimbursement

• Ensure coded data accurately reflects service provided, based on documentation, guarding against fraud and abuse

• Started with ICD-10 now, will be an asset for your organization.

**Quality management, Resubmission & RCM**

1. Auditing all Outpatient, Inpatient and Surgery practices& maintaining quality scores by effective management.

2. Giving proper internal auditing feedbacks to each coder.

3. Accustomed to fast-paced projects where deadlines are a priority and handling client require auditing.

4. Mailing response to fast paced organization requirements.

5. Analyze the reason for rejected claims & resubmit the Claim with Appropriate codes, Justification & Documentation on Time to avoid Revenue loss

6. RCM – Will generate High revenue by advising the provider to change encounter from DRG to day case or day case to DRG – Based on the Medical Necessity & documentation.

**Medigain, PVT Chennai India (April 2013 to July 2015)**

* Joined as a Senior Medical Coder. It’s a new Coding company& Established Billing company, we started with 5 coders. It’s a multispecialty coding company (Physician office & Hospital practice).
* Started with ER& Office Visit Coding. Learned Pulmonary, ENT, Integumentary, Spinal arthrodesis & injection Procedures
* After 6 month duration, company started to grow& increased to 25 members. I was promoted to do auditing for Physician office, Injection procedure, Pulmonary, ENT, Spinal &Integumentary procedure.
* Handled Denial Management for all the specialties which I have worked on.
* After 2 year, promoted as Assistant lead. Job Responsibilities - To send report to Manager/Leads regarding batches, Quality, Attendance. Have to reply client mail in regards to coding Error, if there is delay in TAT batches. Orient Fresher’s & Experience coder related to the client specific coding guidelines.

**Omega Healthcare Management service Pvt Ltd (July 2011 – March 2013)**

* Worked as ER coder initially. Efficient & Accurate in my work. Will achieve target of 175 ER records per day. After one year of my work in the same process. I was given auditing for freshers. Worked for SG Group of client, biggest network in ER department in US.
* Later I was moved to Inpatient Physician coding project – learned E/M related to IP & Observation & Consultation code (Reporting Physician Work in Hospital).
* With my good work – I again moved to Facility coding. Where I learned Infusion reporting, Radiology, Basic Lab codes, Trauma Activation category, ER coding for both Physician & Facility. Facility related Observation & Trauma procedures

**Intelenet Global Service Pvt. Ltd (May 2010 to June 2011)**

Joined as Fresher. Started with ICD coding & Moved to ER. Awarded for my productivity for two consecutive months.

Speciality Exposed – Only Emergency Room.

**Declaration:**

Iherebydeclarethat theabove-mentioned details aretrueto thebest of myknowledge.