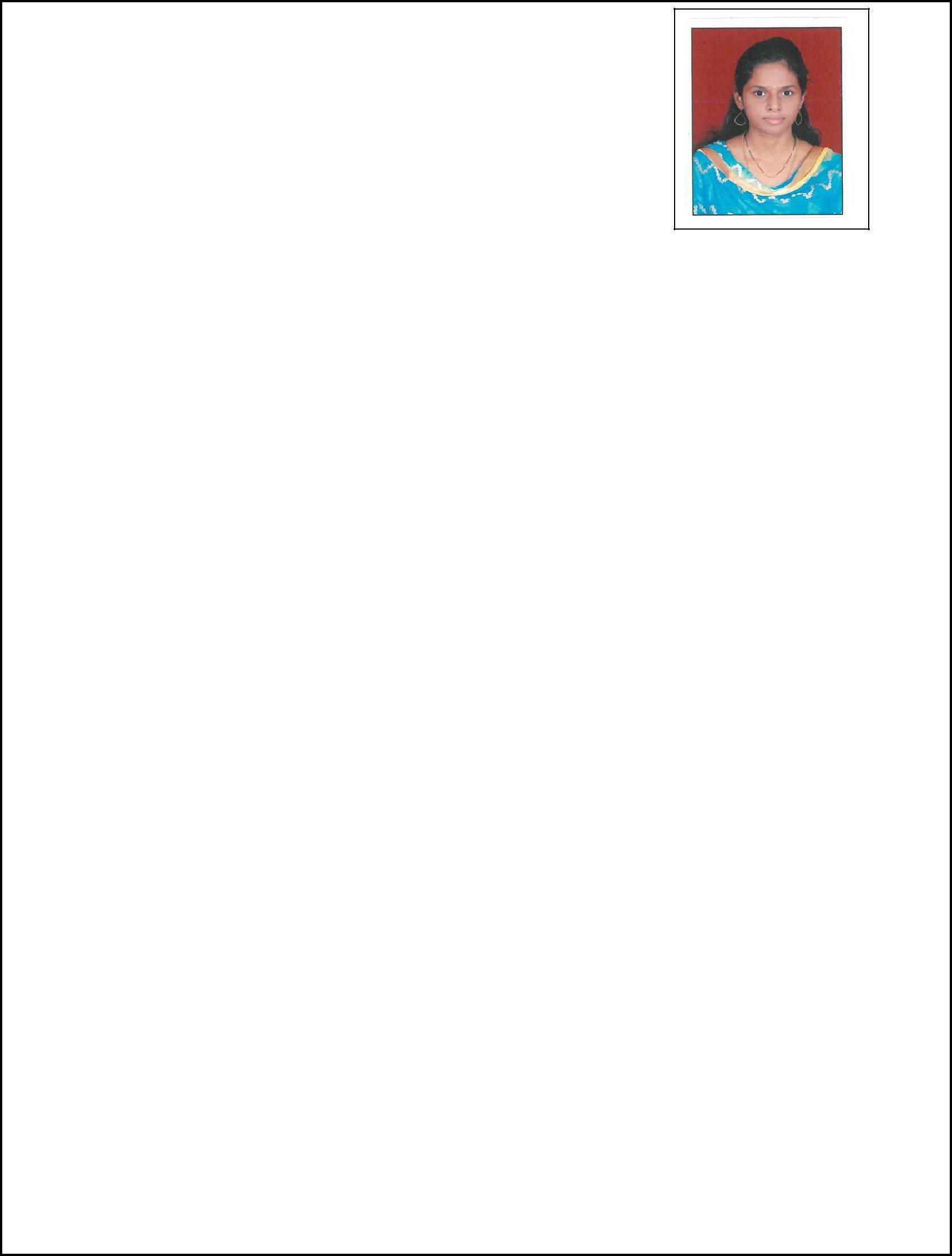
**Resume**

Keerthi

Abu Dhabi, UAE

**E mail:** [keerthi.377135@2freemail.com](mailto:keerthi.377135@2freemail.com)

**Mobile:** C/o 971506425478

**CAREER OBJECTIVE**

To procure challenging avenues in a fast paced environment where my knowledge can be enriched and can contribute effectively for the growth of the organization through an excellent team work characterized by sincere and dedicated hard work and enthusiasm.

**BACKGROUND**

CPC Certified Medical Coder with 1.3 Years Abudhabi experience and 8+ Years of RCM experience in US Healthcare processes like Coding, Denial Management, Demo & Charge, Eligibility Verification, Payments and Refunds.

**EDUCATION Qualification**

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CPC Certificate from AAPC.

B.Com with 78% from Bharathiyar University, Coimbatore.

Higher Secondary with 92% from State board Higher Secondary, Coimbatore.

SSLC with 86% from Matriculation, Coimbatore.

**SKILLS**

* Expertise in **Coding Principles**, Government regulations, Protocols and Third party requirements regarding Billing and documentation. Having knowledge about **HAAD guidelines** and billing rules.
* Assures that services documented in the Patient’s chart are coded with appropriate CPT and ICD-10-CM when services are documented, seeks to attain proper documentation in a timely manner.
* Sound knowledge in all type of **Rejections** and the appropriate **Re-submission procedure** to get the bill paid.
* Experience in coding tool like **Encoder Pro** and Billing platforms like **Unicare, Carenet, IDX, Medical** **Manger, GE, MDIV, ECW, Medisoft, Avicenna, Veracity and Allscripts.**
* Experience in MS Excel, MS Word and XML.

**AMRITA MEDICAL CENTRE (ABU DHABI UAE)**

DESIGNATION: **MEDICAL CODER**

OCT 2016 to Till Date

* Working as an Out Patient Medical Coder, assigning appropriate **ICD-10, CPT and Drug Codes** **based** on the available Documents.
* Communicating with the Physicians for incomplete and additional documents to code the more appropriate codes.
* Assisting the front desk staffs on insurance SOB and network coverage details.
* Processing different type of specialties like General Medicine, Internal Medicine, Gynecology, Pediatric, ENT, Dental, Cardiology, Urology, Dermatology, Ophthalmology, Orthopedic and Physiotherapy.
* Obtaining **prior authorization** for Physiotherapy and other diagnostic test that need prior approval as per insurance SOB.
* Generating XML file, error corrections and submitting the claims on a daily basis.
* Downloading the insurance remittance from Green Rain portal and **Re-submitting** the claims with appropriate resubmission reason/claim correction.

**SYRMA TECHNOLOGY (CHENNAI INDIA)**

DESIGNATION: **TEAM COACH (Coding and Billing)**

Oct 2011 to Oct 2015 (3 years 11 months)

* Worked in **E&M coding** for **1 Year** by converting the Alphabetic information into Numerical data using the Coding manuals like CPT, ICD-9-CM and Client specific guidelines.
* Assisting the team leader in managing the team in **work allocation for Coding, Denial** **Management and Refund processes**.
* Also responsible for managing MIS report and maintaining project training and SLA documents.
* Ensuring that all of the information about diagnoses and procedures for patients is accurate and complete.

**KINGDOM SOLUTIONS (COIMBATORE INDIA)**

DESIGNATION: **SR. PROCESS ASSOCIATE (Denial Analyst)**

Nov 2007 to Sept 2011 (3 years - 10 months)

* Worked in a **Denial Management process**, where we will work on insurance rejections and re-file the claim accordingly.
* Responsible for **reducing the major rejections** and educating the team accordingly.
* Using the insurance websites, we verify the member coverage eligibility before billing the claims to reduce rejections.
* During the demo and charge entry process we follow the client updates and generate the charges accordingly.

**DELL PEROT SYSTEMS (COIMBATORE INDIA)**

DESIGNATION: **JUNIOR EXECUTIVE**

May 2007 to Oct 2007 (6 months)

* Worked in Payment Posting and Denial Capture projects. Posting the payments in to the customer software by referring the EOB and ERA files.
* When the claims is been rejected by the insurance, we will take the appropriate ANSI rejection code and forward the claim to re-submission team for review.

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| **PERSONAL DETAILS** |  |  |
|  |  |  |
| Date of Birth | : | 19/08/1986 |
| Gender | : | Female |
| Nationality | : | Indian |

Marital Status : Married

**DECLARATION:**

I hereby declare that all the above information is absolutely true and correct to the best of my belief and knowledge.

PLACE: Abu-Dhabi SIGNATURE

DATE:

(KEERTHI)