#####  CURRICULUM VITAE

**Durga**

**Mail Id:** **durga.383503@2freemail.com**

**OBJECTIVE**

 To work at responsible position in an organization where I can utilize my

 Communication and analytical skill for the growth of the organization and my

 Personal growth.

Academic Education

|  |  |  |
| --- | --- | --- |
| **Year** | **Degree/ Certificate** | **Institute / University** |
| 2016 | CPC Certified  | AAPC |
| 2008 | B.com | Mumbai |
| 2004 | H.S.C | Mumbai |
| 2002 | S.S.C | Mumbai |

 Name of the firm **: I services India Pvt ltd**

Designation : Medical coder

 Period of employment : Sept 11 2017 to Present

 Specialization : Emergency Department (Pro ,SDS)

 Software work : 3M, Citrix, Optum Encoder.

**RESPONSIBILITY**

* Reviewing medical records and assigning CPT, ICD- 9- CM/ICD-10- CM Codes using coding

Tools/manuals available.

* To submission all supported documents to the insurance company.
* Submission and revision of medical claims.
* Check the denials/mismatch medical records depends insurance guidelines Send

back to Physician for incomplete document

* Training ICD-9- CM and ICD-10- CM, CPT.
* Meeting set productivity and quality goals.

Name of the firm **: Wipro India Pvt Ltd.**

Designation : senior executive

 Period of employment : July 27 2011 to 1st July 2017

**JOB ROLE**

* processing and analyzing the claims related to medical coverage of

member provided by our client, which is a major US healthcare insurance organization.

* Analyze provider documentation to assigning appropriate CPT code and diagnosis codes.
* Receive information to properly bill provider services for patient.
* To ensure error free claims processing with achieving production and quality target.
* Maintain stability between production and quality
* At the end of each week presenting review of the team to the supervisor

 and managements.

**RESPONSIBILITY**

* Interpretation of services description and Used the appropriate CPT code

to make the payment directly to Member with UHC benefit.

* Conversion of Text information related to healthcare services into

numeric diagnosis related to medical problem and procedure.

* Verification of submitted documents for claims payment and if required

 request for additional documents for proper settlement of claim benefit.

* Strong understanding of ICD-9 cm or ICD -10 and CPT requirement

 and procedures.

* Ensure my colleagues to improve in their quality and productions.

**ACHIVEMENTS**

* I have been rewarded as the best trainee in training of coordination of benefit (UHG CLAIMS)
* I have been rewarded as best quality for quarters in IRU (UHG Claims).
* I have also taken initiatives to make the quality green for the whole team by inducing and giving correct steps taken while processing the claim to Team members in Foreign team.
* I have been trained in multiple queues like COR LET, OIS, MEDICARE, USL and Foreign que.

##### COMPUTER KNOWLEDGE

* Typing Speed: 35 WPM
* Application Known: MS – word, Excel, PowerPoint.

##### PERSONAL DETAILS

Languages : English, Hindi, Marathi

Nationality : Indian

Marital Status : married

Interests : Outdoors & Indoor games, movies, music.