

JESSICA CLAIRE

Montgomery Street, San Francisco, CA 94105
(555) 432-1000 - resumesample@example.com

PROFESSIONAL SUMMARY

Well-trained Customer Advocate, offering vast experience in healthcare customer service, excellent interpersonal communication skills and comfortable in building working relationships with our clients and customers.

SKILLS

- 14 years of experience as a health care customer advocate.
- Excellent problem solving and communication skills, both verbal and written.
- Ability to sustain work pressure in an efficient way.
- Exceptional interpersonal skills.
- Well organized, detail oriented, possitive attitude and strong work ethics.
- Honest, hard working, respectable and caring.
- Excellent team player.
- Fast learner and flexible with work timings.

WORK HISTORY

04/2011 to Current **Customer Advocate**

Ally – Troy, MI

- Provide exceptional and professional customer service to our customers, clients and peers in a prompt and efficient manner.
- Resolve internal and/or external escalated issues for benefits, claims and customer inquiries within the require timeframe.
- Perform extensive and precise research for any benefit,claim and/or pharmacy inquiries required by CSP and claim adjusters to perform their duties with fewer delays.
- Focus on our client and customers needs and expectations to ensure the best possible information and/or resolution is provided.
- Request Access to care updates for both active and retiree customers.
- Assist and promote various Wellness programs.
- Engage and/or conduct weekly meetings with CSP,manager and peers to bring forth any concerns, issues or possible trends with the City of Houston account.
- Face to face interaction with client and customers on a daily basis.
- Provide support to interal/external peers, CSP, Sales etc.
- Establish and maintain good working relationship with client and customers
- Excellent computer skills and knowledgeable with various software programs. (Oneview, Argus, CED, CPF, ICMS, MHS, MSS, Word, Excel, Outlook etc)

04/1999 to 04/2011 **Customer Advocate Specialist**

Blue Cross Blue Shield Of Texas – City, STATE

- Responsible for resolving basic/escalated internal and external benefits, claims and member inquiries.
- Data entry, process and finalize claims.
- Performed claim adjustments for Medicare, HMO and PPO products.
- Investigate and submit requests through Financial Suspense System to recuperate financial overpayments.
- Inform the policies and procedures to the members.
- Update membership and prescription inquirees.
- Update Secondary insurance Information.
- Assist with Retirees with Medicare Coordination of Benefit inquiries and updates.
- Performed various tasks in a timely manner.
- Handle written correspondence from members and providers.
- Communicate with Healthcare professionals to resolve issues.
- Promote Wellness Programs.
- Participate in City of Houston Annual Open Enrollment meetings.

EDUCATION

1996 **GED**
Houston Community College - Houston, TX

ADDITIONAL INFORMATION

Bilingual - Fluent in both English and Spanish