Amulya Goli

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Professional Summary

Certified Professional Coder with 3+ years in inpatient/outpatient revenue cycle—coding, charge capture, claims resolution, and compliance. Expert in **CPT**, **ICD-10**, **HCPCS**, **denial management**, and **payer policies**; experienced with **Epic**, **Cerner**, **payer portals**, and Microsoft **Excel/Word**. Analyze trends, resolve edits, and train clinicians to improve coding accuracy and reimbursement. Built a lightweight Medical Coding Tool for **ICD-10-CM** search, **modifier** suggestions, and basic **NCCI checks**.

Core Competencies

• Proficient in CPT, ICD-10, HCPCS, NCCI, OCE, MUE, LCD/NCD policies
• Revenue Cycle & Coding: Charge capture, denial resolution, claim edits, payer rules
• Systems & Tools: Epic Clarity, Cerner, IDX, Centricity, Payer Portals, Microsoft Excel & Word
• Compliance & Regulations: Medicare/Medicaid billing, HIPAA, CMS guidelines
• Collaboration: Cross-functional engagement with physicians, billing staff, and practice managers
• Analytical Skills: Revenue reconciliation, trend identification, KPI monitoring, process improvements

Professional Experience

Claims Follow-up Associate – IKS Health Services (March 2024 – Present)
• Manage high-volume outstanding claims, resolving payer edits, denials, and disputes.
• Conduct root cause analysis of denials and implement corrective actions, leading to successful appeals.
• Collaborate with physicians, billing teams, and practice managers to clarify documentation and resolve revenue cycle issues.
• Perform KPI and denial trend reporting, supporting continuous process improvement.
• Ensure compliance with payer requirements, CMS guidelines, and HIPAA regulations.

Medical Coder & Biller – Optum, Hyderabad, India (Jan 2021 – July 2022)
• Applied ICD-10, CPT, and HCPCS codes to inpatient and outpatient encounters, ensuring accuracy and compliance.
• Resolved coding edits and supported denial management by clarifying documentation with providers.
• Prepared audit-ready billing summaries and encounter reconciliation reports.
• Supported charge reconciliation processes and collaborated with providers to address missing revenue.
• Utilized Epic Clarity, Cerner, and billing platforms to support efficient claims generation and resolution.

Projects

Medical Coding Tool

Live demo: https://medical-coding-tool.vercel.app/
• Built a PoC coding assistant focused on ICD-10-CM lookup, modifier guidance, and basic NCCI/MUE checks to reduce coding errors and payer denials.
• Designed workflows aligned to claims editing and revenue integrity (coverage rules, edit checks, Dx pointers), with a roadmap for CMS-1500 claim builder and LCD/NCD integration.
• Streamlined coder/biller use: fast UI for code search, modifier selection, and quick validation before submission.

Education

MBA, Healthcare Informatics & Project Management – Lewis University, 2024 (GPA: 3.27)

Bachelor of Science (Botany, Zoology, Chemistry) – Osmania University, 2021 (GPA: 8.5/10)

Certifications and Training

• CPC – Certified Professional Coder (AAPC)
• Revenue Cycle Specialist Training
• HIPAA Compliance Training
• Medical Billing & Coding Fundamentals

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