

Manisha Agrawal

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SUMMARY

Detail oriented and customer focused medical billing and coding specialist with over four years of experience in ICD-10/CPT coding ensuring claims are processed with accuracy and confidentiality in a timely manner. Highly skilled in analyzing and validating patient information, diagnoses, and billing data.

EXPERIENCE

Billing and Coding Specialist

February 2018 - Present

Ruby Parikh Medical Billing Company

- Retrieve ERA and apply the insurance payments to the patient accounts
- Submits written appeals to insurance by providing them with proper records and documents to expedite payments and resolve denials
- Review and validate accuracy of charges including date of service, services provided, location and provider signature
- Interprets physician's diagnosis and procedure records while assigning proper ICD 10 and CPT codes
- Creates and submits claims, files secondary claims, refunds requests, resubmits rejected claims, and adjusts underpayments
- Connects with insurance and patient aging to resubmit insurance claims when necessary
- Experience with multiple insurance plans such as HMO, PPO, Medicare, Medi-Cal, Workers Comp.
- Acquires insurance authorizations for procedures ordered according to insurance company requirements
- Train new employees

Apprentice

February 2016 – June 2016

Medical Clinic, Norwalk

- Researched and resolved incurred and denied payments and resubmitted the claims
- Followed up on insurance and patient aging

EDUCATION

Vikram University — Master of Science in Chemistry

Ujjain, India

Career Technical Education Center — Medical Insurance Specialist:

Cerritos, CA

Course work included the study of the structures and conventions of ICD-9-CM and CPT/HCPCS and the correct process for selecting codes, Physician and Facilities coding linkage and compliance.

Certificates: Medical Billing and Coding, Medical Terminology and Anatomy for Healthcare Professionals, Word, Keyboarding, Data Entry, Electronic Health Records, Bookkeeping/Accounting