**KARANDA JOSEPH**

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**OBJECTIVE:** To apply my extensive experience in Medical Billing, Basic Coding, and Insurance Claims to help an organization streamline its processes and bring its Accounts Receivable to current status.

## SUMMARY: Medical Billing & Coding; ICD-9, HCPCS Level 2; Health Insurance Industry Claims Procedures; Pre- Authorizations; Customer Service; Accounts Reconciliation; Payment Posting; Explanation of Benefits; Member Services; Medicare and other insurance billing; Insurance Verification; Administration Management.

**EDUCATION &** AS, Health Systems/Technology/Medical Billing/Coding – Central Florida College, Winter Park, FL

**QUALIFICATIONS:** *Certificate:* Medical Billing & Coding–Central Florida College, Winter Park, FL

Scheduled for testing certification May, 2010.

*Computers:* M/S Word, Entry Excel, Internet Research, Outlook, Medi-Soft, Medical Manager custom software.

*Membership Affiliations:* Membership with American Academy of Professional Coders.

**OUTSTANDING** *1)**As a collections agent; produced top 5% in collections.*

**ACHIEVEMENTS:** *2) Received recommendations for organizing billing processes and helping to bring billing team current electronically.*

*3) Used Medical Manager Software to streamline the billing and claims processes.*

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## PROFESSIONAL EXPERIENCE

**RECEIVABLE MANAGEMENT SERVICES,** East Harford, CT 6/09 to present

##### *Bill Collector*

* Responsible for posting payments to patient accounts; receive patient phone calls and help them resolve problems with their accounts for large insurance companies.
* Bill insurance companies for services rendered; follow up on reimbursement; re-bill when necessary.
* Manage all and medical accounts; prescriptions collections; check proof of insurance; credit adjustments; work with patient and insurance A/R; follow through on denials from EOB’s (Explanation of Benefits).

**MED BILL,** Longwood, FL 6/08 to 6/09

##### *Billing Representative Externship*

* Responsible for posting payments, A/R, patient statements, and insurance billing for medical billing company.
* Responded to denials, filed EOB’s, received and handled phone calls; sorted mail; made daily deposits.
* Prepared and maintained billing files and records.
* Processed insurance verifications.
* Provided follow up for delayed claims; in timely manner; follow up on entries and made corrections if necessary.

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**INTELLISIGHT,** Winter Park, FL

##### *Billing Representative Externship*

* Responsible for following up on the status of claims for provider clients; at physician billing service company.
* Posted payments and information to accounts; verified billing information for electronic claims transmission.
* Provided follow up for delayed claims; in timely manner; follow up on entries and made corrections if necessary.

**CAREER TRAINING INSTITUTE,** Winter Park, FL 6/08 to 4/09

*Administrative Assistant*

* Responsible for day to day administrative support at company called “Base Camp” who helps children fighting disease in hospitals.
* Handled logbook, internet marketing and research; solicited donations for hospitalized children.
* Supported and performed administrative duties as requested; data entry, and receptionist duties.