**Shereka Stevens**

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**Objective**

To be a contributing team member where my abilities and experience in Healthcare/Insurance can be a significant factor in helping achieve prompt, courteous service

**Qualifications**

Demonstrates a strong sense of customer focus in day to day interactions with both internal and external partners. Knowledge of ICD-9 and HCPC diagnosis coding. Excellent data entry skills. Clear and concise communication either verbal or electronic. Self- starter with a strong work ethic. Also works independently to resolve complex issues.

**Experience**

07/07-12/10 AIG Insurance Company Farmington, CT

**Accounting Assistant**

Process cash applications, rental conversions and rental buyouts. Manage Texas accounts within the 90 day timely filing limit. Supports tasks as Document Processing, T & T invoice processing, Customer Eligibility verification. Auditing, set-up and entering of vendor invoices for processing. Manage non-AIG DME collections for under and over 90 plus day invoices and process claims for reconsideration. Assist with AIG and Transportation and Translation collections. Manage all incoming inquiries regarding customer accounts and invoices received from vendors within 30 business days. Input checks for processing of vendor payments, process DME invoices for supplies to obtain authorizations from adjusters, and obtain documentation from vendors, physicians, and Nurse Case Managers. Inbound/Outbound calling to suppliers, Nurse Case Managers to process Worker’s Compensation Claims.

03/06-07/07 AIG Insurance Company Farmington, CT

**Finance/Operations Document Processor**

Third Party Administration- Inbound/Outbound call center responsible for ordering and coordinating DME for patients, Physicians, Nurse Case Managers, and Worker’s Compensation Insurance carriers via phone, fax, and email. Responsible for verifying prescriptions, HCPC codes, ICD-9 codes, and Worker’s Comp. state fees for billing purposes. Also verify insurance and/or other methods of payment and obtain authorizations. Process Explanation of Benefits received from Finance Department regarding payment appeals and original invoices, of which operations has not received a corresponding order for rental extension or conversion. Contact Physicians, suppliers, and/or claimants to obtain documentation to pursue authorizations and determine equipment needs. Also calculate rental conversions to purchase.

02/06-03/06 Aetna Insurance Company Middletown, CT

**Worker’s Compensation Benefit Specialist**

Determine and understood the coverage provided under a provider’s plan. Research and analyze essential concerns/issues raised by providers. Utilized multiple systems to obtain and record claim information to make claim payment decisions. Provided quality resolutions or workaround to issues within set deadlines.

10/04-02/06 Apria Healthcare Cromwell, CT

**Customer Service Representative**

Third Party Administration- Inbound/Outbound call center responsible for ordering and coordinating DME for patients, Physicians, Nurse Case Managers, and Worker’s Comp Insurance carriers via phone, fax, and email. Responsible for verifying prescriptions, HCPC codes, ICD-9 codes, and Worker’s Comp. state fees for billing purposes. Also verify insurance and/or other methods of payments and obtain authorizations. Provided information on equipment, supplies, and/or services and resolved patient complaints by identifying problems and coordinated appropriate corrective actions. Coordinate the delivery, set-up, and pick-up of equipment, supplies, and services with appropriate personnel. Also ensures deliveries and set-up can be arranged in a timely manner.

**Education**

02/02-06/02 Urban League Hartford, CT

Received Certificate in Microsoft Word

08/96-02/97 Urban League Hartford, CT

Received General Education Diploma