1. Traveled extensively for customer servicing, mediation and legal proceedings.
2. Evaluated and settled complex insurance claims in strict timeframes.
3. Worked with claims adjusters and examiners to expedite processing in alignment with procedures.
4. Affirmed or denied coverage fairly based on thorough investigations.
5. Investigated [Type] damages, gathering information from diverse sources and delivering comprehensive reports.
6. Processed [Number] invoices each [Timeframe] and mailed documentation to clients.
7. Communicated effectively with staff, including members of operations, finance and clinical departments.
8. Assisted legal team in defending company against guilty parties.
9. Maintained confidentiality of patient finances, records and health statuses.
10. Tracked all pending authorizations to resolve discrepancies and avoid revenue loss.
11. Coordinated with contracting department to resolve payer issues.
12. Communicated verification and authorization status updates with [Type] department to facilitate decision-making for patient admissions and insurance coverage.
13. Acted as [Type] subject matter expert, answering internal and external questions and inquiries.
14. Presented insurance options to customers in order to close sales on new policies.
15. Reviewed outstanding requests and redirected workloads to complete projects on time.
16. Handled [number] calls per [timeframe] to address customer inquiries and concerns.
17. Demonstrated respect, friendliness and willingness to help wherever needed.
18. Participated in continuous improvement by generating suggestions, engaging in problem-solving activities to support teamwork.
19. Resolved conflicts and negotiated mutually beneficial agreements between parties.
20. Prepared a variety of different written communications, reports and documents to ensure smooth operations.