# **CURRICULLUM VITAE**

## **KANUPRIYA KHANDURI:**

Gopal Nagar ,Near bus Stand Gurugram

Gurugram-122001

CONTACT: 7060784931

EMAIL: kanupriyakhanduri008@gmail.com

#### **QUALIFICATION:**

- High Secondary 2011 from Uttarakhand Board
- Senior Secondary 2013 School from Uttarakhand Board
- B.Com 2013 to 2016 from Garhwal Central University, Uttarakhand
- M.Com 2016 to 2018 from Garhwal Central University, Uttarakhand

## **COMPUTER PROIFICIENCY:**

Computer Application: Basic computer knowledge:

- MS OFFICE 2007
- Internet stuff.

## **PERSONAL SKILLS:**

- Dedication, Punctual, Positive attitude
- Willingness to Learn and follow directions
- Good communication skills.

**EXPERIENCE:** GM Analytics Solutions

22 Sep.2021 to Current

- Authorization & Referral Executive
- Account Receivable Executive

#### **ROLES & RESPOSIBILITIES:**

- Doing a thorough verification process to know the services covered to obtain preauthorization
- Contact insurance carriers to verify patient's insurance eligibility, benefits and requirements.
- Request, track and obtain pre-authorization from insurance carriers within time allotted for medical and services.
- Request, follow up and secure prior-authorizations prior to services being performed.
- Demonstrate and apply knowledge of medical terminology, high proficiency of general medical office procedures including HIPAA regulations.
- Communicate any insurance changes or trends among team.
- Maintains a level of productivity suitable for the department.
- Clearly document all communications and contacts with providers and personnel in standardized documentation requirements, including proper format.
- Perform pre-call analysis and check status by calling the payer or using IVR or web portal services
- Maintain adequate documentation on the client software to send necessary documentation to insurance companies and maintain a clear audit trail for future reference Record after-call actions and perform post call analysis for the claim follow-up

- resolve enquiries, requests and complaints through calling to ensure that customer enquiries are resolved at first point of contact.
- Provide accurate product/ service information to customer, research available documentation including authorization, nursing notes, medical documentation on client's systems, interpret explanation of benefits received etc prior to making the call.
- Perform pre-call analysis and check status by calling the payer or using IVR or web portal services
- Maintain adequate documentation on the client software to send necessary documentation to insurance companies and maintain a clear audit trail for future reference
- Record after-call actions and perform post call analysis for the claim follow-up
- Assess and resolve enquiries, requests and complaints through calling to ensure that customer enquiries are resolved at first point of contact
- Provide accurate product/ service information to customer, research available documentation including authorization, nursing notes, medical documentation on client's systems, interpret explanation of benefits received etc prior to making the call

### **INTEREST:**

- Playing Badminton & music.
- Reading books.

### **LANGUAGE KNOWN:**

• Hindi & English.

## **PERSONAL PROFILE:**

Date of Birth	: 01-May-1996	
Dated:		

Marital status

Religion

Gender

Place: .....

: Unmarried

(KANUPRIYA)

: Hindu

: Female