

PRIYA SAXENA

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EXPERIENCE

MAY 2016 – APRIL 2018

ANALYST, R1RCM GLOBAL PVT. LTD. (FORMALLY KNOWN ACCRETIVE HEALTH PVT. LTD.)

Job Responsibility:

- conclusions from the data for decision making
- Daily reconciliation of Payable & Receivable accounts
- Preparation and maintenance of essential documents
- Revenue and advance balances
- Assisting peers and supporting groups (AR/AP/Collections/Quality) to achieve the organizational goals.
- Creating day to day business reports, period end analysis and reporting.
- Leading Conference Calls on weekly basis for the resolution of all business queries till closure.

MAY 2018 – JUNE 2021

SENIOR EXECUTIVE (AR), PACIFIC AN ACCESS HEALTHCARE COMPANY

Job Responsibility:

- Call Insurance companies on behalf of physicians and carryout further examination on outstanding Accounts Receivables.
- Prioritize unpaid claims for calling according to the length of time it has been outstanding.
- Call insurance companies directly and convince them to pay the outstanding claims.
- Check the relevance of insurance info offered by the patient.
- Evaluate unpaid insurance claims.
- Call insurance companies and check on the status of claims.

DEC 2021 – APR 2022

SME (RCM Specialist II), Jindal Intellicom

Job Responsibility:

- Multiple processes like eligibility and verification, AR and helping team to maintain quality benchmark.
- Provided regular updates to team on quality metrics by communicating consistency problems or production deficiencies.
- Compiled and distributed weekly feedback to team leaders and managers to improve service time and quality while increasing productivity.
- Crafted training materials and ran on-boarding sessions to train incoming team members.

- Taking Process Knowledge Test to keep up all the updates in the process.
- Tracking Client Inventory and mapping it in such the way that we are completing all the matrices with in stipulated time.

APR 2022 – Current

SENIOR CLAIM SPECIALIST – OPTUM GLOBAL PVT. LTD

Job Responsibility:

- Call Insurance companies on behalf of physicians and carryout further examination on outstanding Accounts Receivables.
- Prioritize unpaid claims for calling according to the length of time it has been outstanding.
- Call insurance companies directly and convince them to pay the outstanding claims.
- Check the relevance of insurance info offered by the patient.
- Evaluate unpaid insurance claims.
- Call insurance companies and check on the status of claims.
- Transfer the outstanding balance to the patient if he/she doesn't have adequate insurance coverage.
- If the claim has already been paid, ask the insurance company for Explanation of Benefits (EOB).
- Make corrections to the claim based on inputs from the insurance company.

EDUCATION -

- High School from M.P Board.
- High Secondary from M.P Board.
- B.Com. from Monad University

SKILLS -

- Computer proficiency. (MS Office)
- Knowledge of Python (Basic)
- Knowledge of SQL(Basic)
- Leadership experience.
- Communication skills.
- Organizational know-how.
- People skills.
- Collaboration talent.
- Problem-solving abilities.