

Mayank Saxena

Senior Analyst

Goal-Oriented Senior Analyst with more than Five Years of Experience in US Healthcare with expertise in strengthening companies to lead in highly competitive situations, targeting assignments in US Health Care & Welfare domain with an organization of high repute.

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📞 8076850683

📍 Delhi, India

WORK EXPERIENCE

Senior Analyst R1RCM

04/2020 - Present

Gurugram

Achievements/Tasks

- Coordinating with all levels of Hospital and Medical staff, including providers, specialists, and clinical staffs to ensure healthcare needs are being addressed.
- Provide detailed clarification on claims to both insurance company and patients.
- Sharing the client-reports on a daily, monthly, weekly, and bi-weekly basis as per client requirements.
- Prepare monthly activity and quality review reports.
- Executing and supporting training plans of new joiners.

Senior Analyst Concentrix

08/2016 - 09/2019

Gurugram

Achievements/Tasks

- End to End Health Care transaction processing for Rework Department and performing back office healthcare claims support in the areas of claims adjudication and adjustment with full ownership.
- Process claims accurately and timely as determined by client with minimal to no financial or procedural errors.
- Co-coordinating among different internal/External Dept.to achieve Targets as per the date promised to the customer.
- Provide excellent customer service by processing transactions accurately.
- Ensure tyahat any exceptions in processing are dealt with effectively, appropriately tracked, and resolved or escalated as needed.

EDUCATION

Bachelor of Commerce with Honours Mahatma Jyotiba Phule Rohilkhand University, Uttar Pradesh

2011 - 2014

SKILLS

US Healthcare

Claim adjudication

Medical billing

Team management

Training and monitoring

HONOR AWARDS

Best Performer and Quality contest winner.
Recognised or outstanding performance.

Letter o f appreciation for consistent performance.

LANGUAGES

Hindi



English



KEY RESPONSIBILITIES

Research and analyses issues and ensures sufficient information.

Working in Athena portal where we help patient with physician billing, medical records and also submit Back Office Request Form.

Review paperwork for completeness and accuracy, including completion of all required fields

Answering mails and escalations from the client and suggest teammates needs to be done on the given target date.