

**DR SWAPNABALAJI**

**CURRICULUM VITAE**

**EMAIL ID: sr.swapna@yahoo.com**

**PHONE NO: +919008546699**

**CAREER OBJECTIVE**

Dentist with certified professional coder from AAPC (certified in Nov 2016 with ICD-10) with 7.3 total experience with 4.3 Years experience as a Medical Coder(US PROJECTS) and 3 years as a Medical coder and Dental Coder/Medical and Dental Claims processor/Insurance specialist and Medical Biller and Dental Biller in UAE and India(UAE PROJECTS) looking to work as an advancing medical coding and Billing professional in a challenging and intriguing working atmosphere with the utilization of adept coding expertise and proficient.

**PROFESSIONAL CERTIFICATION:**

**CERTIFICATE NAME:** CERTIFIED PROFESSIONAL CODER (CPC)

**INSTITUTE:** AMERICAN ACADEMY OF PROFESSIONAL CODERS.

**LEARNING:**

* CPC Certified Professional Coder (AAPC).
* Perform audit coding of disease and injury diagnoses, acuity of care, and procedures
* References used for coding include the current International Classification of Diseases (ICD), Clinical Modification; American Medical Association Physicians' Current Procedural Terminology (CPT); Care Common Procedure Coding System (HCPCS); Physicians' Desk Reference.
* Knowledge of medical terminology, anatomy, and physiology
* Broad medical experience also includes billing, reimbursement, HIPPA rules, insurance verification, scheduling, and report creation
* Key strengths: communication, leadership, and interpersonal skills; multitasking and overall resourcefulness

**PERSONAL SKILLS:**

* Holding Medical Coding certificate (CPC) from **AAPC in Nov 2016. (**ICD-9 Coding •ICD-10 coding ● CPT-4 Coding • Regulations •Denials Outpatient/ED/ER facility Coding)
* Holding Post Graduate Diploma Program in Software Applications 2006 (Computer –M S Office, including C, C++, VB, Oracle, java, advanced java, etc. Completed project “online Exam” with VB as front end and Oracle as back end)

**PROFESSIONAL EXPERIENCE:**

**ORGANZIATION: JORIE HEALTHCARE PVT. LIMITED, MOHALI, INDIA.**

**DESIGNATION: SR. MEDICAL CODER AND DENTAL CODER**

**LOCATION:** Mohali, India

DURATION: Jan 2022 – Till date.

* Handled projects in various specialties like Dental, E/M (op), Optometry.
* Coding Various ICDs and procedure codes based Standard Coding guidelines and Client SOPS.
* Claims processing and initial submission of all claims to all insurances (Daily Target-120-150 claims.
* Training the teammates on Dental coding and Dental Billing.
* Preparing reports like Daily production report, daily pending report etc.
* Interacting with Clients on daily basis to clarify coding queries and others.

**ORGANZIATION: EMDS, NOIDA, INDIA.**

**DESIGNATION: SR. ASSOCIATE CODER**

**LOCATION:** Noida, India

DURATION: Aug 2019-Dec 2021.

* Handled projects in various specialties like E/M (op), Surgery, IP DRG, E/M Diagnostic)
* Coding Various ICDs and procedure codes based Standard Coding guidelines and Client SOPS.
* Claims processing and initial submission of all claims to all insurances (Daily Target-120-150 claims)

**ORGANZIATION: THUMBAY TECHNOLOGIES PRIVATE LIMITED, BENGALURU, INDIA.**

**DESIGNATION: TEAM LEADER**

**LOCATION:** Bengaluru, India

DURATION: SEP 2019-JUL 2020.

**ROLES & RESPONSIBLITIES: Worked as team leader handling team of 25- 30 members.**

We are working as a back office for THUMBAY HOSPITALS, UAE mainly concerned with claims processing (INITIAL SUBMISSION OF CLAIMS) for all insurances for all Thumbay hospitals for all locations in UAE (OUTPATIENT, INPATIENT and DENTAL claims) implementing ICD 10 coding guidelines, individual insurance approval protocols and all guidelines keeping audit process in mind.

* Claims processing and initial submission of all claims to all insurances (Daily Target-120-150 claims)
* Conducting interviews for new candidates.
* Auditing of processed claims by teammates.
* Training new candidates on claims processing, ICD 10 coding guidelines, dental anatomy and dental coding guidelines.
* Updating the team as and when updates received from insurance companies.
* Creating time to time reports like daily productivity report, weekly report and monthly report, attendance report and submitted to line managers.

**ORGANZIATION: NMC MEDICAL HOSPITAL** HEALTHSOFT MIDDLEEAST CLAIMS SETTLEMENT CONSULTANCY)

**DESIGNATION:** MEDICAL CODER AND BILLER/REMOTE RCM CODER/MEDICAL CLAIMS PROCESSOR

**LOCATION:** ABU DHABI, UAE.

DURATION: Dec 2018 – May 2019.

**ROLES & RESPONSIBLITIES: Out-patient Re submission (Denials Management)**

Reviewing the claims from the insurance and submitting and resubmitting the claims as per HAAD guidelines.

* Auditing of processed claims.
* Training new candidates on claims processing.
* Creating time to time reports.

**ORGANZIATION:** ALLCARE MEDICAL CENTER

**DESIGNATION:** MEDICAL CODER/BILLER/INSURANCE SPECIALIST/DENTAL CODER AND BILLER

**LOCATION:** ABU DHABI, UAE.

DURATION: MAY 2018 – Nov 2018

**ROLES & RESPONSIBLITIES: Out-patient Re submission (Denials Management)**

Reviewing the claims from the insurance and submitting and resubmitting the claims as per HAAD guidelines.

* Getting approvals for required services for all insurance companies (DENTAL AND MEDICAL)
* Provide administrative support to physicians and interpret medical reports and data to assign ICD-9 and ICD-10 codes; enter diagnosis codes and patient information into billing software.
* Update and manage diagnosis lists, coordinate routine documentation and coding audits, and execute qualitative analysis of discharged charges.
* Follow and maintain currency on coding, sequencing, and procedures best practices and updates.
* Review and validate accuracy of charges, including dates of service, services provided, location, patient identification, and provider signature.
* Collected, posted, and managed patient account payments, and prepared and submitted claims forms to insurance companies and other third-party payers.
* Performed insurance verification, pre-certification and pre-authorization.
* Entered procedure and diagnosis codes, and requisite patient information into billing software to streamline invoicing and account management; added modifiers, verified diagnosis, and coded narrative diagnosis.
* Responded to staff and client inquiries regarding CPT and diagnosis codes.
* Reviewing the claims from the insurance and submitting and resubmitting the claims as per HAAD guidelines.
* Reconciliation of older claims as per HAAD.
* More specialist in Dental and Medical department related to all (approvals, coding, submission, re submission, reconciliation of insurance claims)

**ORGANIZATION:** SHIEKH KHALIFA MEDICAL CITY (Gulf Hra Management Consultancy)

**DESIGNATION:** MEDICAL CODER/BILLER/CLAIMS PROCESSOR

**LOCATION:** DUBAI, ABU DHABI (UAE)

DURATION:July 2017 to Apr 2018

**ROLES & RESPONSIBLITIES: Inpatient, Out-patient and Ed/ER Re submission (Denials Management) AND Out –Patient 24hrs Submission:**

* Reviewing the claims from the insurance and submitting and resubmitting the claims as per HAAD guidelines.
* Reconciliation of older claims.

**ORGANZIATION:** VEE TECHNOLOGIES PRIVATE LIMITED

**DESIGNATION:** MEDICAL CODER

**LOCATION:** BENGALURU**.**

DURATION: Jan 2013 to Feb 2017.

**ROLES & RESPONSIBLITIES:**

* Over 4.3years experience as a medical coder professional in a variety of clinical settings (1 year in **IP DRG** and 3.3 years in **ED/ER and E/M (OP)** specialities).
* Highly skilled in translating codes into insurance company’ preferred coding systems.
* Able to perform charge review, claim submission, claim follow-up, payment posting and patient statements.
* In depth knowledge of preparing appropriate claim documents.
* Proficient in assigning appropriate medical codes to diagnosis and services
* Code records by following prescribed coding standards such as ICD-9, ICD-10 and CPT.
* Review physician notes and obtain necessary clarifications where necessary.
* Assign appropriate medical codes to all diagnosis and services.
* Follow up with insurance companies and ensure that all claims come to fruition.
* Performed day to day functions associated with coding, abstracting and revenue cycles.
* Entered and verified abstract data elements.

**ORGANZIATION**: SHILPA DENTAL CLINIC

**DESIGNATION**: DENTAL SURGEON

**LOCATION:** BENGALURU.

DURATION: Jan 2004 to Dec 2013

**Dental procedures handled:**

All Dental procedures.

**REGISTERED DENTIST:**

Holding **Licensed REGISTERED DENTIST** in KARNATAKA STATE DENTAL COUNCIL OF INDIA **(KSDC),** Registration No.15732-A.

**EDUCATIONAL QUALIFICATION**

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|  | **UNIVERSITY/ BOARD** | **INSTITUTE/ COLLEGE** | **PASSED OUT** |
| **Bachelor Of DENTAL SURGERY (BDS)** | **Rajiv Gandhi University Of Health Sciences, Karnataka,**  **India.** | **Vokkalighara Sangha Dental College & Hospital Bengaluru,**  **Karnataka, India.** | **2004** |
| **ll PUC** | **Karnataka State Pre-University Board, Karnataka.** | **Mount Carmel College, Bengaluru, Karnataka, India.** | **1997** |
| **SSLC** | **Karnataka**  **Secondary Education Board, Karnataka, India.** | **Stella Maris School,**  **Bengaluru, Karnataka, India.** | **1995** |

**COMPUTER SKILLS**

Operating Systems: Windows, Word perfect, Power Point, and Excel.

**PERSONAL DETAILS :**

Name : DR SWAPNABALAJI

Father Name : Ramachandraiah

Nationality : Indian

Pass Port No : M5837475

Marital Status : MARRIED

Languages Known : English, Hindi, Kannada and Telugu.

Hobbies : Listening to Music, playing indoor games.

Contact No & Address : Dr Swapna Balaji,

#43/5, Pushpak Apt, 8th main, 14 cross

Malleshwaram, Bengaluru,

Karnataka, India.

**DECLARATION:**

I hereby declare that the information given above is genuine to the best of my knowledge and brief and if given an opportunity to work in your organization. I will put my best efforts.

**Place: Bengaluru. (DR SWAPNABALAJI)**