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| ARNOB  DATTA | AE-46,RAMA BHAWAN,ORCHID HUT, KOLKATA-700053  8637359172  Arnobdatta172@gmail.com  N/A  N/A |

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|  | **Objective** |

To work in an organization that gives me a chance to enrich my knowledge by utilizing my skills and be a part of the team that excels towards the growth of the organization.

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|  | Education |

## Degree Title | MASTER OF BUSINESS ADMINISTRATION(FINANCE)- PONDICHERRY UNIVERSITY (DDE)

### YEAR OF PASSING 2012

PERCENTAGE- 54%

## Degree Title | BACHELOR OF BUSINESS ADMINISTRATION(H)- BURDWAN UNIVERSITY

### YEAR OF PASSING 2009

PERCENTAGE- 65%

## Degree Title | 12TH WBHSE, CMS HIGH SCHOOL, BURDWAN

### YEAR OF PASSING 2006

PERCENTAGE- 67%

## Degree Title | 10TH I.C.S.E, ST. XAVIER’S SCHOOL, BURDWAN

### YEAR OF PASSING 2004

PERCENTAGE- 60%

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|  | Experience |

## Job Title | SUN KNOWLEDGE PVT LTD. (KOLKATA)

### Dates From NOV,2019– May,2022

WORKING AS **AR. ANALYST**

Client- **Adapthealth**

Roles and responsibilities-

* Analysis on the Denials of claims with resolution on reprocessing claims with insurance.
* Submitting and following up on claims with health insurance companies in order to receive payment for services.
* Handling specific high dollar claims and responsible for overpayment refund to insurance.
* Timely follow up with the insurance payers on all accounts at any stage of the aging bucket.

## Job Title | WIPRO LTD. (KOLKATA)

### Dates From FEB,2018– Nov,19

WORKING AS **SENIOR** **ASSOCIATE**

Client- **HP, Geek squad**

Roles and responsibilities-

* Chatting with HP laptop and desktop users across APAC and SEATH region.
* Creating cases in CDAX, Symphony USD, Breeze
* Registering complaints and route the customer escalations to concerned team.
* Maintaining NPS level of 91%.
* Follow up with the registered cases within the given TAT.
* Taking ownership on the created cases and doing the regular follow ups.

## Job Title | R1RCM (GURGAON)

### Dates From OCT,2015 – To OCT,2017

WORKED AS **SENIOR ANALYST**

Client- **ST. JOHNS HOSPITAL (DSSC-AR)**

Roles and responsibilities-

* Analysis on the Denials of claims with resolution on reprocessing claims with insurance.
* Submitting and following up on claims with health insurance companies in order to receive payment for services.
* Handling specific high dollar claims and responsible for overpayment refund to insurance.
* Timely follow up with the insurance payers on all accounts at any stage of the aging bucket.

## Job Title | Trizetto (PUNE)

### Dates From JUNE,2014 – To OCT,2015

WORKED AS **QUALITY CONTROL ASSOCIATE**

Client**- COLARADO ACCESS, DENVER HEALTH, PROVIDENCE, Icare.**

Roles and responsibilities-

* Auditing the provider calls and provide feedback to the reps.
* Providing process updates from a quality perspective to BRC team members on periodic basis.
* Update reports defined as per process requirement for all clients. Handling rebuttals on periodic basis.
* Managing queries by providing effective resolutions at transactional level.
* Able to interact with the onshore team for process related support.
* Prioritize and escalate any issues that could put business processes at risk.
* Participate in client calibration process.

## Job Title | HINDUJA GLOBAL SOLUTIONS (BANGALORE)

### Dates From MARCH,2012 – To MAY,2014

WORKED AS **PROCESS ASSOCIATE**

Client**- HUMANA**

Roles and responsibilities-

* Steering accomplishments to set quality standards in SLAs.
* Ensure that all work assigned is processed as per SOP's and within the Turnaround Stipulated.
* Monitored checking the scanned images (EPL or OCP) and processing of endorsement as per application received from the insurance company.
* Ensuring TAT of processing for better operations delivery and customer satisfaction.
* Pre-adjudication, adjudication and Post-adjudication of claims is the value added propositions to enhance the productivity of insurance claims processing software developed and owned by the client.
* Ensuring accurate application of contractual prices and discounts, schedule of benefits, collection of deductibles, co-payments, co-insurance maximums and benefit limits.
* Detailed understanding of the process metrics.
* Successfully manage multiple parallel activities and prioritize tasks effectively.

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|  | Skills |

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| * Positive attitude * Effective team player * Meeting the KRA’s. * Ready to work under pressure * Customer centric |  |

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|  | declaration |

* I hereby declare that all the above-furnished Information is true to my knowledge and belief.

**DATE- 22-12-2022** **ARNOB DATTA**