

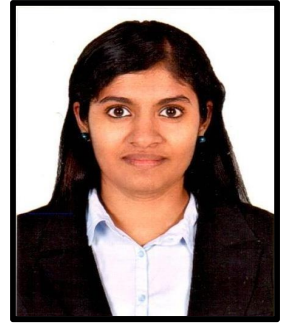
CURRICULAM VITAE

RAJIMOL R

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OBJECTIVE

To attain a challenging job in a dynamic and growth oriented organization where I can utilize my knowledge, skills and abilities efficiently and work to the best of my potential with patience, consistence and team spirit for the betterment and progress of the organization.

PROFESSIONAL SKILLS

- Extensive knowledge of medical terminology across a broad range of medical practice areas
- Excellent data entry skills
- Good multi-tasking abilities
- Strong understanding of ICD-10-CM and CPT requirements and procedures.
- Good interpersonal skills and the ability to function as a team member
- Experience with fast-paced medical care environments
- Good communication skills
- Has knowledge of how take insurance approvals, do submission, resubmission, and reconciliation of medical insurance claims.
- Fully certified Medical coding specialist has 4 Year of coding experience.

EMPLOYMENT HISTORY

Company name : **Reem medical and Diagnostic Centre, Reem Specialist Medical Centre, Avivo group of clinics, Sharjah, UAE.**
Designation : **Medical insurance specialist-General**
From September 2018 to July 2020

PROFESSIONAL SUMMARY

- Analyzing, interpreting and coding the medical documents for insurance submission.
- Sustaining the accuracy of data inserted in the company software and completing around 200 - 250 claims every day. Besides, ensuring that the productivity objectives determined by the company are met all times during the performance of the assigned duties.
- Managing and processing different types of claims like referral claims for lab and radiology department, internal doctor's lab and radiology claims. Finalize the claims and submitting to the respective insurance company as per the protocols.
- Resubmitting the rejected claims by the insurance company correctly.
- Reconciliation for final resubmission of rejected claims to insurance company as per the protocol.
- Query the treating physician directly for any documentation issues, and making correction accordingly for claim submission to insurance.

- Auditing claims for all the details and documentation, to avoid audit rejection from the insurance companies.

Taking approvals from respective insurance companies through portals, phone calls and emails, for the investigations and procedures ordered by the treating physician.

Company Name : **Sunny Medical Group, Sharjah, United Arab Emirates**
 Designation : **Medical Coder**
From December 2017 to April 2018

Sunny Medical Centre has become a trusted house-hold name in the field of comprehensive healthcare both among the Arab Community and the expatriate community of the Emirate of Sharjah.

PROFESSIONAL SUMMARY

- Performing the work of coding outpatient, diagnostic ancillary, emergency room, observation, and trauma registry services
- Sustaining the accuracy of data inserted in the company software and completing around 180 - 200 claims every day. Besides, ensuring that the productivity objectives determined by the company are met all times during the performance of the assigned duties

Managing and processing different types of claims related to laboratory and diagnostic examination, physical therapies, ENT, dental procedures, principal health care and E&M.

Company Name : **Navigant BPM (India) Pvt Ltd, Techno-park, Trivandrum, India**
 Designation : **Medical Coder**
From October 2015 to June 2017

Navigant India is part of Navigant Consulting, Inc. NYSE-NCI Global team. Navigant is one of the leading Medical coding firms that offers complete end-to-end revenue cycle management solutions for the physicians, hospitals and healthcare networks with around the clock resources.

PROFESSIONAL SUMMARY

- Coding and processing of medical and billing documentation.
- Abstracting information and assigning codes related to medicine, surgery, radiology and pathology.
- Knowledge in development of operational procedures concerning billing and coding.
- Worked in team-oriented and collaborating environment.
- Worked in George Washington –Mortgage project, which includes finding of PMI termination date and sorting of documents.

SPECIAL KNOWLEDGE

- ICD-10, HCPCS Level II, CPT
- Medical terminology, Anatomy
- Medical insurance submission, resubmission and reconciliation.
- Medical insurance approval of multiple insurance companies.
- Pathology and diagnostic investigation.

ACADEMIC QUALIFICATION

Name Of Exam	Name Of Board/University	Name Of School/College	Year Of Passing
M.Sc. Biotechnology	M.G. University	Marthoma college, Thiruvalla	2016
B.Sc. Botany & Biotechnology	Kerala University	Marthoma college of science & Technology, Ayur	2013

OTHER CERTIFICATION

COC - A (AAPC) [MEMBER ID: 01454900]

SOFTWARE SKILLS

Operating System: Windows Family

PERSONAL DETAILS

Date of Birth: 09/09/1991

Nationality: Indian

Sex: Female

Religion: Christian

Marital Status: Married

Passport No: R1989953

Visa Status: Husband Visa

RAJIMOL R

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