



DILNA KHADEEJA.M

CONTACT

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UAE

SKILLS

- Excellent ICD-10, CPT & HCPCS skills
- Knowledge of Medicaid and Medicare
- Knowledge of HIPAA laws and regulations
- Knowledge of medical terminology and anatomy

PERSONAL DETAILS

- Visa status : Transferable Visa
- Nationality : Indian
- DOB : 22/02/2001

EDUCATION

MEDICAL CODING

AROWNACADEMY,CALICUT -2023

- CPT
- ICD-10CM
- HCPCS Level 2 Medical Terminology and Anatomy
- Coding Guidelines

GRADUATION

CALICUT UNIVERSITY - 2022

- B A English

LANGUAGES

English

Malayalam

Tamil

Hindi

PROFILE

Diligent and knowledgeable Medical Coder with one year of experience in India. Proficient in ICD-10-CM, CPT, and HCPCS Level II coding systems. Skilled in reviewing medical records, ensuring compliance with coding guidelines, and optimizing reimbursement for healthcare providers. Detail-oriented with a strong understanding of medical terminology, anatomy, and physiology. Effective communicator and team player, dedicated to maintaining coding accuracy and quality.

CERTIFICATIONS

- **CERTIFIED MEDICAL CODER (AAPC-CPC)**

WORK EXPERIENCE

MRD MEDICAL CODER

METROMED INTERNATIONAL CARDIAC CENTRE

2023-24

- Follow management priorities on a daily basis.
- Support and strategize with the approvals team for efficient code-based approvals.
- Report service level auditing findings and monitor compliance with insurance protocols.
- Explore innovative strategies to enhance departmental performance.
- Monitor the rule engine for predictable claim rejections and take necessary actions.
- Ensure proper coding of diagnoses and procedures for accurate billing.
- Implement initiatives to improve the institution's revenue flow.
- Manage denials effectively to minimize revenue loss.
- Supervise DRG activities according to Assistant Insurance Manager/Insurances.
- Manage electronic claim submission processes.
- Monitor E-Prescriptions for accuracy and timeliness.
- Report day-to-day activities to the designated authority.
- Handle queries from other departments regarding medical coding.
- Coordinate with insurance companies to resolve E-Claim issues.
- Answer staff queries related to medical coding.
- Enter any missing codes to ensure completeness of the revenue cycle.
- Contribute to updating the Hospital