

## CURRICULUM VITAE



**Mrs. Jitha Mol Balakrishna**

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### CAREER OBJECTIVE

Seeking a job with a reputed organization where I can enrich my experience while delivering good results and meeting the objectives of the employer.

### CAREER SUMMARY

Detail-oriented Medical Billing Officer who is dedicated to making sure that an invoice represents the real charges accrued. Adept at creating an accurate billing statement following invoicing protocol and Adjudication guidelines. Large experience of 10 years in health care sector and contracting company.

### EDUCATIONAL QUALIFICATION

Bachelor of Commerce (**B.Com**): Passed out from Calicut University, Kerala in 2009.

### OTHER QUALIFICATION

- Underwent comprehensive training in Medical Coding and Medical Billing.
- MS Office
- Tally 9 and Peachtree Accounting Software
- Oracle

### PROFESSIONAL EXPERIENCE

- Worked as **Senior Medical Billing Officer** at NMC Specialty Hospital since May 2009 to September 2018.
- Worked as a Document Controller in **Energoprojekt** Group, Doha, Qatar from January 2007 to December 2007.

## **JOB RESPONSIBILITIES**

### ***As a Billing Officer at N.M.C Specialty Hospital:***

- *As an Assistant Accountant (From May 2009 to April 2011):*
  - Preparing payment receipt, journal vouchers, invoices, purchase orders and follow up.
  - Ledger posting, bank reconciliation, monthly trial balance, monthly profit and loss account.
  - Adroit in maintaining and preparing financial statements, expense analysis, reconciliation and analysis of various accounts.
  - Finding out the outstanding amount, informing customers regarding the overdue and ensuring their payment within the stipulated period.
- *As a Billing Administrator (From May 2011 to April 2014)*
  - Responsible for billing all the services avail by the patient to insurance companies with proper billing methodology by verifying CPT & ICD Codes, Price, Authorization, Patient Insurance ID, Card Expiry etc. before submitting the claim to the insurance company to avoid the rejection.
  - Prepares and submits claims to various insurance companies through Green Rain Messenger (HAAD Published Claim Submission Tool).
  - Timely submission of both Outpatient and Inpatient claims to various Insurance companies
  - Processed claims to various Insurance companies and third party payers such as Daman, ADNIC, AXA, NAS, NGI, Oman, Pentacare, Nextcare, Neuron, Neuron NMC, Maxcare, Aetna, Albuhaire, Amity, Almadallah, Al Dhafra, FMC, Inayah, Alico(Metlife), Mednet, MSH, Saico, Aafiya and UAE University.
  - Co-ordinated with team members, Registration team and Insurance team for clean claim submission.
  - Co-coordinating with Coders for correct billing as per ICD 9 ICD 10 and CPT 3
  - Submission of pharmacy claims as PBM and non PBM in line with HAAD guidelines.
  - Accepted various methodologies to increase revenue as per the instruction from supervisors.
  - Monitoring & ensuring that invoices are attached with all supporting documents i.e. E-claim form, COT, copy of lab reports. Radiology reports, discharge summary and all other related documents for the Non E-claim (TPA) Submission Insurance Companies.
- *As a Claim Submission Officer (From May 2014 to April 2015)*
  - Generating Test XML's and uploading to Greenrain & fixing Errors.
  - Generating production XML's and submitting in Greenrain.
  - Timely Submission of Medical Claims to Insurance companies.
  - Downloading and updating all remittance advices received from various payers through Greenrain messenger.
  - Providing necessary training & Support to Billing Staff & New Staff.

- Monitoring and ensuring that services availed by the patient are billed to the insurance companies on Daily, Ten Days or monthly basis as per the insurance protocol.
- *As a Claim Resubmission Officer (May 2015 to April 2016)*
  - Analysis of Outpatient and daycare denials. To identify the exact rejection reason and fix the billing and coding errors before resubmission.
  - Re submission of rejected claims to Insurance companies through E-claim & uploading XML's in Greenrain.
  - Periodical meeting with insurance companies to resolve billing issues, controlling rejections & to clear off the outstanding.
  - Co-ordinate with Insurance department, Receptionists, Billing Officers, Medical Coders, Nurses & Doctors for effective resubmission.
  - Communicate with Insurance companies if repeated rejections are noted.
  - Notify the superiors when denial trends are identified and take appropriate steps to rectify and resubmit the claims.
- *As an Accounts Reconciliation Officer (May 2016 to August 2016)*
  - Matching of Bills (cheque received from insurance company's tally the bill wise amount settled, pending bills take up with insurance companies).
  - Periodical outstanding statement sending to insurance companies for the payment follows up.
  - Clearing off all the outstanding from insurance company & issuing signing off letter for the closer of particular year.
  - Updating Head office for payment receivables & the latest updates on policies & procedures of insurance companies.
  - Coordinating with various departments for E-Claims set up and troubleshoots. Performs related duties as assigned.
  - Make independent decisions that require individual and/or team analysis, reasoning, and problem solving.
  - Ability to review claims to ensure appropriate completion of CPT, ICD-9, HCPCS, DRG and Price list.
- *As a Senior Billing Officer/Insurance coordinator (September 2016 to September 2018)*
  - Coordinate with Medical Coding department, Registration department, nursing department and Insurance department for clean claim submission.
  - Taking prior approvals and interaction with clinical staff, patients and other professional manner.
  - To guide and train billing team members regarding claim submission and finalization in compliance with HAAD adjudication guidelines and hospital policies.
  - To verify Inpatient claims for prior authorization, co-payment/co-insurance and member eligibilities prior to Greenrain submission.
  - To coordinate with Corporate Network team for contracting and pricing issues
  - To update the price list as per agreed tariff and inform concerned HOD and team members.
  - To identify the billing errors, report to superiors and fix the errors.
  - To receive feedback from resubmission team for improvement of claim submission.

**PERSONAL DETAILS**

Date of Birth : 14.12.1985  
Religion : Hindu  
Marital Status : Married  
Nationality : Indian  
Visa status : Visit visa (valid until January 2019)

**PASSPORT DETAILS**

Passport No : N8789007  
Place of Issue : Abu Dhabi  
Date of Issue : 14.08.2016  
Date of Expiry : 13.08.2026

**LANGUAGES KNOWN**

English, Malayalam, Hindi

**PERSONAL ATTRIBUTES**

- Communication skills: Effectively communicate with team members, superiors and subordinates.
- Management skills: Effectively manage tasks given within timeframe. Inspires the team to complete the task in a proper and accurate manner.
- Ability in decision making.
- Willingness to learn and rapid in learning

**DECLARATION**

All the above mentioned statements are true to the best of my knowledge and belief.

**JithaMol Balakrishna**