



# SHAHINA

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**Nationality:** Indian

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## SUMMARY

Highly skilled and detail-oriented Certified Professional Coder (CPC) with extensive experience in ICD-10-CM, CPT, and HCPCS coding. Adept at medical coding, insurance coordination, and compliance with UAE healthcare regulations. Strong ability to ensure accurate claim submissions, reduce denials, and maximize reimbursements. Seeking a challenging Medical Coder position in Dubai to contribute expertise in coding accuracy, claims processing, and revenue cycle management.

## WORK EXPERIENCE

### Medical Coder / Insurance Coordinator

#### Advance Care Prosthetics & Orthotics Center, Abu Dhabi | April 2024 – Present

- Assign accurate ICD-10-CM, CPT, and HCPCS codes for medical procedures and diagnoses.
- Review patient medical records to extract relevant clinical information and ensure compliance with coding regulations and industry standards.
- Process insurance claims, verify eligibility, and obtain pre-authorizations for procedures and treatments.
- Investigate and resolve claim denials, billing discrepancies, and ensure proper reimbursement for healthcare services.
- Collaborate with healthcare providers, insurance companies, and administrative teams to ensure timely and accurate coding submissions.
- Conduct coding audits to identify areas for improvement and ensure optimal billing practices.
- Maintain up-to-date knowledge of UAE healthcare laws, insurance policies, and industry best practices.
- Train and educate medical staff on coding guidelines and documentation best practices.

### Medical Coder

#### Champions Group, Bangalore, India | September 2023 – January 2024

- Coded disease and injury diagnoses in inpatient and outpatient settings.
- Applied HCC risk adjustment coding and ensured compliance with coding guidelines and medical necessity requirements.
- Reviewed radiology, pathology, and laboratory reports to accurately assign supporting diagnosis codes.
- Maintained a 99% coding accuracy rate, reducing claim rejections and delays in payments.
- Worked closely with physicians and billing departments to improve documentation accuracy and streamline claim approvals.

### Medical Coder

#### Optum XL Health, Bangalore, India | January 2022 – May 2023

- Assigned medical codes based on ICD-10 and CPT guidelines, ensuring compliance with insurance and governmental regulations.
- Conducted chart audits and documentation reviews to ensure complete and precise coding.
- Ensured HIPAA compliance and maintained strict confidentiality of patient records.
- Assisted in revenue cycle management (RCM) by reducing denials and improving reimbursement rates.
- Provided coding education and guidance to physicians and medical staff to enhance documentation quality & accuracy.

## EDUCATION

**Diploma in Medical Coding** – Cigma Medical Coding, Kochi, Kerala (2021)

**Bachelor's Degree in English Literature** – Calicut University, India (2016 – 2019)

## CERTIFICATIONS & LICENSE

**AAPC Certified Professional Coder (CPC)** – Member ID: 01931638

## SKILLS

- |   |  |
|---|--|
| ✓ ICD-10-CM, CPT, and HCPCS Level II Coding         | ✓ Medical Terminology & Compliance Regulations |
| ✓ Medical Billing & Insurance Claims Processing     | ✓ Denial Management & Claims Resubmission      |
| ✓ Revenue Cycle Management (RCM)                    | ✓ Attention to Detail & Analytical Skills      |
| ✓ Electronic Health Records (EHR) & Data Management | ✓ HIPAA Compliance & Confidentiality           |
| ✓ Pre-authorization & Insurance Verification        | ✓ Speed Typing & Strong Communication Skills   |

## ADDITIONAL INFORMATION

**Languages:** English, Hindi, Malayalam.

**Visa Status:** Employment Visa.