



Shahana Sherin K M

Certified Professional Coder

Member Id: 02035684

Certified Professional Coder (CPC) with 2 years of experience in medical coding and healthcare documentation. Skilled in assigning accurate ICD-10, CPT, and HCPCS codes for various diagnoses and procedures. Experienced in audits, quality checks, and revenue cycle processes. Seeking to contribute my knowledge and accuracy in a healthcare setting focused on compliance, efficiency, and patient care.

Contact

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Education

2018-2021

BACHELOR OF ARTS IN ENGLISH LANGUAGE AND LITERATURE

Calicut University

2016-2018

HIGHER SECONDARY EDUCATION - SCIENCE

Kerala Board Examination

Strength

- Hard Working
- Communication Skill
- Patience
- Leadership
- Helping Mentality

Language

English

Malayalam

Arabic

Tamil

Experience

MEDICAL CODER

OPTUM HEALTHCARE & TECHNOLOGY | 5/2023 - 3 / 2025

- **Processed over 700+ patient records per month with 98% accuracy**, ensuring proper reimbursement and compliance.
- Collaborated with physicians and healthcare teams to **resolve coding discrepancies**, improving claim acceptance rates by **15%**.
- Conducted detailed chart audits, reducing coding errors by 90% and enhancing documentation quality.
- Stayed updated with **ICD-10, CPT, HCPCS changes**, and regulatory guidelines, ensuring compliance with the latest coding standards.
- Reviewed and analysed medical records and clinical documentation to ensure proper coding and adherence to CMS and payer guidelines .
- Trained junior coders and assisted in **implementing process improvements** that increased workflow efficiency by **25%** .

Professional Qualifications

MEDICAL CODING

CARDEA HEALTHCARE SOLUTION MALAPPURAM | 2022 - 2023

Medical coding is the process of translating medical diagnoses, procedures, and other medical services into alphanumeric codes for billing and reimbursement purposes. Medical coders use standard classification systems, such as ICD-10-CM, CPT, and HCPCS, to assign codes to medical services. These codes are then used by healthcare providers, insurance companies, and government agencies to process claims and reimburse healthcare services. Medical coding requires attention to detail, knowledge of medical terminology and anatomy, and familiarity with coding guidelines and regulations. It is an essential part of the healthcare industry, ensuring accurate billing and reimbursement for medical services.

Technical Skills

- ICD-10-CM, CPT, HCPCS Level II Coding
- Medical Billing & Insurance Claim Processing
- Patient Data Abstraction
- Knowledge in AAPC coding guidelines
- Resolve Claims Discrepancies
- Knowledge in Insurance coding guidelines
- Medical Terminology
- Time Management
- Audit & Quality Assurance