



FATHIMA T

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PROFILE

Results-driven CPC-Certified Medical Coder with over 3 years of experience in medical coding, insurance coordination, and claims management. Proficient in ICD-10-CM, CPT, and E&M coding, with a strong understanding of medical terminology, billing guidelines, and regulatory compliance. Seeking an opportunity to contribute expertise in accurate coding, claims processing, and revenue cycle optimization.

KEY SKILLS

- ICD-10 CM Coding
- CPT Coding
- Pre-Approvals Management
- HIPAA and Patient Confidentiality
- Claim Submission and Follow-Up
- Evaluation and Management Coding
- Medical Terminology Expertise
- Anatomy and Physiology Knowledge
- Healthcare Insurance Coordination
- Coding Audits and Quality Analysis
- Prior and Pre-Authorization Handling
- Medical Billing Error Resolution
- Introduction to Insurance
- Claims Reconciliation
- Payment Processing
- Billing and Revenue Cycle
- Regulatory Compliance
- Workflow Optimization

WORK EXPERIENCE

Senior Medical Coder

February 2023 – December 2024

Optum Health & Technology India Pvt Ltd |
Chennai, India

- Conducted eligibility verification to ensure accurate claim processing and reduce errors.
- Coded claims and managed prior/pre-authorizations in compliance with insurance guidelines.
- Processed billing procedures in line with industry standards to optimize accuracy and efficiency.
- Submitted and resubmitted insurance claims with attention to detail to increase approval rates.
- Performed account reconciliation to resolve discrepancies and ensure accurate financial reporting.
- Applied E&M (Evaluation and Management) coding to determine appropriate claim levels and classifications.
- Processed electronic claims for timely reimbursement to insurance companies and payers.
- Resolved claim rejections, denials, and discrepancies with attention to detail.
- Managed claim submissions and resubmissions for accurate processing.
- Conducted internal audits and participated in QA reviews to maintain coding accuracy.
- Managed Electronic Health Records (EHR) systems for accurate data entry and claim submission.
- Collaborated effectively in a team environment, supporting department goals and maintaining productivity.

Medical Coder – HCC Coding

April 2022 – February 2023

Episource India Pvt Ltd |
Chennai, India

- Analyzed and coded patient records with expertise in medical terminology and guidelines.
- Conducted audit reviews and provided actionable feedback to improve coding accuracy and compliance.
- Researched and implemented up-to-date coding standards to ensure alignment with industry practices.
- Designed and delivered training programs to educate coders based on audit findings and industry updates.
- Performed peer review audits to maintain consistency and uphold quality benchmarks.
- Liaised with insurance companies to address invoice discrepancies and provide timely updates.
- Demonstrated expertise in ICD, CPT, and E&M coding to ensure precise billing for medical procedures.
- Improved revenue cycle efficiency through effective claim processing and payment follow-ups.
- Developed coding processes to meet organizational goals and reduce claim rejections.
- Identified and resolved coding errors through comprehensive audit analysis and corrections.

EDUCATION

Medical Coding

Sparkz Infotech | Chennai,
India

October 2024 – January 2025

Bachelor of Science (BSc) Botany

Govt Brennen College, Kannur University |
Kerala, India

June 2016 – April 2019

PROFESSIONAL CERTIFICATION

AAPC CPC Certified

- AAPC Member ID: 02318301
- CPC Score: 85%
- Member of AHIMA

ACHIEVEMENTS

- **Best Employee Award** | (August, September, October) 2024

ADDITIONAL INFORMATION

- **Software Proficiency** : Salesforce, 3M, Use of encoders (Optum 360, Episource encoder, Encoder Pro), AdvancedMD, MediCode, MS Office Suite (Word, Excel, PowerPoint).
- **Language** : English, Hindi, Arabic, Malayalam, Tamil

PERSONAL DETAILS

- Nationality : Indian
- Birth Date : 09/09/1998
- Marital Status : Married
- Visa Status : Resident Visa