

KOUSHIK K

Medical Coder | Member ID: 02125485

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SUMMARY

Detail-oriented and certified HCC Medical Coder skilled in accurately reviewing and coding clinical documentation to ensure compliance with healthcare regulations and maximize reimbursement. Proficient in ICD-10-CM, CPT, and HCC coding guidelines. Experienced in collaborating with healthcare providers to improve documentation quality and support risk adjustment initiatives. Strong knowledge of medical terminology, healthcare coding software, and regulatory standards. Committed to maintaining high accuracy and meeting deadlines in a fast-paced environment.

WORK EXPERIENCE

UAE RCM Internship

May 2025 – June 2025

- Gained hands-on experience across the full RCM cycle: patient registration, insurance eligibility, coding, billing, claims submission, denial management, and collections.
- Verified insurance coverage for major UAE payers (Daman, Thiqa, NAS) and supported claim validation per HAAD/DOH guidelines.
- Assisted with CPT/ICD-10 code selection, including awareness of general CPT exclusions and payer-specific rules.
- Processed claim resubmissions and reconciliations using Shafafiya and Riayati platforms.
- Participated in denial analysis, rejections handling, and corrective resubmissions.
- Exposed to dental, pediatric, and specialty billing workflows, ensuring coding accuracy and compliance.
- Strengthened core knowledge of anatomy, physiology, and medical terminology to support billing accuracy.

HCC Medical Coder

January 2024 – May 2025

Clarus RCM

- Reviewed and abstracted medical records to assign accurate ICD-10-CM diagnosis codes under HCC and CMS risk adjustment guidelines.
- Executed both retrospective and prospective coding for Medicare Advantage and Commercial plans, ensuring complete and compliant documentation.
- Conducted audits of clinical documentation to validate coding accuracy and ensure regulatory compliance.
- Utilized EMR systems (Epic, Cerner) and internal platforms to manage coding assignments with precision and efficiency.
- Collaborated with providers and audit teams to clarify documentation and support coding review processes.
- Maintained current knowledge of HCC model updates (e.g., v28), risk adjustment methodologies, and coding regulations.
- Ensured full HIPAA compliance and supported data privacy standards.
- Contributed to major risk adjustment projects, enhancing coding quality and compliance outcomes.
- Provided training and mentoring to new coders, helping accelerate team readiness and reduce onboarding time.
- **Projects Handled:** Cigna CRA, Aetna MRA, Anthem MRA, Centene CRA, Centene MRA, Oscar CRA

PROFESSIONAL SKILLS

- ICD-10-CM & CPT Coding
- Hierarchical Condition Categories (HCC) Coding
- Risk Adjustment Coding (Medicare Advantage & Commercial)
- Medical Record Review & Abstraction
- Clinical Documentation Improvement (CDI)
- EMR/EHR Systems (Epic, Cerner, Meditech)
- Coding Audits & Compliance
- HIPAA & Data Privacy Regulations
- Medical Terminology & Anatomy
- Revenue Cycle Management (RCM)
- Quality Assurance & Accuracy Monitoring
- Payer Guidelines & Regulatory Compliance
- Prospective & Retrospective Coding
- Time Management & Prioritization
- Microsoft Office Suite (Word, Excel, PowerPoint)

EDUCATION

- **Bachelor of Commerce (B.Com)**
Canara College, Mangalore | 2022

CERTIFICATION

- **Certified Professional Coder (CPC)**
Cardea Healthcare Solutions, Mangalore | 2023

LANGUAGES

- English (Proficient)
- Hindi (Proficient)
- Kannada (Proficient)
- Malayalam (Native)
- Tamil (Intermediate)
- Tulu (Intermediate)

PERSONAL INFO

- Nationality: Indian
 - Date of Birth: 21/03/2002
 - Gender: Male
 - Marital Status: Single
 - Passport Number: B6624321
 - Visa Status: Visit Visa
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