

Mathumitha.S

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Languages known: Tamil, English,
Malayalam, Hindi.

DOB: 28.05.1992

Visa status: Employment visa

Objective :

Achieve a challenging position in my carrier and spend my knowledge for the development of organization as well as develop my own skills.

Education :

- **Master of Science in Information Technology (Msc IT)** from Madras University on 2018 in India and done the project of **Complaint Forum** Using Node JS and MongoDB with Interactive design and development.
- **Bachelor of Computer Application** from MMES WOMEN'S ARTS AND SCIENCE COLLEGE/ Thiruvalluvar University on 2012 in India and done the project of **College Site** using .net and SQL.

Software Knowledge:

Expertise/Domain - ASP.Net, C#, SQL, C, C++, JAVA, VB.

Operating System - Windows Family, UNIX, MAC
MS Office.

Certificate of Completion:

ASP.Net in EDOXI Institute, Dubai on 8th August-2023

- Thorough knowledge of web-based application development, ASP.NET web programming, procedural and object-oriented code, debugging and troubleshooting methods, SQL server and visual development environment, code documentation, SDLC, web standards, web browser compatibility and web Forms.
- Expertise in C#, server-side programming languages like ASP.NET, MS SQL Server as well as web programming frameworks.
- Proficiency in Visual Studio, MS Office and database applications, as well as standard web programming languages like HTML, CSS and JavaScript.
- Ability to understand user requirements and technical specifications as well as design and develop web pages accordingly.
- Strong analytical skills required to resolve or troubleshoot technical issues and make effective decisions

- Solid organizational skills along with the ability to accomplish tasks within specified deadlines and budgets.

Work Experience:

Company: Mega Scan Diagnostic center, Dubai, UAE (Nov-2020 to till).

Designation: Insurance Coordinator and Operations Lead.

Medical Insurance pre-approvals, submissions, resubmission, reconciliation, maintaining the front office and operations lead.

- Taking pre-approvals as per the diagnosis and CPT guidelines through either DHPO or Insurance portals.
- Should be enter the patient and insurance details as per the approval.
- Before submitting the claims should be recheck the insurance details(like visit date, auth#, cpt, diagnosis,...)as per approval.
- Submitting all insurance claims on a monthly or weekly basis through DHPO or software (XML).
- Managing the daily sales, monitoring the requirements, accounts and petty cash.
- Finding innovative ways to optimize the level of healthcare.
- Developing departmental goals and objectives for workers to improve the patient experience
- Recruiting, training the new staffs, and supervising the healthcare workers.
- Compromising the employee and patient needs.

Company: Viber Soft Technology, Ranipet, Tamilnadu-India.

Position : Web Developer (May-2016 to Aug-2016)

3 Months of experienced in web development processing.

- According to our client expectation, should be plan the website and start to design and managing the websites using .Net ,CSS, Javascript and HTML.
- Create basic layouts with HTML and CSS.
- Using validation controls for the client satisfaction and ensure the unauthenticated.
- Finally host and validating test our created projects before giving to the clients.

Company: Global Healthcare Billing Partners, Vellore, Tamilnadu -India.

Position : Executive in Payment Posting (June 2013 to May 2015 and Sep-2016 to Feb 2020)

6 years of experienced in Medical Billing Process (Outsourcing US Projects).

Insurance Verification and Demographics:

- Received Patient and Insurance details in ADT Portal and Verified the patient eligibility via online like Ahcccs, Gateway, Availity etc.
- Need to check the insurance eligibility before entering the patients details in software.

Charges:

- Follows HIPAA guidelines in handling patient Information.
- Submit Insurance claims to clearinghouse or individual insurance companies electronically or via paper CMS-1500 Form.
- Should be enter the information necessary for insurance claims such as patient, Insurance Id#, diagnosis, modifiers and provider details.

Payment posting and AR Analyst:

- Post Patient and Insurance payments using Medical Claim Billing Software.
- Payment received either in EOB (Explanation of Benefits) or ERA (Electronic Remittance Advice) and should be posted with in Time Filling Limit (TFL).
- Submit the claims and following up with Insurance carriers on Unpaid or rejected claims.
- Codes denials and reasons for non-payment in order to accurately post to patient accounts.
- Follows up and identifies with the appropriate Collection Specialist regarding all denials and non-payments contained on remittances received.
- Researched and resolved denials and rejections in a timely manner.
- Answer patient questions on patient responsibility portions like Deductible, Coinsurance and Copay, Write-Off etc.,.

Declaration:

I hereby declare that all the information mentioned above is true to the best of my knowledge.

Place: Dubai – UAE.

Yours Sincerely,
Mathumitha