SALMA AGHA

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POST GRADUATE PROFESSIONAL

HR ADMINISTRATION ACCOUNTING INSURANCECLAIMS CLIENT HANDLING

Over 3 year's specific expertise in the, Accounting, Insurance Claims and client handling across India & Overseas.

A mature and competent professional, well experienced exhibiting a high level of personal commitment and focus on meeting challenges and achieving business and objectives Deft in implementing claims from Insurance companies.

Experienced and skilled at working in multinational companies for major clients, while at the same time creating effective working relationships. A solid track record of achieving objectives in respect of insurance claim issues along with valuable inputs on claims.

Expertise in dealing with Insurance Co. and Pharmacy Stores. Adroit in applying technics in evaluating the insurance claims. Possess strong skills in ensuring control & producing reports senior management.

CORE COMPETENCIES

- Excellent communication skills, interactions with Insurance Co. and Pharmacy Stores.
- Fair knowledge about Taxation, Account Receivables and all other financial modules.
- Client oriented approach and time-bound work procedure helps achieve and exceed targets.

OCCUPATIONAL CONTOUR

Since Dec 2015 to Oct 2016 with COGNIZANT, Hyderabad, Telangana as Senior Process Executive on Meddata process

- Posting payments, adjustments and notes from Explanation of benefits (EOB).
- Posting personal payments from patients. Reconciling Electronic Remittance Notices.
- Applying quick notes for message to print on patient statements. Labelling payments batches according to policy.
- Reconciling posted batches with control sheet. Closing balanced batches on daily basis.
- Maintaining document transactions for adequate audit trail.
- Preparing EOB's for posting according to department procedures.
- Preparing daily, monthly and yearly reports as assigned.
- Brining adjustments discrepancies to the attention. Assisting higher level managers and specialists as needed.
- Receiving, sorting and reviewing payments from insurance carriers, patients and other sources.
- Identifying under payments and margin loss claims and providing information to others for collection process.
- Taking initiative to collect payment, which includes contacting patient by phone. Correcting and resubmitting claims to second and third party payers.
- Maintaining patient and company confidentiality adheres to HIPAA guidelines/regulations.
- Preparing refunds list for overpayment and act appropriately.

Remarkable Accomplishments:

- Recognized by superiors for exceptional leadership skills and advanced knowledge of medical claims investigations, Medicare, Medicaid and Tricare.
- Increased patient satisfaction 20%, referral rates 5%.
- Regularly covered others shifts in their absence & extended working hours to ensure timely delivery of care.

Jun 2014 to Dec 15 with GENPACT, Hyderabad, Telangana as Process Executive on Walgreens process

- Receiving claims from Insurance companies for auditing of paid bills; reviewing unpaid and denied claims; and making sure they are processed and settled by the insurance companies. Also supported the credit balances team to reduce the backlog in a special project.
- Assess unpaid claims and research denials for timely payment before the billing window closed.
- Responsible for collecting, posting and managing account payments and following up with insurance companies.
- Performs various collection actions including contacting insurer by phone, correcting and resubmitting claims to third party payers.
- Using of diagnostic codes (**ICD-9),** coding & billing guidelines and standardized procedures for medical claims.
- Billing paper claims using patient demographic and insurance information.
- Investigate rejected claim to see why denial was issued.
- Support and coach staff and deliver performance updates to them.
- Maintaining strict confidentiality; adheres to all **HIPAA** guidelines/regulations. Worked in denial management process.
- Gathering adequate documentation and verifying the accuracy of claims for auditing.
- Familiar with private carriers and commercial insurances.

Remarkable Accomplishments:

- Achieved excellence award in Feb 2015 for dedicated attitude towards work
- Improved the accuracy of auditing of claims & **3%** Customer satisfaction annually.
- Identified and utilized variety of learning tools like **Store net, Websdl, Pars** to retrieve patient data.

SCHOLASTICS

- Master of Business Administration (**MBA**) in Human Resource from Nigama College, Karimnagar in 2016.
- Bachelor of Commerce (**B.Com**) from Apoorva Degree College, Karimnagar in 2014.

TECHNICAL SKILLS

- Conversant with MS Office.

PERSONAL VITAE

Marital Status	:	Married
Date of Birth	:	25th January 1993
Nationality & Religion	:	Indian - Islam
Passport No & Expiry	:	M 2395780 & 28th September 2024
Languages Known	:	English, Hindi, Urdu and Telugu
Present Address	:	Flat no - 114, Al Zarooni Building, Al Raffa, Al Mankhool, Dubai, U.A.E
Permanent Address	:	D.No - 2/339-c, Akkayapalli, R.V.Nagar (Post), Kadapa, Andhra Pradesh, India - 516003.