Henrietta Quarles-Bamidele

Senior Claims Processor, Medical and Dental

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SUMMARY

Claims processor with 6 years adjudicating medical and dental claims for a regional health plan and a third-party administrator. Processes about 95 claims a day at 99.2% financial accuracy, works the pended queue for coordination of benefits and itemized bill reviews, and trains new processors on plan rules.

EXPERIENCE

Senior Claims Processor — Mispillion River Health Plan

Dover, DE · Feb 2022 – Present

- Adjudicate about 95 professional and facility claims a day against benefit rules, with 99.2% financial accuracy in quality audits.
- Work a queue of about 300 pended claims a week, including coordination of benefits and itemized bill reviews.
- Cut average turnaround on pended claims from 14 to 8 business days by sorting the queue by reason code each morning.
- Trained 7 new processors on plan rules and the claims system over 2 hiring classes.

Claims Processor — Murderkill Valley Benefits Administrators

Camden, DE · Aug 2019 – Jan 2022

- Processed about 110 dental claims a day for 40 self-funded employer plans.
- Kept procedural accuracy at 98.7% or higher in 10 straight quarterly audits.
- Found about $62,000 in duplicate submissions in 1 year by checking prior claims history.

SKILLS

Claims work: Adjudication, benefit verification, pended claim review, coordination of benefits, adjustments, appeals support

Coding: CPT, HCPCS, ICD-10-CM and CDT codes, modifiers, place of service, revenue codes on facility claims

Quality: Financial and procedural accuracy, duplicate checks, audit preparation, written procedure updates

Tools: Claims adjudication systems, eligibility lookups, imaging and workflow queues, spreadsheets

EDUCATION

Associate degree in Health Information Technology, Delmarva Coastal Community College, 2019

Certified Professional Coder, 2021

Fictional example by FindAJobAI: the person, employers and numbers are invented.