

SUMMARY

Detail-oriented professional with experience in customer service, data management, and administrative support within the financial and healthcare sectors. Skilled in handling high-volume inquiries via email, chat, and phone. Proficient in Microsoft Office, Salesforce, Zendesk, and data analysis. Holds a Bachelor's in Mathematics, with strong analytical and organizational skills suited for complex tasks and process improvement.

WORK EXPERIENCE

CustomerService Representative

Pasig City

Nov 2021 - Jun 2022

- Respond to inbound customer inquiries via phone, email, chat, or mail regarding credit reports, disputes, fraud alerts, security freezes, and other financial concerns.
- Process consumer requests for disclosures, disputes, fraud alerts, and security freezes using internal systems.
- Document all customer interactions accurately in the system while maintaining confidentiality and data security.
- Collaborate with internal departments to resolve complex issues and escalate cases when necessary.
- Meet or exceed key performance indicators (KPIs) related to quality, productivity, adherence, and customer satisfaction.
- Participate in ongoing training and development programs to stay updated on products, services, and procedures
- Utilized CRM tools to track customer interactions, improving follow-up success.
- Conducted product demonstrations or upsells..

Aug 2022 - Feb 2023

- Analyze and process healthcare claims, including registration, editing, verification, evaluation, and litigation support.
- · Managed and processed electronic submissions and healthcare claims with accuracy, demonstrating strong attention to detail and efficiency in handling sensitive data.
- Performed accurate data entry and routed information appropriately, ensuring seamless workflow and timely reporting.
- Match fax/clinical records with appropriate cases and consolidate inputs for reporting.
- Verify eligibility and billing data by capturing all required information.
- Collaborate with internal teams to ensure accurate and timely data processing.
- Collaborated with cross-functional teams to enhance patient care outcomes.
- Drove continuous improvement projects, enhancing overall operational performance.
- Transformed complex health data into actionable insights for decision-making.

- Provide high-level service for both inbound and outbound calls.
- Educate customers on U.S. health plan benefits for medical, dental, over the counter and authorization to promote optimal health outcomes.
- Investigate and resolve escalations, issues on their claims, and complaints using all available resources, including policies, procedures, and practices.
- Serve as a primary contact between customers, health plans, service centers, and functional areas.
- Provide technical assistance to members with accessing and managing their online accounts.
- Sending reminders to patients a day before appointments and offering free personal remote assistance to new patients.
- Assisting patients in setting appointments with preferred doctors, canceling/rescheduling, billing questions, and other related tasks.

EDUCATION

Accountancy and Business Management (ABM)

Graduate of Bachelor of Science in Mathematics

SKILLS

- Microsoft Office Suite (Word, Excel, Outlook, PowerPoint)
- · Customer Service
- Email & Chat Support
- CRM Tools (e.g., Salesforce, Zendesk, internal tic
- · Data Entry & Data Management
- Trend & Data Analysis
- Dispute Resolution & Escalation Management
- RingCentral Tool

CHARACTER REFERENCE

