

## MARY JASMINE P.

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#### **OBJECTIVE**

To become associated with a company where I can utilize my skills and gain further experience while enhancing the company's productivity and reputation.

WORK EXPERIENCE

ne Ayala, Ayala Avenue, Makati City

Subrogation Analyst November 2021 – Present

The Subrogation Analyst investigates multiple sources of health insurance data to identify possible accidents and/or physical injuries.

- Investigates and determines whether medical insurance claims are recoverable or non-

recoverable.

- Communicates and negotiates with insurance adjusters and attorneys.
- Utilizes computer systems to accurately document collected information.
- Applies organizational, analytical, and time management skills to manage daily workflow.
- Reviews and understands healthcare contracts/policies.

McKinley Hill, Taguig City

Fraud Analyst August 2019 – November 2021

- Perform data analytics to identify fraud, waste, or abuse in claim data.
- Responsible for investigating, researching, and analyzing medical records in order to detect fraudulent, abusive or wasteful activities/practices.

- Use knowledge of health care coding conventions, fraud schemes, general areas of vulnerability, reimbursement methodologies and relevant laws to find suspicious patterns in claims data and other sources. Develop and maintain general knowledge of healthcare reimbursement policies
- and state and federal regulations related to healthcare fraud and abuse. Work cooperatively and constructively with team members, including mentoring, training, and assisting team
- \_ members as required. Maintain security and confidentiality of all protected health information encountered in performance of duties.

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### Global One Center

Coverage Determination Analyst December 2017 – April 2019

Coverage determination decision about whether a drug prescribed will be covered by insurance company and the amount customer needs to pay.

- Obtain prior authorizations; initiate requests, track progress, and expedite responses from

insurance carriers and other payers.

- Gather all necessary information from prescriber offices to complete authorization forms.
- Review prescription for accuracy of prescribed treatment regimen prior to submission of authorization.
- Perform call to prescriber office for status of authorization or request for additional information.
- Responsible for all documentation of authorization statuses into progress notes.

EDUCATION	
Tertiary	
	BS Education Major in English
	2013 – April 2017
Secondary	
	2009 – 2013
Primary	
-	2003 – 2009

## PERSONAL INFORMATION

Age

:

Birthday

Birthplace Gender

Language

Citizenship : Marital Status :

Religion:



### **QUALIFICATIONS**

Proficient in Microsoft Office (Word, PowerPoint, and Excel)

Highly organized and efficient

Efficient in handling the pressure

Strong interpersonal and motivational skills

Able to work unsupervised and learns fast with creativity

### **ACHIEVEMENTS**

Dean's Lister (S.Y. 2014-2015) Dean's Lister (S.Y. 2015-2016) President's Lister (S.Y. 2016-2017) Licensure Examination for Teachers

Passer (September 2017 Examination)

# CHARACTER REFERENCES

Leah Batalla

Accenture

Team Lead 0917-794-7921

Nikko Mediana

Taguig Science High School

Teacher I

0939-804-2319

Allen Vargas

**Optum Global Solutions** 

Team Lead

0917-186-8747

I hereby certify that the information contained in this resume is accurate and

complete to the best of my knowledge and belief.



Applicant's Signature