



MASON WILSON

Insurance Claims Specialist

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🌐 www.qwikresume.com

SKILLS

Claims Analysis Software



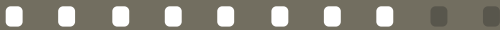
Policy Evaluation Techniques



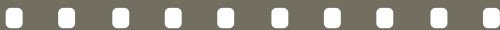
Fraud Detection Methods



Data Management Systems



Claims Processing Strategies



Team Collaboration



INTERESTS

★ Surfing

🌐 Martial Arts

👏 Community Service

👥 Blogging

STRENGTHS

⌚ Patience

🏔 Perseverance

📅 Planning

⚙ Positivity

LANGUAGES



English



Mandarin



French

ACHIEVEMENTS

★ Implemented a new claims tracking system that improved processing time by 25%.

★ Developed comprehensive training programs for new hires, increasing team efficiency by 15%.

PROFESSIONAL SUMMARY

Accomplished Insurance Claims Specialist with a decade of experience in managing and optimizing the claims process. Expertise in thorough claims analysis, compliance assurance, and effective communication with clients and insurers. Dedicated to enhancing operational efficiency and delivering superior service that aligns with organizational objectives.

WORK EXPERIENCE

Insurance Claims Specialist

📅 Feb / 2018-Ongoing

Pineapple Enterprises

📍 Santa Monica, CA

1. Reviewed and coordinated audits for insurance claims to ensure accuracy and compliance.
2. Evaluated claim documentation to determine coverage eligibility and settlement amounts.
3. Cross-referenced data from surveillance footage with medical reports for claim validation.
4. Conducted thorough investigations on suspicious claims, identifying and addressing potential fraud.
5. Synthesized findings into detailed reports for management review, enhancing decision-making.
6. Directed investigations by field teams, ensuring alignment with company standards.
7. Developed and implemented a quality assurance program, driving improvements in claims accuracy.

Insurance Claims Specialist

📅 Feb / 2015-Feb / 2018

Crescent Moon Design

📍 Portland, OR

1. Managed patient accounts throughout the claims process, ensuring timely and accurate submissions.
2. Handled denial management issues, improving resolution rates through effective follow-up.
3. Secured comprehensive registration data, facilitating efficient claims processing and pre-certification.
4. Calculated patient co-payments and deductibles accurately, enhancing client trust and satisfaction.
5. Maintained extensive knowledge of payer relations and claims adjudication procedures.
6. Ensured compliance with all aspects of revenue cycle operations and third-party reimbursement regulations.

EDUCATION

Bachelor of Science in Business Administration

📅 Feb / 2012 - Feb / 2015

University of Phoenix

📍 Seattle, WA

Focused on management principles and operational efficiencies within the insurance industry.