BC

Benjamin Collins

Medical Billing Specialist

Certified Revenue Cycle Representative with 6 years of experience coordinating billing operations across up to 12 clinics using Epic and eClinicalWorks. Audited weekly claim batches in Epic and identified coding mismatches, lowering billing errors from 8.43% to 5.17% of total submissions. Skilled in ICD-10 and CPT coding, charge entry and reconciliation, and denial management and appeals.

CONTACT INFORMATION

(608) 555-0125

divya.alvarado@example.com

Portage, WI 12345

KEY SKILLS

- ICD-10 and CPT Coding
- HCPCS Code Assignment
- Epic
- eClinicalWorks
- Microsoft Excel
- Denial Management and Appeals
- HIPAA Compliance
- Medicare and Medicaid Guidelines
- Charge Entry and Reconciliation
- Revenue Cycle Analysis

PROFESSIONAL EXPERIENCE

MEDICAL BILLING SPECIALIST | DRIFTLESS RIDGE PHYSICIAN GROUP, PORTAGE, WI
2023 – PRESENT

- Reduced average billing lag from 26 days to 11 days by restructuring charge-capture deadlines and daily reconciliation schedules across 9 clinics.
- Coordinated billing operations for 9 clinics spanning primary care, dermatology, and cardiology, standardizing submission timelines and payer follow-up protocols.
- Audited weekly claim batches in Epic and identified coding mismatches, lowering billing errors from 8.43% to 5.17% of total submissions.
- Expanded multi-site coordination from 9 clinics to 12 clinics after a practice acquisition, onboarding 3 new locations to the existing Epic charge-entry workflow within 37 days.

MEDICAL BILLING SPECIALIST | FOX BLUFF MEDICAL ASSOCIATES, BARABOO, WI
2021 – 2023

- Shortened billing lag by 13 days for a 6-clinic network by implementing same-day charge entry and automating eligibility verification through eClinicalWorks.
- Coordinated billing for 6 clinics, aligning coding standards and submission deadlines to reduce duplicate claim submissions by 74 per quarter.
- Reviewed and corrected HCPCS and CPT code assignments on outpatient encounters, decreasing billing errors from 9.14% to 6.02% within 8 months.
- Reconciled remittance records against posted payments each morning, clearing $7,680 in unresolved variances within 90 days of hire.

BILLING CLERK | PRAIRIE MARSH FAMILY MEDICINE, WISCONSIN DELLS, WI
2020 – 2021

- Entered charges and verified ICD-10 codes for scheduled and walk-in visits, keeping charge-entry errors under 7 per 100 claims across all 3 clinic locations.
- Coordinated billing intake for 3 clinic locations, collecting insurance cards and confirming Medicaid and commercial coverage before appointments.
- Filed electronic claims to Medicare and commercial payers within 24 hours of service, reducing average billing lag by 4 days during the first quarter.

EDUCATION

Associate Degree in Health Information Technology
Western Technical College, La Crosse, WI | 2018 – 2020

CERTIFICATIONS

Certified Revenue Cycle Representative, Healthcare Financial Management Association, 2021