

Hannah Glenn

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SUMMARY

Dedicated Medical Coder with over five years of experience in orthopedic and podiatry services. Proven record in assigning precise diagnostic and procedure codes that comply with Medicare guidelines. Manages extensive workloads efficiently under pressure while upholding coding standards. Committed to mentoring colleagues and continually enhancing qualifications through ongoing education. Proficient in generating coding queries that clarify physician documentation, contributing to improved accuracy across departments. Possess strong teamwork skills that encourage collaboration, ensuring all stakeholder needs are addressed promptly and effectively. Eager to bring passion for coding and dedication to high quality to a dynamic health organization.

EXPERIENCE

Senior Medical Coder

January 2021 - Present

HealthPlus Medical Group

Atlanta, GA

Experienced Senior Medical Coder supervising outpatient coding operations focused on orthopedic and podiatry services. Plays a critical role in maintaining compliance with established coding conventions and billing requirements.

- Assigned diagnostic and procedure codes while ensuring alignment with official coding guidelines.
- Managed a caseload exceeding 300 records weekly, prioritizing timely processing for efficient billing.
- Collaborated closely with healthcare providers by generating coding queries to clarify any documentation discrepancies.
- Remained current on changes to coding regulations, proactively implementing necessary adjustments within the team.
- Mentored junior coders, providing assistance with complex coding issues and promoting collaborative growth.
- Conducted audits revealing opportunities for improvement, leading initiatives to enhance process efficiency.

Medical Coder

June 2018 - December 2020

CareFirst Health Services

Atlanta, GA

Served as a Medical Coder specializing in various medical specialties, particularly orthopedic and podiatric procedures. Contributed significantly to quality assurance initiatives through rigorous coding practices.

- Assigned CPT and ICD-10 codes across diverse medical scenarios, primarily concentrating on orthopedic treatments.
- Achieved near-perfect accuracy rates in coding audits, fostering department confidence and trust.
- Led training sessions bringing staff up to speed on recent coding developments and best practices.
- Employed Epic software adeptly, facilitating effective navigation through patient records and resolving coding denials.
- Consistently met urgent deadlines while juggling demands associated with high-volume workflows.
- Supported organizational changes in coding platforms by providing functional and practical feedback during transitions.

Junior Medical Coder

August 2016 - May 2018

HealthCare Associates

Atlanta, GA

Initiated a coding career working under seasoned professionals, providing critical support for assigning codes compliant with Medicaid guidelines within a growing healthcare environment.

- Assisted senior coders by preparing and maintaining accurate coding files aligned with national standards.
- Actively pursued ongoing education related to coding, taking initiative in staying abreast of industry changes.
- Participated in preliminary audits ensuring assigned codes met stringent coding benchmarks.
- Helmed administrative roles drafting necessary documentation and reports for management review.
- Engaged with interdisciplinary teams helping streamline processes, which reduced unnecessarily lengthy cycles.
- Contributed actively to performance reviews aimed at setting departmental goals, keeping a focus on continuous improvement.

LEADERSHIP & AWARDS

- Recognized for contributions to coding accuracy and operational excellence at HealthPlus Medical Group.
- Recipient of training excellence award at CareFirst Health Services for innovative educational workshops on coding updates.

EDUCATION

High School Diploma

2014

Atlanta High School GPA: N/A

Atlanta, GA

CERTIFICATIONS

- Certified Professional Coder (CPC) 📅 2021

TECHNICAL SKILLS

- **Coding Software:** Epic, Centricity, Meditech
- **Regulatory Standards:** HIPAA, Medicare Guidelines, ICD Standards
- **Office Tools:** Microsoft Excel, Microsoft Word, Google Docs
- **Database Management:** SQL, Microsoft Access, Oracle
- **Audit Practices:** Claims Auditing, Internal Auditing, Quality Checks
- **Professional Associations:** AAPC, AHIMA, PMI
- **Healthcare Systems:** Hospital Administration, Clinical Infrastructure, Revenue Cycle Management
- **Coding Methodologies:** Pro Fee Coding, Outpatient Coding, Service Level Agreements
- **Continuous Education:** Webinars, Workshops, SEMINARS
- **Mentoring Programs:** Onboarding, Leadership Labs, Peer Review

SKILLS

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|--------------------------------|--------------------------|-----------------------------------|------------------------------|
| • Medical Coding (CPT, ICD-10) | • Query Generation | • Documentation Review | • Training & Development |
| • Medicare Compliance | • Time Management | • Interdisciplinary Communication | • Patient Records Management |
| • Epic Systems | • Billing Practices | • Quality Assurance | • Compliance Standards |
| • Coding Audits | • Healthcare Regulations | • Work Queue Management | • Operational Efficiency |

PROFESSIONAL AFFILIATIONS

- Member of AAPC, engaging in continual professional development and networking with fellow coding experts.
- Participant in monthly coding seminars focused on updates and trends in health data management.

LANGUAGES

ADDITIONAL INFORMATION

Work Status : Authorized to work in United States. No sponsorship required.

REFERENCES

AVAILABLE ON REQUEST