

SRI BHAVANI P

SENIOR MEDICAL CODER | IMMEDIATE JOINER

CPC-certified Senior Medical Coder with approximately 4 years of experience supporting US healthcare revenue cycle operations, with expertise across Medicare Advantage, HCC risk adjustment, outpatient and inpatient coding, and Evaluation and Management (E/M) services. Experienced in interpreting clinical documentation, abstracting medical records, assigning ICD-10-CM, CPT, and HCPCS codes, and applying CMS-HCC V24/V28 and MEAT requirements to support compliant risk adjustment and reimbursement. Strong working knowledge of medical terminology, anatomy, physiology, EMR/EHR documentation, claims processing, denial management, provider queries, coding audits, insurance portals, and RADV audit readiness. Familiar with US healthcare compliance, HIPAA requirements, coding guidelines, and documentation standards, with additional exposure to UAE revenue cycle processes.



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[LinkedIn](#)

CORE COMPETENCIES

- Medicare Advantage & Risk Adjustment Coding
- ICD-10-CM, CPT & HCPCS Coding
- CMS-HCC Model V24 & V28
- Inpatient Coding
- Evaluation & Management (E/M) Coding
- Medical Record Review & Abstraction
- Clinical Documentation Review
- Quality Audits
- Outpatient Coding

CERTIFICATION

Certified Professional Coder (CPC) – AAPC | 2025

AAPC Member ID: 02305862

WORK EXPERIENCE

SENIOR MEDICAL CODER

ACCESSHEALTH CARE

June 2025 – July 2026

Chennai, India

- Reviewed and coded medical charts by accurately assigning ICD-10-CM and CPT codes for HCC risk adjustment, supporting compliant reimbursement and coding accuracy.
- Conducted comprehensive medical record reviews, clinical documentation assessments, and medical record abstraction to identify reportable diagnoses and support appropriate HCC capture.
- Performed accurate outpatient and inpatient coding by evaluating medical records and applying appropriate ICD-10-CM, CPT, and HCPCS codes in accordance with established coding guidelines.
- Applied E/M coding principles to determine appropriate levels of service based on medical necessity, clinical documentation, and documented patient care.
- Collaborated with healthcare providers to clarify documentation gaps, contributing to a 15% reduction in coding queries and improved coding accuracy.
- Maintained compliance with ICD-10-CM guidelines, HIPAA regulations, healthcare compliance requirements, and documentation standards across 100% of assigned records.
- Processed healthcare claims and utilized insurance portals to support end-to-end revenue cycle activities and timely resolution of coding-related requirements.

MEDICAL CODER

OPTUM HEALTH & TECHNOLOGY

September 2022 – May 2025

Chennai, India

- Reviewed and analyzed 55+ patient medical records per day across Medicare Advantage lines of business, assigning accurate ICD-10-CM codes based on clinical documentation.
- Applied CMS-HCC Model V24/V28 methodologies, Medicare Advantage risk adjustment principles, and ICD-10-CM coding guidelines during medical record review and HCC coding activities.
- Maintained 96% coding accuracy while consistently meeting daily productivity and quality audit benchmarks for Medicare Advantage risk adjustment operations.
- Evaluated clinical documentation and medical records to identify relevant diagnoses, supporting accurate risk adjustment, reimbursement, and overall coding quality.
- Worked closely with healthcare providers to clarify documentation requirements and strengthen coding precision, contributing to a 10% improvement in team audit scores.
- Maintained three consecutive years of coding compliance without violations while following applicable healthcare coding standards and regulatory requirements.

EDUCATION

BACHELOR OF SCIENCE IN NUTRITION AND DIETETICS

Bishop Heber College, Tiruchirappalli, India

2019 – 2022

PROFESSIONAL SKILLS

- Medical Coding & Clinical Documentation
- Risk Adjustment & HCC Coding
- Medical Record Abstraction
- Healthcare Revenue Cycle Operations
- Claims Processing & Denial Management
- Coding Accuracy & Quality Assurance
- Provider Communication & Query Management
- Healthcare Compliance & HIPAA
- Insurance Portal Operations
- Medical Terminology & Clinical Concepts
- Documentation Analysis & Interpretation
- Microsoft Office Applications

TECHNICAL SKILLS

Encoder | AAPC Coder | CIOX | Salesforce | Datavant | EncoderPro | Microsoft Word | Microsoft Excel | Microsoft PowerPoint | MS Suits

LANGUAGES

- English – Fluent
- Tamil – Native
- Malayalam

ADDITIONAL DETAILS

- Open to Relocation

