

Vanessa Wyatt

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Summary

Hardworking customer service professional accustomed to fast-paced call center environments. Capable of working quickly to understand, document, and resolve customer concerns. Driving satisfaction while meeting demanding business objectives. Well-versed in medical standards and best practices, including HIPAA guidelines and compliance standards. Looking forward to working in the Patient Financial Department of the Medical Revenue Cycle.

Skills

- Exceptional communication skills
- Versed in medical terminology
- Extensive customer service experience
- Quickly adaptable, Abstract thinker
- Detail oriented, adaptive and analytical
- Strong client relational skills
- Credit card processing
- Broad knowledge base with many transferrable skills

Versed in Practice Management Software: Aetna, Cerner, Epic, Availity, Nextgen, Navinet Advanced Med, Clinix, Mod Med, Allscripts, E Clinicals

Payment Portals: Pay Trace, Instamed, Pay EZ, Authorize.Net, First Data, Exchange EDI

Languages

Bilingual Fluent in both English and Spanish

Work History

Coronis Health

Bilingual Patient Financial Service Representative [04/2021- Present]

Orlando, Florida

Responsible for answering inbound daily telephone calls within Patient Accounts - Customer Service department, a cross-functional department supporting all areas of Revenue Cycle.

Documenting all calls and actions taken in each of our client's practice management system.

Resolving daily patient correspondence.

Assessing patient needs and guiding patients through medical statement resolution, including interpretation of statements, establishing payment plans and accepting payments following all proper policies and procedures.

Collaborating with Account Managers to properly handle patient inquiries.

Establishing and maintaining relationships with client staff to resolve patient issues.

Meeting PSC goals specific to abandonment rate, call volume, call handle time and daily call percentage.

Assist **Spanish speaking** patients calling in from states of Ohio, Texas, Florida and Delaware.

Advent Health

Patient Financial Services Representative [02/2019 - 05/2019]

Maitland, Florida

Accessed patient's information through a variety of office software applications.

Coordinated between patients and healthcare professionals to meet patients' needs.

Assisted patients with applying Medical Health, Auto, and Worker's Compensation Insurance.

Assisted patients by taking payments over the phone, applying adjustments and went over explanation of benefits (EOB) from insurance carriers.

ProMedica

Customer Service Representative [03/2016 - 12/2018]

Toledo, Ohio

Assisted patients with processing payments, applying medical insurance, and went over explanation of benefits (EOB) from various insurance providers.

Helped patients with financial assistance process and applied adjustments and credits.

Answered incoming patient calls regarding billing issues, services, and general patient concerns.

Averaged over 70 calls a day, 350 calls per week, and spent about 3.20 minutes with an abandonment rate of < 1.3%.

Assisted **Spanish speaking** patients.

APS Medical Billing**Bilingual Customer Service Representative [07/2014 - 10/2016]****Toledo, Ohio**

Answered an average of 140 calls per day, addressing customer inquiries, solving problems and providing a great customer service experience.

Assisted patients with applying insurance information and filing claims with insurance carriers.

Integral part of training process for new employees.

Team lead for the **Spanish speaking** customer service representatives at APS.

Education**Tiffin University**

Bachelor of Science in Healthcare Administration [2021]

Stautzenberger College

AAPC- Certified Physician Practice Manager [2022]

Business Administration Associates Degree (AS) [2020 - 2021]

Business Administration Diploma (BA) [2019 - 2020]

Professional Skills Institute

Medical Billing and Coding Diploma Certified [2018 - 2019] (NHA) [2018 – 2022]

Medical Assistant Diploma [2012]