

# Amanda Bradford

Customer Service and Process Improvement Specialist  
(303) 847-3989 - [manduhg@gmail.com](mailto:manduhg@gmail.com) - Northglenn, CO

## Key Skills:

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- 12+ years in customer service and support
- Medicare and Commercial Health Insurance
- Training, mentoring and auditing
- Leading and presenting via telecom and in-person
- Claim processing, medical terminology, ICD-9/10, HIPAA/PHI protection educated
- SAP, Outlook, Excel, Word, PowerPoint, and Access

## Experience:

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### **DaVita (December 2019 - March 2020)**

#### Revenue Specialist II

- Initiate collection follow-up of all short-paid, unpaid, or denied claims with Medicare
- Research, appeal, and resolve claim rejections and denials with Medicare
- Navigate through Medicare's Direct Data Entry (DDE) claim system, and multiple internal systems to ensure timely and accurate resolution of outstanding claims
- Monthly reporting of outstanding accounts receivable

### **Cerapedics (April 2019 - September 2019)**

#### Customer Service Analyst, Osteobiologic Sales

- Sales order, delivery, and invoice processing for US sales.
- Assisting customers and distributors with info and documents as requested.
- Handle complaints, provide appropriate solutions and alternatives within the time limits and follow up to ensure resolution.
- Oversee consignment inventory tracking and processing.
- Work with sales team to ensure proper customer service is being delivered.

### **Anthem Blue Cross Blue Shield (June 2006 - October 2018)**

#### Process Expert, SPOC/HART (Single Point of Contact/Health Administration Response Team): 2011 - 2018

Responsible for being the point of contact for high-profile healthcare providers, which involved:

- Mentoring and training: conducted routine training for SPOC/HART associates on multiple claim platforms research and inquiry routing as well as being a point of contact for claim and benefit questions
- Root cause analysis: worked with multiple departments to determine and resolve claim processing issues
- Project management: monitored, updated and resolved issues related to said claim processing issues. This included multiple meetings with various department leadership
- Routine education: bi-weekly meetings with providers to educate, status claims resolution and updates on project progression
- Research of provider contracts, including correction to system pricing, demographics, and provider education

#### Operations Expert (Supervisor), Provider Vendor Return/Service: 2008 - 2011

Responsible for leadership of on-shore Provider Service, which involved:

- Mentoring and training: conducting training for new and veteran associates on benefits, claims, inquiries and call etiquette
- Auditing of calls and correspondence
- Education and training for off-shore vendors

#### Customer Service Representative, Member and Provider Service: 2006 - 2008

Responsible for incoming calls from members and providers of Anthem, which involved:

- Claims research, benefit and eligibility quotes, Issue research and delegation and education.

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## Education:

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- Pomona High School: Graduate
- Business Analysis Certification: Systemation
- Metro State College of Denver: Two years