JULIAN MERCER

MEDICAL CODER

San Francisco, CA | (415) 555-0148 | julian.mercer@email.com | linkedin.com/in/julianmercer

PROFESSIONAL SUMMARY

Certified Medical Coder with 7+ years assigning ICD-10-CM, CPT, and HCPCS codes at Providence, HCA Healthcare, and Quest Diagnostics. Produces accurate, compliant coding that speeds reimbursement and reduces denials.

PROFESSIONAL EXPERIENCE

Medical Coder Jun 2023 - Present
Providence, Renton, WA

- Code about 70 outpatient and surgical charts a day using ICD-10-CM and CPT with an accuracy rate of 97% on quarterly audits.
- Reduced coding-related claim denials for my specialty queue from 6.1% to 4.2% by researching payer edits and querying providers.
- Send clear documentation queries to physicians and receive responses in an average of one day, which shortened pending-chart time.
- Train two new coders on modifiers and National Correct Coding Initiative edits using sample charts and weekly review.
- Follow annual code set updates and prepare a short summary for the team, which prevented use of deleted codes in the transition.

Inpatient Coder Mar 2021 - May 2023
HCA Healthcare, Nashville, TN

- Assigned ICD-10-CM and PCS codes for inpatient stays and applied MS-DRG logic with 95% accuracy on external reviews.
- Identified documentation gaps in complicated cases and worked with clinical documentation specialists to capture comorbidities correctly.
- Cleared a backlog of 400 discharged-not-final-billed accounts in two months while maintaining accuracy targets.
- Met a productivity goal of 22 charts a day and consistently kept turnaround within the facility's two-day standard.
- Responded to payer audit requests with supporting records, helping to overturn several DRG downgrades.

Coding Specialist Jul 2019 - Feb 2021
Quest Diagnostics, Secaucus, NJ

- Applied CPT and ICD-10-CM codes to laboratory orders and resolved missing diagnosis information for about 150 claims daily.
- Corrected rejected claims by reviewing payer edits and resubmitting within a day, recovering about $90,000 in revenue.
- Kept coding accuracy at 96% while moving to remote work during the pandemic.
- Documented recurring errors and proposed a fix to the order entry process, cutting similar rejections by about 20%.

CORE SKILLS

ICD-10-CM | CPT coding | HCPCS | MS-DRG | Documentation queries | Claim denial resolution | Compliance and HIPAA | Modifier use | Chart auditing | Encoder software | Epic | Medical terminology | Anatomy and physiology | Payer policies

EDUCATION

A.A.S. in Health Information Technology, Seattle Central College, Seattle, WA

CERTIFICATIONS

Certified Professional Coder (CPC), AAPC | Certified Coding Specialist (CCS), AHIMA