

Syeda Naqvi

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EDUCATION

Bachelors in Business Administration Passing Year: 2005
MBA 3 Semesters completed.

OBJECTIVE:

Results-driven insurance claims specialist with 5 years of experience in auto insurance claims management, seeking to leverage expertise in claims handling, team leadership, and policyholder satisfaction in a Claims Manager role at State Farm. Proven track record of optimizing claim processes, reducing cycle times, and fostering team collaboration for improved service delivery.

PROFESSIONAL SKILLS

Auto Insurance Claims Management, Liability Assessment & Dispute Resolution, Subrogation & Recovery, Claims Team Leadership & Training, Process Improvement & Cycle Time Reduction, Regulatory Compliance, Customer Service Excellence, Claims Management Software (ECS), Financial and Quantitative Analytics, Due Diligence, Proficiency in Statical software, Expert organizational and time management. Operational leadership, exceptional planning skills, strong technical advising experience, experience in risk management.

EMPLOYMENT HISTORY

Statefarm, USA

Claims Specialist – Injury

May 2023 till present

- ◆ Process auto insurance claims from intake to resolution, ensuring timely settlements within policy guidelines and regulatory requirements.
- ◆ Investigate claims through interviews, field inspections, and data analysis to assess liability and minimize fraud risk.
- ◆ Collaborate with legal teams, adjusters, and external partners to expedite complex claims and ensure compliance with state laws.
- ◆ Mentor junior adjusters and train new hires on company protocols, improving overall team performance by [specific percentage or outcome].
- ◆ Reduced claims processing times by [specific percentage], implementing new claims software and improving workflow.
- ◆ Investigates, evaluates, negotiates, and settles Auto Claims in an assigned area to include verification of coverage, legal liability and extent of damage to persons and property, which may require contact by telephone, correspondence, in person, or various electronic media as resource for complex/non-routine claims.
- ◆ Led and presented at huddles on the team level. Applying knowledge of policies and insurance regulations when determine coverage, liability and damages. Recognized for the ability to influences peers to embrace change in a positive manner to help them see the benefits of tools and changes, and increase engagement. Effectively managing work through task driven queues while multi-tasking in a fast paced enviornment. Contacting Customers, Supporting customers through personalized caring and simple interactions using various electronics media.

ApolloMD, USA

Credit Balance Analyst

Aug 2021 – April 2023

ApolloMD partners with more than 100 hospitals nationwide to provide integrated, multispecialty physician, APC, and practice management services.

Essential Duties and Responsibilities:

- ◆ Managed a portfolio of high-severity auto claims, including total losses, liability disputes, and subrogation.
- ◆ Evaluated repair estimates, conducted negotiations with body shops, and maintained effective communication with policyholders.
- ◆ Achieved a [specific percentage] customer satisfaction rate by delivering timely updates and transparent resolutions.
- ◆ Developed and executed initiatives that reduced claim loss costs, driving down the overall loss ratio.
- ◆ Identify research and review accounts with credit balances. - Diligently performed Auto/ work comp claims.
- ◆ Review and resolve overpayment projects. Analyze and resolve incorrect provider billing. Resolved all patient/guarantor addresses issues. Worked Care payment projects.
- ◆ Initiate all patient and insurance refunds. Transfer credits when appropriate within a patient or guarantor account. Post credit balance adjustment for all approved refunds. Post all un-posted and misapplied patient payments.
- ◆ Follow up with insurance payers as they request a credit for balances paid. Effectively notice and report trends of issues that may be occurring in the billing system. Analyze and verify information before submitting to request executive staff for a credit. Escheat balances according to corporate policy. Route documents to appropriate internal and external teams for review as the last stop for adjudication and review.
- ◆ Responds to inquiries or concerns from Billing Office via incoming telephone calls or email. Gather and compile data.

HealthOne Alliance, USA

Claims Adjuster

Aug 2019 - Aug 2021

- ◆ Responsible for processing all medical claims including but not limited to practitioner and facility claims for members.
- ◆ Knowledge of various claims form including HCFA1500 and UB92 forms.
- ◆ Utilization of electronic billing system to process regular claims as well as Medicare and Medicaid as secondary and/or primary payer. Processing of claims with workers compensation and subrogation benefits.
- ◆ Proficient in other insurance coverage. Verified members and providers information. Knowledge and understanding of ICD-9, CPT and HCPCS coding classification systems.
- ◆ Maintain timelines for all deferred and lapsed claims. Capable of maintaining production standards while meeting minimum QA score audit criteria. Research claim edits to determine appropriate benefit application utilizing established criteria, applies physician contract pricing as needed for entry-level claims.
- ◆ Works high volume of repetitive claims. Identifies claims with inaccurate data or claims that require review by appropriate team members. Identifies systematic procedural issues resulting in claim processing errors and initiates action to resolve those issues. Maintains knowledge of provider contracts, plan policies and coverages, claim processing guidelines and systems, and an overall understanding of operational workflow processes.
- ◆ Understands provider contracts Works with and understands Company benefit plans. Examines and interprets all relevant documents included with the claims. Responds to claim-specific questions.

Whitfield Dalton Pre School EHS Coordinator, USA

Feb 2018 - Jul 2019

- ◆ Assist in review, evaluation, and revision of the curriculum, including parents in process.
- ◆ Attend parent meetings and orientation. Conduct required regular home visits and conferences.
- ◆ Create and utilize lesson plans, based on Developmentally appropriate practice (DAP), Creative Curriculum and HSPPS, that reflect parental/ cultural influences, and promotes the children's social emotional, physical, and cognitive development. Work in collaboration with special needs staff to meet children's needs as specified on the Individual Family Service Plan. Maintain accurate written records, including assessments, screening instruments, and anecdotal observations and portfolios.

The Sheffield Group Ltd, Dubai, UAE

Admin Associate & Contracts Administrator

July 2013 – July 2015

- ◆ Maintaining Accounts receivable ledger and petty cash for misc. Expenses
- ◆ Follow up for debtors' payment regularly. Maintain data in Tally.
- ◆ Preparing labor contract documents and visa related documents for approval from UAE Govt
- ◆ Being Head of Customer service department and training staff for Greeting Visitors and providing customer service. Maintaining daily routine tasks related to front desk operations.
- ◆ Communicating with parents to brief them on enrollment, admission, and transfer procedures.
- ◆ Ordering and maintaining inventories, office supplies & other logistics.

Mattex Dubai LLC, DUBAI, UAE

Sales Coordinator

June 2010 – June 2013

- ◆ Preparing quotation, invoices, and local purchase order to clients.
- ◆ Coordinating the sales team by managing schedules, filling important documents and relevant information.
- ◆ Ensuring the adequacy of sales-related equipment or material. Responding to complaints from customers and give after sales support when requested.
- ◆ Store and sort financial and non-financial data in electronics form and presents report. Handle the processing of all orders with accuracy and timelines.
- ◆ Inform Clients of unforeseen delays or problems. Monitor team's progress, identify shortcomings, and propose improvements. Assist in preparation and organizing of promotional material events.
- ◆ Ensure adherence of laws and policies. Data entry and maintenance of time clock system, employee incident tracking, and training tracking Adhoc general office administration duties. Salary survey. Designed employee handbook.

TRAININGS & PROFESSIONAL COURSES

- ◆ Ongoing Professional Training for handling State farm Claims UB process at Jurisdictional and Technical level (2023)
- ◆ Attended 6 months Internship training at Bank Al Falah in Customer Service June 2008

VOLUNTEER EXPERIENCE

- ◆ Worked Voluntarily at Hard (Health and Rural Development) social welfare organization.

REFERENCES

Proof of prior learning, diplomas, certificates, and employer reference letters can be provided upon request.