ALLEN PALACIOS

HEALTHCARE RCM SPECIALIST & MEDICAL VIRTUAL ASSISTANT

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PROFESSIONAL SUMMARY

Detail-oriented Healthcare Revenue Cycle Management (RCM) and Medical Virtual Assistant with 4+ years of experience supporting U.S. healthcare operations. Proven expertise in claims processing, denial resolution, insurance verification, prior authorization, referral coordination, payment posting, and provider/patient support. Highly skilled across CollaborateMD, eClinicalWorks, Practice Fusion, Availity, and Salesforce. Deep knowledge of CPT, ICD-10, and HCPCS coding with a strong track record of managing high-volume administrative workflows and maintaining strict HIPAA compliance.

CORE & TECHNICAL CAPABILITIES

Revenue Cycle Management: Medical Billing & Claims Processing, Claim Denials & Appeals, Insurance Verification & Eligibility, Prior Authorization, Referral Intake, Payment Posting & Reconciliation, A/R Management, CPT/ICD-10/HCPCS Coding.

EMR & Billing Software: CollaborateMD, Practice Fusion, eClinicalWorks, RevEHR, SimplePractice.

Clearinghouses & Tools: Availity, TriZetto, Office Ally, Salesforce, SwyftOps, GoCanvas, MS Teams/Office.

PROFESSIONAL EXPERIENCE

Care Access Coordinator — Interim HealthCare of Mercer County (Remote)

Jan 2026 – Sep 2026

- Processed and reviewed home health and care service referrals, verifying required clinical documents for complete intake and seamless care coordination.
- Managed healthcare claim workflows, identifying discrepancies, submitting corrections, and following up on pending claim issues.
- Coordinated actively with physician offices and clinical teams to secure physician orders and supporting documentation.
- Monitored intake and billing queues to eliminate documentation bottlenecks and prevent reimbursement delays.
- Assisted with client billing operations, maintained accurate client ledger data, and resolved account balance queries.
- Ensured strict adherence to HIPAA guidelines while handling confidential client and healthcare information.

Back Office / Medical Biller — Hamilton Vision Center

Sep 2025 – Dec 2025

- Posted insurance payments, co-pays, and contractual adjustments with high numerical accuracy.
- Verified vision and medical insurance benefits prior to patient appointments to confirm active coverage.
- Managed daily patient appointment schedules, confirmed exams, and sent pre-visit forms to optimize office workflow.
- Partnered with front desk personnel and clinical providers to resolve billing concerns and patient inquiries.

Medical Virtual Assistant / Medical Biller — The Real Gut Doctor (Remote)

Feb 2025 – Aug 2025

- Maintained accurate patient billing records using CollaborateMD and Practice Fusion in compliance with healthcare standards.
- Submitted electronic claims and proactively tracked outstanding claims, managing denial resubmissions and appeals.
- Reconciled account balances and addressed patient billing queries regarding statements and coverage breakdowns.

PROFESSIONAL EXPERIENCE (CONTINUED)

Medical Biller & Prior Authorization Specialist (Part-Time) **Jan 2024 – Dec 2024**

Vegas Digestive Health Center

- Secured prior authorizations from commercial and government payers for diagnostic procedures and treatments.
- Verified eligibility, copays, deductibles, and out-of-pocket maximums via Availity and payer portals.
- Submitted clean claims using eClinicalWorks and handled denial resolution to accelerate revenue recovery.
- Guided patients through financial obligations and insurance coverage breakdowns.

Provider Support Specialist — Optum Global Solutions (Remote) **Sep 2022 – Feb 2025**

- Handled high-volume provider inquiries regarding claims status, payments, and policy guidelines.
- Performed real-time insurance verification and investigated root causes for recurring claim denials.
- Recommended procedural adjustments to internal teams to prevent repeated billing errors and streamline claim lifecycle.

ESL Teacher — 51Talk (Remote) **Nov 2018 – Feb 2020**

- Delivered 1-on-1 language lessons, cultivating strong interpersonal communication, patience, and documentation precision.

Freelance Data Annotation Specialist — Self-Employed **Jan 2017 – Jan 2018**

- Annotated and validated complex datasets for machine learning models, ensuring 99%+ data accuracy.

EDUCATION & ADDITIONAL COURSEWORK

Bachelor of Science in Psychology
Cavite State University

Technical Support Engineering
BYU-Pathway Worldwide / BYU-Idaho
Certificate Pathway / Coursework

CORE COMPETENCIES SUMMARY

- **U.S. Healthcare Operations:** In-depth understanding of payer rules, claims life cycles, and clinical workflows.
- **Cross-Functional Collaboration:** Smooth integration with medical staff, insurance representatives, and billing units.
- **Data Integrity & Privacy:** Uncompromised focus on HIPAA rules, sensitive PHI handling, and exact record-keeping.