

Mansour Al Turki

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A skilled and experienced candidate in the field of insurance with excellent track record of handling a branch office to handle administrative, and other activities as required by the management. Want the site functional you have anime through what I learned in my life and informed consent process and look forward to more of practical experience

Experience

3/2021 TO PRESENT

REVENUE CYCLE MANGER IN INTER HEALTH CANADA

- Plan and manage company, insurance company and provider, billing and collections to ensure accurate billing and efficient accounts collections.
- Manage the Revenue Cycle Management department within the established budget including annual planning and develops monthly status reports.
- Review current status company, insurance company and provider accounts to identify and resolve billing and processing problems in a timely manner.
- Establish and implement a system for the collection of delinquent accounts ensuring company, insurances company and providers are contacted.
- Establish and recommend credit and collection policies. Make recommendations for improvement.
- Solve difficult payment and associated business office problems .Audits problem accounts.
- Maintain contact with patient services, medical records and other departments To obtain and analyse additional patient information to document and process Billings.
- Establish business development and marketing strategies to increase patient base specifically English speaking patients.
- Establish and maintain positive relationships with outside companies and providers to promote the centre.
- Develop and oversee invoicing systems and works with information technology to ensure timely and accurate implementation.
- Supervises, train orient and evaluate performances over assigned personnel. Recommend merit increases, promotions and disciplinary actions.
- Monitor daily operating activity of department and make necessary adjustments in work assignments.
- Initiate and answer pertinent correspondences. Prepare and write reports. Maintain required records and files.
- Maintain Knowledge of and comply with established company, insurances company and provider regulations and policies and procedures.
- Maintain confidentiality in regards to company, insurance company, provider and patient's accounts status.
- Analyse, evaluate and negotiate company, insurance company, and provider contracts.
- Manage reconciliation and clearances of all claims with all insurances companies.
- Responsible for orientation of all new doctors' regarding insurances policies and procedures.
- Responsible for the financial, operational and delivery aspects of company, insurance company and provider contracts.
- Recommend acceptance and /or renewal of contracts and initiates any changes.
- Oversee compliance with company, insurance company and provider contracts ensure that claims are paid accurately and on time and manage claims payments processes.

- Oversee the referral and authorisation systems.
- Analyse and report on the trends and company, insurance company and provider utilisation and referrals patterns.
- Develop and maintain policies and procedures for Business Service Department and ensure policies are followed.
- Coordinate with the Medical Director to identify and facilitate the medical management of company and insurance company patients.

4/2017 – 2/2021

Claim's supervisor in Dr.Sulaiman AL Habib Medical Group - Business Office Department

- Supervised and oversaw the day-to-day workflow operations to ensure employees' production and standards were met and claims were processed timely
- Centralized in terms of the development of plans and full strategies
- Conduct case reviews and evaluate adjuster's performance by continuous review of claims statistics, open and closed
- Working with teams on the insurance accounts of major companies in the Saudi market where all medical claims are processed
- Work as an internal control manager to make sure that the conditions for submitting claims to companies are properly completed
- Work on the development of procedures and action steps
- Working on the mechanism of the Health Insurance Council
- Working on the claims of the Ministry of Health
- Work on developing the system of the hospital and find the best solutions for access to specific procedures and more effective
- Work on all sections that have a direct or indirect connection
- Work on communicating with insurance companies to reach the best possible ways to submit medical claims

12/2014 – 03/2017

Group leader recovery & collection Malath Insurance & Reinsurance Company

- one of the team established the claims program for mobile devices
- Work on the development of the departments of the recovery department in full, since the department did not have any procedures and work procedures fully
- Working on the development of the fraud department
- Development of the development department
- Developing the internal control department
- Follow-up the full work of all departments associated with the Department of Operations

05/2014 – 11/2014

Branch Manager Motor Claim Takaful Al Rajhi

- Working on the development of adaptations used by the claims department
- Manage Day to Day activities in Branch

- Work on fully restructuring claims processing procedures
- Developing the skills and performance of receptionists
- Develop third-party claims processing procedures
- Work on the development of receiving claims branch
- Developing a system of claims with the Department of Technical Support

08/2009 – 04/2014

Claims Executive Tawuniya Insurance Company

- Receiving the client's claims - making sure about the documents to complete the procedures according to the company regulations.
- Settling claims by paying amount up to 35,000 SR.
- Serving the company's clients (VIP).
- Works as supervisor of the team for the settlement of (TP) third party claims up to 35,000 SR according to the company's regulations.
- Follow up the claims to resolve the problems by coordinating with the concerned party.
- Been nominated to group leader position.
- I have obtained gratitude letters from CEO for two times respectively.
- Chief of electronic mail for mission management

08/2005 – 07/2009

Patient Relations Representative Security Forces Hospital

Work as manager (on duty) of emergency section to take care about the visitors to resolve their problems according to the hospital regulations and I were the link bridge between the medical management in the hospital and emergency section, and coordinator with the concerned parties of the emergency section .

Education

Certificate of insurance practice (IFCE) of the Institute of Banking

Completed materials of general insurance certificate of the Institute of the Saudi banking

Completed materials of Underwriting Certificate of the Chartered Insurance Institute

Courses

- Customer Services.
- Sales Accounting.
- Time Management.

- Skills & Qualified For Show and Speaker.
- Developing of Sales Operations
- Skills of Dialing in the Privet Company's.
- Communication Skills
- Principles and practices of insurance
- Finance for Non-Financial People
- Situational Leadership
- Effective Supervision
- Interaction Leadership
- Information Security
- Compliance and Ethics

Language

Both Arabic and English fluent in reading, Writing and speaking