**FREDRICA DIKE**

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# **SUMMARY**

Dedicated health information systems professional with over nine years’ experience in implementation and training. A specialist skilled in identifying technical errors and finding solutions for the customer/ facility by meeting their needs. Proven ability to organize information effectively while maintaining confidentiality and displaying professionalism in all situations. Expertise in support of software projects through, performing need analysis, improvement of customer satisfaction/client relations, and anticipated client needs. Information technology professional that is proactive, flexible, dependable, responsive to change and problem solver who can support, mentor, and direct customers in teams through effective interpersonal communications.

Athena Health​ ​CradleMrx Epic Care Emdeon Solarwinds MSP

ARMS PRO Care4MD McKesson Galactica Immtrac

Availity GE Centricity Meditech Novitasphere CareVue

Cerner FACETS MACESS SharePoint MOS Medworxs

RCM Cloud SQL Webex/Zoom Putty Xferall

# **PROFESSIONAL EXPERIENCE**

Sacred Oak Medical Center 2018-Present

Clinical Informatics Analyst/Project Manager

* Served as key onsite IT resource for facility implementation and support of a broad set of clinical applications.
* Led teams across broad technical, financial, and business disciplines. Focused teams on business objectives and tracked progress to ensure project milestones were completed on time, on budget and with the desired results.
* Facilitates the facility’s core clinical systems team on clinical IT activities under the direction of the Director of Clinical Informatics
* Defined processes and tools best suited to each project. Moved between agile and waterfall approaches depending on project specifics and client goals, creating detailed project road maps, plans, schedules, and work breakdown structures.
* Trained clinical staff on the electronic medical record system software by delivering hands-on training as needed and to implement division standardization, utilization, integration, and optimization plans for clinical applications.
* Developed a database management program, leading the team in meeting all project deadlines.
* Identified and fixed program bugs, leading to a marked increase in customer satisfaction as measured by online surveys.
* Hired and trained four new team members based on predicted project needs.
* Managed and facilitates the maintenance of the facility-specific dictionaries.
* Provided input for customizing base division policies and procedures, training, and best practices for the use within the facility.
* Promoted system security and patient confidentiality and helping with ensuring compliance.
* Performed quality audits and tracking the metrics of the clinical application usage.
* Coordinated facility clinical application reporting requests and assisted with defining report requirements and validating reporting results. Extraction of data tables utilizing SQL to retrieve reports from the databases.
* Established strong rapport within the various facilities with core customer service base that included the physicians, nurses, therapists, technicians and core allied health team members, and leadership executives.
* Analyzed the resources for the subject matter and managed the resolution for the provider status and end users’ issues. Building templates and interfacing the systems for clinical charting.
* Provided remote and on-call assistance for multiple clinical disciplines on the clinical software’s.
* Troubleshooting the end users’ issue and system application problems by providing solutions to support the clinical function.

Universal American/Wellcare 2016-2018

*Appeals & Grievances Specialist*

* Performed comprehensive research related to the facts and circumstances of a member complaint, to include appropriate classification, validation and processing as a grievance, appeal or both, and implementation of applicable processes as mandated by CMS.
* Analyzed and interpreted departmental, utilization, financial and operations data for decision-making for out of network and in network providers’ post service/pre-service appeals and grievances.
* Responded to verbal contact with the members, providers, or authorized representative during the research process to further the member's complaint during the review of each case by case scenario.
* Responsible for the application of contract language, benefits, and covered services from the Evidence of Coverage in researching and deciding the outcome in cases of grievances and appeals per Medicare guidelines.
* Reviewed and analyzed case dismissals due to lack of clinical documentation contracted thru Medicare and review appeals from out of network providers and groups seeking payment for services rendered.

Benefit Recovery 2014-2016

*Recovery Support Specialist*

* Obtained hospital eligibility, claim status, and denial review on medical care claims for patient’s coverage.
* Extracted and reviewed ICD-9 codes and CPT codes on clinical data for statistical research and recovery of revenue.
* Verified Medicare/Medicaid and commercial health insurance coverage via Epic Resolute, Meditech and ARMS PRO.
* Recovered delinquent and withdrawn accounts by 95% of appeals from CMS 1500 and UB-04.
* Provided training on Epic Resolute Billing Systems for tracking of hospital revenue accounts.
* Investigating and/or ensuring that questions and requests for information are responded to in a timely and professional manner resulting in accurate resolution of assigned accounts.
* Perform ongoing monitoring of accounts worked to ensure maximization of collection dollars through appropriate follow-up and documentation of actions taken in client and/or HBS computer systems as appropriate.
* Review remittance advice for denials and trends for the payers assigned. Referring all payer issues/problems to Leadership in a timely manner, making recommendations to the Project Manager for resolution and elimination of denials where possible.

UExams Inc., 2014-Present

*Exam Certification Administrator*

* Managed the candidate(s) testing process during and after the examination for the approved assistance based on the scope of service.
* Discussed questions and concerns before the test administration begins by minimizing any discrepancies.
* Ensured that the recording of a candidate’s answer choices, essays or short answer responses evaluated are accurately documented for completion.
* Successfully assisting candidates in passing examinations by 75% of the initial period.

University of Texas Health Science Center (​*Center for Advanced Heart Failure*​) 2013-2014

*Database Coordinator (contract)*

* Evaluated clinical data credibility, back up recovery, security, and primary procedures as they relate to the Microsoft Excel spreadsheets and Care4MD software.
* Managed the integrity of data issues by developing a standard process to improve research on patient’s medical information.
* Identified opportunities to improve the process of installing a systematic technique of ensuring medical records of patients’ in clinical systems and spreadsheets were updated daily and remain precise.
* Extracted and abstracted clinical data for cardiac surgical procedures for research by the department by transfer of paper documents into an electronic database system.
* Accountable for all evaluated data and testing on patients with adverse effects on a measurable tracking system.
* Lead the training for clients and providing technical support on the software infrastructure updates.
* Provided hands on support with the software along with ticketing tracker system to resolve issues.

St. Luke’s Episcopal Health System Hospital 2013

*Epic Care Consultant (contract)*

* Supported physician and nurses’ weekly training on the Epic Inpatient applications: ClinDoc, Optime, Anesthesia, and CPOE in critical care units and outpatient departments within the hospital. Provided in classroom training support and teaching the fundamentals of the system and creating a workflow in their clinics or units by using smart phrases/smart links
* Successful comprehension and level of competency examinations administered after training classes with 100% passing rate by healthcare professionals.
* Assisted and supported to physicians and nurses providing elbow support for the MAR, charting documentation utilizing their smart phrases in the system or building templates for the clinicians.
* Conducted functionality tests to estimate the user friendliness, feasibility, device integration for Epic Care modules and relevance of the software with the expectations.
* Coordinating with the implementation specialists to install the software and ensure its compatibility with the installed network.
* Effectively, continued communication with client or department management and employees to define needs and provide solutions to technical or data errors.
* Ensure timely resolution of day to day issues as identified by the end-users - assists in determining whether the EMR/Clinical Applications issue are a process issue, performance issue or product issue.
* Ability to work with a minimal amount of supervision, to balance multiple tasks, be detail oriented, set priorities, and accomplish assignments in a timely manner utilizing excellent customer service skills.

Cy-Fair Headache & Neurological Clinic 2012-2013

*Medical Assistant Specialist*

* Obtained patients’ identifications, vital signs, diagnostics, medical records, insurance and billing information, reason for visit based on diagnoses/consults, and any other pertinent past, present, and family medical history in the Athena Health and Soap Ware electronic clinical systems.
* Devised a tracking system of delinquent financial records for clinical encounters by the neurologist. Maintained a
* bookkeeping of patient’s files and services in a monthly report on spreadsheets.
* Identified all credit/debit transactions and collection notifications flagged in the system by mailing monthly statements to patients’ and retrieval of monetary funds to the clinic by 85%.
* Prepared patients for neurological consultations/procedures in the clinic such as (e.g. Electroencephalography (EEG), Ambulatory (EEG), Sleep-Deprived (EEG),

Electromyography (EMG), Visual Acuity Examinations, Mini Mental Status Exams, sterilized medical tools and processed medical history information provided by the patient/guardian into the Athena Health electronic system.

* Authorized medications signed off by the physician to the pharmacy or pharmaceutical representatives for patients ‘resulting in reduced errors of administrations.

Chemik Healthcare Services 2010-2012

*Quality Assurance Coordinator*

* Audited accounts of patients’ records to verify history and noted tasks that were delinquent or not addressed properly to ensure compliance with policies and procedures.
* Created and maintained audit forms, and records consisting of information databases, reports and graphics utilizing Microsoft programs such as Excel/Word for analysis and distribution.
* Maintained productive working relationships with internal team members, interdepartmental functions, and external companies.
* Guided specific topics for review, such as problem procedures, drugs, high volume cases, high risk cases, or other factors approved by manager for performance system analysis.
* Established a tracking system for clinical staff of 10 people on reports of patient’s necessary medical needs met on a bi-weekly and monthly basis for status reports of direct and indirect patient care assessments.

City of Port Arthur Health Department 2010

*Intern (Epidemiology Department)*

* Established a community-based program that systematically tracked influx of diseases in the region with detailed reports of infection and monitoring the operational research with data on Immtrac.
* Developed a platform for review of on-going health program activities, work plans, and goal achievements to assist with public health and international public health initiatives for healthy living and societal concerns.
* Evaluated patient’s medical records and ensured completion of documented forms for the H1N1 flu epidemic and HIV/AIDS division for local and regional headquarters departments.
* Responsible for patient privacy rights and accurate data entry of immunization records on Immtrac clinical systems and notifying patients of missing data as well as the Staff Epidemiologist.
* Assisted in Southeast Texas health fairs to educate the employees and community at large thru in-depth PowerPoint presentations and visual demonstrations on emergency preparedness and interventions.

**EDUCATION/PROFESSIONAL DEVELOPMENT**

Master of Science in Health Information Management, College of St. Scholastica, Duluth, Minnesota

# (2018 - currently in progress)

Associates of Applied Sciences in Health Information Management, San Jacinto College, Houston, Texas, 2015

Bachelor of Science in Community Health, Lamar University, Beaumont, Texas, 2010

Certificate in SharePoint MOS, San Jacinto College, Houston, Texas, 2013

Certificate in HITECH-Implementation Management, Houston Community College, Houston, Texas,

2012

Certificate in Medical Assisting Specialist, Sanford Brown College, Houston, Texas, 2011

Lean Six Sigma White Belt Certification, The Council for Six Sigma, 2020

Six Sigma White Belt Certification, The Council for Six Sigma, 2020

Project Management Essentials Certification, Management and Strategy Institute, 2020

Cyber Security Foundations Professional Certification, 2020

Scrum Foundation Professional Certification, 2020

SEO Content Marketing, Hub Software, Competitor Analysis, Link Building Test Certifications, 2021