

Certified Denial Recovery Specialist (CDRS) Related Work Experience Verification Form

Directions

Thank you for taking the time to assist the applicant named above to verify and document their related work experience as they apply for the Certified Denial Recovery Specialist (CDRS) designation.

Please carefully read the Description of a Certified Denial Recovery Specialist and the Related Work Experience Requirement as listed below. If you have any question as to whether or not specific duties or tasks are eligible to meet certification requirements, please contact our offices directly at 850-222-6314.

To document the applicant's related work experience, complete this form in its entirety and attach supporting documentation describing the duties and tasks performed by the applicant, such as a position description. In the absence of an official position description, a narrative and listing of duties written on agency letterhead may be provided.

Please do not ask the applicant to complete any part of the form, except Part 1. It is FCB policy that this form is completed by the applicant's employer's personnel officer or designee only.

Upon completion, please submit the form and supporting documentation directly to the FCB via mail or email: the FCB will not accept Work/Volunteer Experience Verification documentation completed and/or submitted in part or whole by the applicant.

Mail:

Florida Certification Board
Attn: Certification Operations
1715 South Gadsden Street
Tallahassee, FL 32301

Email: admin_assist@flcertificationboard.org

Subject Line: Work Experience Verification (applicant name)

Description of a Certified Denial Recovery Specialist (CDRS)

Denial Recovery Specialists fill a unique role among patient financial services professionals. CDRS' works with the most difficult patient accounts; they analyze the account history to determine why the patient's insurance claim was denied, conduct activities necessary to reverse the denial, and resubmit the corrected claim for payment. The role of a CDRS includes, but is not limited to:

- Researching the denial, including accessing and analyzing relevant hard copy and electronic patient and hospital medical and billing records;
- Taking action to resolve the denial, including correcting errors and dropping new claims, writing letters of appeal, requesting adjustments, and transferring liabilities;
- Following up to ensure claim is resolved and paid by the carrier; and
- Providing superior customer service to internal and external clients.

Related Work Experience Requirements

Work Experience requirements vary, depending on the applicant's level of formal education.

1. High School Diploma/General Equivalency Degree: 3,000 hours of related experience
2. AA/Vocational Degree: 2,000 hours of related experience
3. Bachelor's Degree or higher: 1,000 hours of related experience

Experience is documented and verified by the applicant's immediate work or volunteer supervisor(s) on the attached form. Experience must have been gained within the last 5 years.

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Part 1: To be completed by the applicant prior to providing to the employer for completion.

Applicant Information. Please list your employment history for which you are requesting credit for certification and verification by your employer. Report employment dates in the following format: May 2009 – Aug 2011. Use a separate form for each position and/or employer.

Employer: _____

Position Title: _____

Employment Dates: _____

Immediate Supervisor: _____

Part 2: To be completed by the personnel officer or designee only.

Section A: Verifier's Information

Last Name

First Name

Title

Employer

Employer Webpage Address

Business Phone

Work Address Line 1

Work Address Line 2

City

State

Zip code

County

Section B: Experience Attestation

I have read and understand the work experience requirements for CDRS certification. The following information can be verified by employment records maintained by the agency.

Applicant's Position Description Attached? Yes No*

*If no, please attach a written description of the applicant's duties on agency letterhead.

Applicants Level of Formal Education HDS/GED – 3,000 hours AA/Vocational Degree – 2,000 hours Bachelor's
hours of related work experience: Degree or higher – 1,000 hours

Applicant's Dates of Employment: _____

Average number of hours per week providing related services: _____

By my signature, I attest that the above material is true to the best of my knowledge.

Signature

Date