Raj Singh Business.solution3k@gmail.com (559) 745-5668

OBJECTIVE:

To get a challenging Business Analyst/ Project Management position with a progressive company where I can continue to develop and enhance my **management**, **technical** and **analytical** skills.

PROFESSIONAL SUMMARY:

- Over 8+ years' experience working on Mainframe Applications, ASO, Medicaid Claim processing System, Facets
 Eligibility/Enrollment transactions, Welfare eligibility, HMS applications, Clinical Applications, EMR applications,
 Billing applications, Healthcare Payer Provider, Managed Health Care(MHC), Management and Care
 Management, Insurance Applications, Health information exchange (HIE), (HIX) systems and investment
 application.
- 5+ years of healthcare insurance payer systems, Security, Compliance, Healthcare Reform implementation, reporting, integration, equivalent consulting experience
- 5+ years' experience with HIX Application, Benefit Plans, Claims Payment Cycle, Waiver Programs and Reference, Obama Care, Affordable Care Act (ACA) Applications, QNXT configuration, Billing applications, Life Insurance Application, Managed Care Organization system, Epic applications, MMIS, Medicaid and Medicare claims and Eligibility processing systems.
- Expert level knowledge of Facets TriZetto, QNXT, HIPAA X12, 4010 and **5010 / ICD 9, ICD 10**, version for al**I EDI** transactions like (820, 834, 835,837, 270, 271) CPT-10 & Medical Terminology.
- Business Analyst with solid understanding of Business Requirements Gathering, Business Process Flow and Business Process Modeling, **Business Process Analysis**.
- Experienced in Medicaid Information Technology Architecture (MITA) & Medicaid Enterprise Certification Toolkit (MECT)
- Proficient in using UML for Business Process Modeling, Use Cases, Activity Diagrams, Entity Relationship
 Diagrams, Sequence Diagrams, Collaboration Diagrams, Class Diagrams and document them using Rational Rose
 and MS Visio.
- Experience working on Facets Healthcare system, Business Intelligence tools, employee benefits, health insurance, defined-benefit pensions, healthcare payer operations and Reporting applications.
- Participated in JAD sessions with superior organization and presentation skills.
- Experience in management of requirements throughout the Software Development Life Cycle (SDLC).
- Experience as a Business Analyst Extensive Experience in Health Care Medicaid and Medicare work and data warehousing tools.
- Worked as a lead subject matter expert reviews of requirements documents.
- Skilled at performing GAP analysis, User Acceptance Testing (UAT, Cost benefit analysis and ROI analysis.

- Experienced in developing Test Plans and Test Cases based upon business.
- Excellent skills in Business Analysis, OO Analysis, Data Analysis, Requirement Analysis, Business Modeling and Use
 Case Development using UML methodology, Project Management Methodologies include AGILE, RUP, SDLC, and
 Waterfall.
- Excellent communication and presentation skills. Experience working with business users as well as senior management.

Education

Bachelor in Computer Science

TOOLS AND TECHNOLOGIES:

Operating Systems: Microsoft Windows /XP/VISTA/7, UNIX

Languages: SQL, Java, Java Script, HTML and UML

Databases & Tools:SQL Server 2005 & 2008, Access, MYSQL, Oracle 9i/10gInternet Technologies:PHP, ASP, .NET 3.5, C#, Visual Basic 6, HTML, XMLQuality Management:IBM Rational Manual Tester, Quality Center, QTP

Business Modeling Tools: Rational Rose, Microsoft Visio

Change Management Tools:Rational Clear Quest7.1, Requisite Pro v7.1Reporting Tools:Crystal Reports, Business Objects, Cognosv8.0

Project Management: Microsoft Project Professional

SDLC Methodologies: Water Fall, Prototyping, Spiral, Rational Unified Process (RUP) and Agile

methodology

Others: MS Office 2007 (Outlook, Access

Word, Excel, PowerPoint); Lotus Notes

WORK EXPERIENCE:

Department of Health Columbia, MO Sr. Business System Analyst

Jan 2013-Present

Responsibilities

- Worked with Facets Applications Facets TriZetto Eligibility/Enrollment transactions, **Welfare eligibility**, Managed Care and MMIS Health Insurance Claims Processing system.
- Worked on healthcare insurance payer systems (PowerMHC System), implementation and Support.
- Worked as a Subject Matter expert and analyzed all aspects of the software development life cycle
 including business requirement analysis, application Logical & Physical design, development milestone
 determination, code implementation and all various levels of testing (unit, integration & UAT) along with end user
 training for ICD-9, 10 applications.
- Created workflow diagrams to better demonstrate the processes adopted in the EDI group and accounting groups of the company.
- Worked on EDI 820 Payment Order/Remittance Advice.
- Worked on Medicaid Information Technology Architecture (MITA) & Medicaid Enterprise Certification Toolkit (MECT).

- Extensive experience with clinical data management system, data entry, replication, discrepancy management, and handling of laboratory data.
- Have the capability to view and work with data that was collected either through Oracle Clinical or other sites using RDC.
- Involved in gathering, collating, resolving, and managing clinical trial data and solved the problems related to time
 delays and miscommunication by allowing direct access between users at clinical sites and the Oracle Clinical
 system.
- Involved in providing rapid visibility into clinical data from source systems.
- Worked on Medicaid Claim Processing and QNXT Applications configuration, roll-out, administration, training, and support.
- Worked on Benefit Plans, Claims Payment Cycle, Waiver Programs and Reference, Obama Care, Affordable Care
 Act (ACA) Applications, QNXT configuration, Billing applications, Life Insurance Application, Managed Care
 Organization system, Epic applications, MMIS, Medicaid and Medicare claims and Eligibility processing systems.
- Worked on EDI HIPAA 5010, EDI X12 formats transaction like (820, 834, 835,837, 270, and 271).
- Extensively interacted with the stakeholders and the IT Department in finalizing the requirements according to the CMS Compliances/Regulations and HIPAA Regulations.
- Established a business Analysis methodology around the SDLC, helped to develop use cases, project plans and manage scope for Health information exchange (HIE), Member Enrollment and Managed Care Organization applications.
- Worked on JAD sessions for Healthcare Reform application.
- Creating Business Requirement Documents (BRD), Functional Requirement Specification (FRS) document, User
 Requirement Specifications (URS) document, UML Modeling Use Case Diagrams, object diagrams, Activity
 Diagrams, and Sequence Diagrams, SOA Orchestration Charts for ASO Applications.
- Prepared Test Strategy, Test Plan, test report and Gap Report.
- Performed UAT **Testing** based on Requirements Document and prepared the Test Cases using Quality Center.

Environment: Quality Center, EDI 820, Java, AGILE, TDD,IIBA, BABOK, EDI, DB2, UAT testing, MMIS, uniBasic, Linux, ATDD,MS Project 2004, BI, Facets 4.x, XML, SFDC, MS excel, Power MHC, MS Word, MS Visio, MS .NET, AJAX, MS SQL, MS FrontPage, MS Power Point.

Health Alliance Plan, Detroit, MI System Analyst Jan 2010-Dec 2012

Responsibilities:

- Created targeted questionnaires for SME to gather requirements and understand the business process goal from them.
- Worked with Life Insurance Application, Health Insurance Claims Processing system and HIS Applications.
- Involved in reviewing and writing BRD, URS and Functional Requirements for MDM Business and Data Quality Requirements for Health Insurance Exchange (HIX) and Health information exchange (HIE) system.
- Collaborated with the stakeholders in defining the scope of the project in context to the MMIS (Medicaid Management Information Systems) regulations.
- Worked on analysis of common APIs for IBM Curam Agenda Player and dynamically load agenda pages based on admin configuration.
- Worked with data reporting tools, Business Intelligence tools, Cognos 10, Crystal Report.
- Monitored day-day activities responsibilities include **JAD sessions**, leading a team of analysts and MMIS specialists in the development of a requirements analysis, advanced planning document and request for proposal.
- Created business requirements and helped system analysts in converting them into System Requirement Specification (SRS) document for MDM Business and Data Quality Requirements.
- Used Rational Requisite Pro to document stakeholders' requests, software requirements specifications and traced it to use cases.
- Created formula's for Crystal Report and stored it on the Crystal Repository to be used across the organization.
- Discussed defects with analysts and then made decisions about modifications and changes.

- Performed **JAD sessions** and interacted with stakeholders to discuss problem issues and describing common goal of project.
- Resolved issues between front-end developers, middle-tier developers, QA team, and provided suggestions/feedback.

Environment: SQL, Windows 2000, IIBA, BABoK, AGILE, uniBasic, Linux, ATDD, IBM Curam, BI, Java, SFDC, Facets 4.x, Rational Suite, XML, Power MHC, Epic Cerner, Visio and MS Project Erwin, MS Office Suite (PowerPoint)

Tenet Health Care Corporation (THC), Dallas, Texas System Analyst/QA Analyst Responsibilities: April 2008 - Dec 2009

- Involved in reviewing the business process and possible improvements based on user requirement. Interviewing the HOD's and other end users, asking detailed questions and carefully recording the requirements in a format that can be reviewed and understood by both business people and technical people
- Used MS Visio to create business process flowcharts and workflow diagrams for **Welfare eligibility Application.**
- Worked on mapping from ICD10 to ICD9 using General equivalence Mappings (GEM).
- Worked on Medicaid Information Technology Architecture (MITA) & Medicaid Enterprise Certification Toolkit (MECT).
- Participated in writing clinical protocol, validation of QA/QC, formulations, prepared literature review, technical challenges, prepared SOPs and overall product review before clinical trial.
- Regularly monitored project cycle of clinical trial through email, conference calls, personal visits and frequent meetings with team and the external team and other stakeholders.
- Worked on overview of EDC, discussed how RDC Classic accomplishes EDC, and described how RDC Classic interacts with Oracle Clinical.
- Worked on Benefit Plans, Claims Payment Cycle, Waiver Programs and Reference, Billing applications, Life Insurance Application, Managed Care Organization system, MMIS, Medicaid and Medicare claims and Eligibility processing systems.
- Worked on ICD 9, EDI HIPAA 5010, EDI formats transaction like (820, 834, 835,837, 270, and 271).
- Configured Salesforce.com as per client business requirements, customize/set: role hierarchy, users, sharing/access rules, standard/custom fields, page layouts, letterhead/email templates, lead/case assignment/escalation rules, auto-response, reports/dashboards, and custom objects. Also responsible for exporting/scrubbing data from existing/legacy systems and importing into Salesforce.com.
- Utilized Rational Unified Process (RUP) to configure and develop processes, standards, and procedures
- Participated in **JAD sessions**, data modeling; planning, designing, implementation of the data warehouse and conducted testing. Produced data mapping and data definition documentation
- Worked on configuration and support of QNXT Applications.
- Involved in reviewing and writing BRD, URS and Functional Requirements for MDM Business and Data Quality Requirements for Healthcare SFDC Service Cloud system.
- Analyze business requirements and segregated them into high level and low level Use Cases, activity diagrams
 / State Chart Diagrams according to UML methodology thus defining the Data Models
- Involved in process modeling, conducted & Participated in Joint Application Development (JAD) sessions with System Users

Environment: Rational Rose, IIBA, EDI 820, Business Intelligence tools, MITA, Microsoft Visio, SFDC, Facets, Java, TriZetto Facets 4.x, XML, Clear Quest, Servicemax, Microsoft Project, AGILE, QNXT, Oracle, UNIX, MS Excel, MS Access.

Responsibilities:

- Strong knowledge of annuity and annuisty products
- Processing of all individual **insurance applications (life**, disability & long term care) and investment application.
- Extensively worked with Risk Management, Mortgage Loan Servicing, investment application and Commercial and Residential mortgage, CMBS, MBS.
- Studied and assessed the clients systems and business processes
- Streamlined clerical work processes and mapped to the automated system
- Provided management to quick and easy access to all current economics (i.e. construction status, leasing status, etc.) of the collateral pertaining to all the loans in the portfolio
- Assisted in building a business analysis process model using Rational Rose and Visio
- Performed requirement analysis, went through all the use cases and workflows
- Designed and developed Use Cases, Activity Diagrams, Sequence Diagrams, OOD using UML
- Played a key role in the planning, UAT, and implementation of system enhancements and conversions
- Conducted Porter's Five Forces Analysis to determine the demand, supply and market conditions for the auto insurance industry

Environment: Windows 2000/NT, **BI**, Oracle 8i, SQL, HTML, XML, Microsoft Office suite, Rational Requisite Pro, Microsoft Visio, Test director, Clear Quest, Mercury Quality Center, UML, Rational Unified Process (RUP)

Punjab National Bank, Delhi INIDA Business Analyst

Jan 2007-Sept 2007

Responsibilities:

- Used MS Visio to create business process flowcharts and workflow diagrams for analyzing ERP, **Equity, Banking applications.**
- Utilized Rational Unified Process (RUP) to configure and develop processes, standards, and procedures
- Worked on Business and Data Analysis, Data Profiling, Data Migration, Data Integration, Metadata Management Services and **Data warehouse** tools.
- Participated in data modeling; planning, designing, implementation of the data warehouse and conducted testing. Produced data mapping and data definition documentation
- Involved in reviewing and writing **BRD**,URS and Functional Requirements for MDM **Business** and Data Quality Requirements.
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