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## **SUMMARY:**

Over **10** years of progressive experiencein Project Management & Business Analysis with excellent understanding of industries like **Healthcare, Insurance and Pharmaceuticals** to contribute in continuous delivery capabilities and growth of client. Quality experience in working with clients to understand and implement requirements and in providing team leadership for development support teams comprising company as well as client and third party contract staff. Hands-on Project management experience developed and established through a variety of project management and work cross-functionally to solve problems and implement changes. Strong work ethics and analytical skills coupled with good communication and interpersonal skills describing a committed team player.

## **EXPERTISE:**

* Strong knowledge of **Rational Test Manager,** used for test analysis to test management to execution to reporting.
* Prepared **Business Requirement Documents (BRD), analyzing Business Requirements, working with Requirements Traceability Matrices (RTM), re-engineering business processes**.
* Extensive experience within the field of **project management, business analysis, Business process design, application systems analysis, object oriented analysis, system analysis & design.**
* Excellent knowledge of Medicare **Part A, Part B, Part C and Part D**.
* Experience with conducting assessments and impact/gap analysis concerning State **Medical Management Information System (MMIS).**
* Experience and knowledge on **CPT/ HCPCS, HIPPA standards, EDI** (Electronic data interchange), Implementation of **HIPAA** code sets, **ICD-9, ICD-10** coding and **HL7**.
* Used **HIPAA 4010** transactions to support the analysis of current business processes and work with management to improve and implement enterprise solutions to ensure compliance and got involved in designing future state processes for **HIPAA 5010 transaction processing EDI's 837, 835, 820, 271/272, 276/277, 278 and 834 and ICD-10 Code sets**. Experienced in **Healthcare payer/ provider services**.
* Experienced in Conversion of **HIPAA X12 4010** codes to **X12 5010 codes.**
* Experienced in Conversion of **Procedural and Diagnostic codes**, **ICD 9 to ICD 10.**
* Expertise in **Software Development Life Cycle (SDLC) including Waterfall, Agile/SCRUM, RAD,** Rational Unified Process (**RUP) methodology.**
* Experienced in leading daily standup daily meetings with the **SCRUM team and sprint timeline**.
* Created and updated **data mapping document**(s).
* Experienced in conducting **GAP** Analysis, interviews with the Subject Matter Experts **(SMEs)**, Cost Benefit Analysis, **SWOT Analysis** and **Return of Interest (ROI)** Analysis.
* Handled multiple projects involving multiple team sizes, involved in Clinical Trial using **SCRUM** development methodology, establishment of recommendation of new firm wide coding and testing standards.
* Experienced in creating **Data Flow Diagrams (DFD)**, Use Cases, Class Diagram, Activity Diagrams, Sequence Diagram, and **UML** Modeling.
* Extensive experience on **Excel, Word, PowerPoint, MS Project, MS Visio, Rational ReqPro and SQL**.
* Experience in **White Box, Black Box, Unit, Functional, Integration, User Acceptance Testing (UAT), Back End and System Level Load** and **Stress Testing** for many types of applications including web and client server applications.
* Ability to apply a mature and diplomatic approach to prioritization of tasks and conflict resolution.

**TECHNICAL SKILLS:**

**Packages:** MS Office, MS Visio, MS Project

**MS Office Tools:** MS (Word, Outlook, Excel, Access, PowerPoint), 2003/07, MS SharePoint

**Tools:** **Rational TestManager**, Rational Rose, Requisite Pro, HP Quality Center, Clear case, Clear Quest, Clarity, PPM tool.

**Methodologies:** Joint Application Development (JAD), Rapid Action Development (RAD), Rational Unified Process (RUP), Unified Modeling Language (UML), System Development Life Cycle (SDLC), Waterfall Model, Agile model, SCRUM.

**Business Documentation Skills:** Documented Business Requirement, Use Case Specifications, Functional and Non**-**functional Specification, System Requirement Specification, UML Diagrams (Use case, Class and Sequence), Traceability Matrix, Project Estimate, Change request, Change- Training and User Manuals, Master Test Plan Review (Integration, System and Acceptance).

**PROJECT MANAGER SKILLS:**

Financial Forecast, Developing Budgets, Coaching, Supervision, Staffing, Project Management, Management Proficiency, Process Improvement, Tracking Budget, Planning, Performance Management, Dashboard, Business Process Improvement, Verbal/written Communications, Quality Control Processes, Negotiation, Proficient Communicator, Collaborative leader, Confident Decision Maker, SOWs & RFPs, Contract Management.

**WORK EXPERIENCE:**

**EmblemHealth, NY July 2016 – Present**

**Project Manager (EPMO)**

* Initiates the project from beginning and building the framework that aligns with the business need & stood up project team.
* Prepares Work break down structure & established the project to baseline.
* Prepares Communication project plan with theco-ordination of the SMEs.
* Works closely with stakeholders to identify the tasks owners, helping them establish due date; identify roadblocks, critical path to deliver the tasks on time.
* Prepares & communicate weekly status to the stakeholders.
* Conducts the Executive Steering Committee.
* Co-ordinates with the on-shore and the offshore teams to make sure work is delivered on time as planned.
* Manages the product development lifecycle across multiple product teams in multiple global locations while maintaining legacy systems.
* Facilitates alignment of product initiatives to company goals and profitable solutions through short and long range roadmap planning paired with detailed user story definition, grooming and prioritization.
* Proven success managing the execution and delivery of high impact enterprise level projects
* Demonstrated ability to work effectively in cross-functional teams and matrix environments in fast-paced entrepreneurial settings
* Skilled at learning new concepts quickly, working well under pressure and communicating ideas clearly and effectively to both internal and external customers
* Flexibility to pivot between product management, business analyst and project management responsibilities as needed resulting in comprehensive hands on experience in the complete SDLC.
* User experience advocate with proven execution of UX/UI overhauls for customer-facing products
* Works with the senior leadership to resolve project related issues.
* Provide consulting advise on process improvement to help the business in day-to-day activities.
* Works with the stakeholders to establish the Operational readiness project plan to make sure right contacts are assigned/engaged & educated to complete the operation tasks on time.
* Provide SME support in regards to the Language Accessibility & Non-Discrimination mandate from the regulation standpoint.
* Provides potential business/Technical solutions per the current situation with the client/business area.
* Mentors & provide oversight to the newly hired and Junior Project Managers.
* Co-ordinates and strategize implementation of the Care Management implementation for the Organization to bring huge ROI in calendar year 2017.
* Facilitates working sessions to stand up the Emergency room program for Case Management.
* Implements training programs for Nurses and related clinical staff as well as non-clinical to support Care Management Implementation.
* Coordinates and managed the day-to-day activities to plan, track status, brainstorm workflow for the Acute, Complex care & Disease Management Pillars.
* Co-ordinate with Analytics team to generate Clinical Analytics reports e.g. operational reports, Outcome reports & Leading indicator reports.
* Helps clinical operation business area to improvise existing reports in co-ordination with Clinical analytics team.
* Coordinates with stakeholders to ensure timely deliveries
* Helps project sponsor to create Business case and related documentation to get the initiative or idea into an approved project.
* Responsible for overall project scope management, client satisfaction, project schedule, budget, resources, overall tracking of issues, risks and deliverables.
* Manage inflight and intake projects utilizing Project Portfolio Management (PPM) system.

**Project Name:**

1. **2017 Corporate project Portfolio**
2. **Care Management Implementation**
3. **Medicaid Re-design Team 2017 – School Based Health Centers**
4. **Benefit Re-instatements for key Employer group**
5. **IRS 6055/6056 Regulation (implementation Social Security Number Elicitation/1095 & 4B Forms)**
6. **Social Security Number Replacement Initiative (HICN to MBI) – Initiation Phase**

**Independence Blue Cross Oct. 2012 – June 2016**

**Project Manager (PMO)**

**Project Name (Multiple Projects):**

1. **Health Care Reform: The Patient Protection and Affordable Care Act (PPACA)** was signed into law onMarch 23, 2010, to address access, quality, and cost in the health care industry. Legislation have been designed to address the following: improving the quality of health care delivery, reducing the overall costs if health care and expanding access to health care. Some related projects I have worked on:

* **IRS 6055/6056 Regulation (implementation Social Security Number Elicitation/1095 & 4B Forms)**
* **CMS Machine Readable Mandate & Health Insurance Exchange (HIX)-** Qualified health plan (QHP) issuers to post Provider Network Formulary and Plan content in a machine readable format on issuers’ public website & send to the CMS to publish on HIX. And, to the Department of Health and Human Services (HHS). The new standards will lead to greater transparency for consumers, including by allowing software developers to access formulary and provider stat to crate innovative and informational tool. In order to increase and enhance transparency of QHP formulary information, issuers must publish an up-to-date, accurate, and complete list of all covered drugs beginning of the plan year. This information will help software developers and CMS to access this information to create tools to help enrollees better understand the availability of the drugs and providers in a specific plan on-exchange. Also, built the new process to receive the HICS cases when members to identify the discrepancy on accuracy of information, unavailability, etc.
* **Taglines in Non-English & Non-Discrimination in Health Program**
* **HCR Out of Pocket Maximum Shared Accumulators**

1. **Medicare as Secondary Payer (MSP) Employer Canvassing –** Establish the infrastructure for ongoing annual canvassing of our employers for MSP purposes through Highmark beginning in 2016.
2. **Delaware Autism Mandate –** Delaware State Senate Bill Number 22 – an act to amend title 18 of the Delaware code relation to Autism Spectrum Disorders Coverage.
3. **Sleep Management Program** was administered and managed by AIM Specialty Health to Independence Blue Cross (IBC) and AmeriHealth New Jersey members. Opportunities exist to achieve savings with the implementation of a Sleep Management Program. In addition performing pre-authorization, the AIM Specialty Health Program will redirect sleep management studies to high value, low cost settings and monitor treatment adherence as well as reductions in diagnostic spend; increased member compliance with treatment.
4. **ICD-10** Remediation is a program toremediate all IBC’s processes and system support the mandated movement from ICD-9 to ICD-10. The CMS compliance date is October 1, 2014.
5. **Operational Enhancements** for alignment and fine tuning issues confine of the Small Group and Individual Market Segments: Process Monitoring, Reporting, Business Rules in Marketing and Underwriting Systems, Marketing and Underwriting Cash Application Systems, Reimbursement process, Streamlining processes between departments across the Family of Companies related to both new business ad renewals in the small group market, improvements to the NJ state certification process and upcoming certification from the sales and renewal process.

* Established the Project Plan for the project, including Milestones, Project work streams and Release dates utilizing Clarity tool.
* On-boarded resources to the project per the Resource Management process.
* Expert in agile and waterfall project management methodologies. Able to manage large project teams and known for high-quality deliverables that meet or exceed timeline and budgetary targets.
* Conducted Benefit review and Risk analysis.
* Formulated and defined scope and objective based on user needs and thorough understanding of the business processes.
* Assessed the current capabilities of the organization in terms of the business processes, applications, data, technology, and change enablement.
* Coordinated the project related activities throughout the lifecycle of the project.
* The ability to take direction, work independently, and perform detailed work in a high paced, dynamic environment; handle multiple projects simultaneously; and ensure tasks are completed and deadlines are met as required.
* 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.
* Ability to work and facilitate dialogue with Third Party Vendor.
* Ability to work effectively with all levels of management and other colleagues, and demonstrate initiative, mature judgment, superior customer service orientation, and the ability to anticipate the needs of the organization.
* Demonstrated the ability to adapt to changing business requirements and develop/execute tactical & strategic plans to meet business needs.
* Worked with the stakeholders on process improvements projects designed to improve results. Gathered and analyzed information and provide recommendations to address and resolve root causes.
* Evaluated/researched business problems and their relationship for technology.
* Added value to leading business process re-engineering efforts and demonstrates Business process improvements.
* Helped team manage & create Desk level Procedures (DLPs) to support on-going process and or business driven changes.
* Organized and presented ideas in a convincing and compelling manner.
* Identified process, technology and organizational role changes necessary to support business goals and objectives.
* Facilitated dialogue across functional areas and provide consultative direction.
* Business analysis, Risk analysis, GAP analysis, Traceability matrix and project planning to identify the deficiencies of the current system and to identify the requirements for the change in the proposed system.
* Tackled complex business/system problems and conveys this information to stakeholders (includes technical teams for translation into solution design).
* Achieved operational objectives by contributing information and recommendations to strategic plans and reviews; preparing and competing action plans; resolving problems; completing audits; identifying trends determining systems improvements; implementing change.
* Collaborated with finance in generating purchase orders and payments; tracking annual spends, revenue and cost savings.
* Acted as a single point of contact for vendors and internal users of their services for escalations and new engagements

**OptumHealth (United Health Group), NJ Jul 2011 – Sept 2012 Project Manager**

Optum is a health services business dedicated to making the health system work better for everyone. **As a company, we fundamentally believe that the health system can work better for everyone.** And together with our clients, we deliver integrated, intelligent solutions designed to modernize the health system and improve the health of individuals and populations. Two of the key building blocks to achieve Administrative Simplification compliance are HIPAA 5010 and ICD-10. The combined changes of HIPAA 5010 and ICD-10 impact the entire payer organization. As a Health Care Business Analyst on a HIPAA assessment project my specific assessment areas are Up-gradation of HIPAA X12 4010 transaction to HIPAA X12 5010 and ICD-9-CM (Clinical modification) to ICD-10-CM/PCS (Clinical modification/procedure coding system)

**Responsibilities:**

* Used extensively **Rational TestManager** for planning tests, designing tests, implementing tests, executing tests and evaluating tests.
* Used **Requisite Pro** for the Requirement Document Preparation and **Prepared Business Process Models (BPM)** that includes modeling of all the activities of the business from the conceptual to procedural level.
* Facilitated **JAD sessions** with management, development team, users and other stakeholders to refine functional requirements.
* Produced Gap Analysis documents for HIPAA 5010 and ICD-10.
* Identified gaps and performed **gap analysis, cost analysis** with respect to **CMS** requirements.
* Prepared and maintained **requirements traceability matrix (RTM**) throughout the project lifecycle.
* Worked on **HIPAA EDI transactions** such as **835**, **837**, **276**, **277**, **278**, **270**, **271, 834, 820**
* Performed Impact analysis for readiness of **ICD-10 conversion**.
* Used **SDLC (System Development Life Cycle)** methodologies like the **Agile** and the **RUP**.
* Authored **Companion Guide** to support all the information needed to process HIPPA transactions with United Healthcare.
* Streamlined the Restatement Financial Data Warehouse access review Process.
* Included in selection committee for the selection of a code-mapping **tool**.
* Created **use case models,** analysis models, implementation models, authored use cases, use case diagram, behavior diagrams (sequence diagrams, activity diagrams) based on **UML methodology using Rational Software Modeler and MS Visio.**
* Performed Unit Testing and **User Acceptance testing** and documented detailed results. Provided input (scope, goals, risks, constraints, timelines and interfaces) to **PM** for project planning and control.
* Interacted with various **HMO**, **PPO**, Medicaid/Medicare Representatives discussing benefits of contracts on behalf of facilities or appeals from denials and compliance issues.
* Acted as **User Acceptance Testing** **(UAT)** coordinator and monitored business testing and interface with the development team regarding defect status and fixes on a daily basis.
* Worked with the compliance and audit team to make sure we were following correct HIPAA guidelines/protocols throughout the project lifecycle.
* Involved in **SWOT analysis** of project plan.

**Environment: .**Net, MS Visio, MS Excel, MS Power point, MS Word, MS Project, SharePoint Server, SQL, HTML, Rational TestManager, Rational Requisite Pro, Load Runner.

**Connecticare, Farmington, CT Oct 2010-Jul 2011**

**Project Manager**

ConnectiCare is one of the largest HMOs in Connecticut. In 1979 a group of doctors at Hartford Hospital planted the seeds for what would become ConnectiCare; today, the company's 240,000 members in Connecticut and western Massachusetts choose from HMO, PPO, or point-of-service options. The project was to upgrade an online management web application that allowed the providers to automate tasks like Patient Management, Appointment Scheduling, Reporting, and Filing Claims through EDI (ANSI) X12 transaction sets in compliance with HIPAA standards. The other aspect of project included mapping data for conversion of HIPAA 4010 to 5010.

**Responsibilities:**

* Used **Rational TestManager** throughout the project for testing, planning, execution and reporting.
* **Conducted requirement gathering** sessions with the purpose of creating and defining the Business Requirement Document (**BRD**) and the Functional Requirement Document (**FRD**).
* **Interacted with stakeholders** to get a better understanding of client business processes and gathered requirements. Followed top down, leveled technique for building **Business Process Models (BPM).**
* Tracked stakeholder requested enhancements and changes using **Requirement Traceability Matrix (RTM).**
* Conducted interviews, live meetings and **JAD** sessions with business users and **Subject Matter Experts** (**SME’s)** to understand the As-Is system and gather requirements for the To-Be system.
* Analyzed the laws and regulations (**HIPAA, HL7, EDI X12**) before implementing the electronic medical record software Analyzed Claims adjudication related transactions like **835, 837, 270, 271, 276 and 277** transactions (both inbound and outbound)**.**
* Implemented SDLC, which included requirements specifications, design, analysis and testing. Followed RUP methodology with **Agile/SCRUM.**
* Organized daily **scrum** calls to keep the team on track and the stakeholders updated.
* Assisted in writing **test case** scenarios, developed Use Cases, **Activity Diagrams, Sequence Diagrams** and **End to End Scenarios** using **UML and MS VISIO**. Planned and defined system requirements to Wire Frames with **Use Case Scenario** and Use Case Narrative using the **UML** (Unified Modeling Language).
* Excellent skills in **Data Warehouse** Application software, using **Data Warehouse Design,** Analysis, Architecture.
* Analyzed trading partner specifications and authored **Companion Guide.**
* Documented, organized and tracked the requirements using **Rational RequisitePro**.
* Worked with Source system Subject Matter Experts (**SMEs**) to ensure that the extracts are properly mapped.
* Documented various key elements of **HIPAA compliance** and made sure that they were understood by the development teams and ensured that the test cases written for the project were **HIPAA** complaint.
* Extensively used **SQL** for data extraction and took part in **User acceptance Testing (UAT)**.

**Environment:** SQL Server, Windows XP, Rational Rose, Rational Requisite Pro, Rational TestManager, Clear Case, Clear Quest, UML, XML, Rational Suite, MS Visio, SharePoint, MS Project, MS Office (MS Word, MS Excel, MS PowerPoint)

**Illinois Department of Healthcare and Family Services, Springfield, IL Sep 2009- Sep 2010**

**Business System Analyst-Medicaid plans**

The Illinois Department of Healthcare and Family Services is committed to empowering Illinois citizens to lead healthier and more independent lives through providing quality healthcare coverage for children, parents, seniors and persons with disabilities; establishing and enforcing child support obligations. The scope of the project included development of user interface, web service and covering provider (Dental/Medical/Institutional), claims and Reimbursement processing domains. I was involved in providing support throughout the complete lifecycle. The Illinois MMIS should be able to meet the minimum functionality necessary to electronically send, receive and process the HIPPA compliant standard transaction.

**Responsibilities:**

* Gathered the requirements from stakeholders and users by meeting them personally and by interviewing them. Utilized Requisite Pro to prepare a BRD by complying with the HIPAA regulations.
* Extensively used SharePoint for project documentation Facilitated **JAD sessions** interviews, brainstorming sessions and document analysis with management, development team, users and other stakeholders to refine functional requirements.
* Prepared **Work Breakdown Structures (WBS)** to comply with the triple constraint: time, cost and scope.
* Developed the **Business Process Mode (BPM)** for the current state and future state for each area of the project and identified the Business Use Cases.
* Used **SDLC** (System Development Life Cycle) methodologies like the **RUP** and the **waterfall.**
* Conducted Lean Analysis throughout the project and conveyed my team a message, **“Think big, act small, fail fast; learn rapidly”.**
* Prepared a roadmap for a product that can exceed market and user expectations.
* Maintained documentation related to difficulties, complexities and anomalies that may arise during the **ETL process.**
* Documented Test Plans and prepare of **Requirements Traceability Matrixes (RTM)** that contains test scripts, test cases, test data and expected results for the **User Acceptance testing**.
* Developed use cases using **UML diagrams and MS Visio**; depicted clear relations associated between the entities.
* Interfaced with **Quality Analysts** for unit, integration, system and **User Acceptance Testing (UAT).**
* Worked on all Medicaid Users transactions involving electronic data interchange.
* Reviewed and analyzed the business environment and identical process improvements.
* Evaluated alternative solutions and recommend solution that best meets the need of the business.

**Environment**: SDLC, SQL, Microsoft Excel, Microsoft Word, MS Visio, MS SharePoint, MS Project 2000/2003, JAVA, Rational Clear Quest, ETL, Rational Test Manager, Rational Requisite Pro, Oracle, UML, Lotus Notes.

**Astra Zeneca, Woodland Hills, CA Aug 2008- Aug 2009  
Business Analyst**

AstraZeneca is a global, innovation-driven biopharmaceutical business with a primary focus on the discovery, development and commercialization of prescription medicines. AstraZeneca operates in over 100 countries and its innovative medicines are used by millions of patients worldwide. My project was to replace AstraZeneca platform with new IVR, CTI, and speech hardware and software to improve the caller’s experience in navigation and information access. The new IVR directly integrate the new technology with existing Avaya switch & communications manager which improves the use of speech recognition technology, integrate with existing web services for self-service functions, improve reporting capabilities within the IVR and integrate with the CRM system.

**Responsibilities:**

* Created and reviewed **business requirements, functional specifications, project schedules and documentations.**
* Prepared **Business Process Models (BPM)** that includes modeling of all the activities of the business from the conceptual to procedural level.
* Involved in **gathering, analyzing and documenting** business requirement, specifications and **Requirements Traceability Matrices (RTM)** throughout the project lifecycle.
* Facilitated **JAD sessions** with management, development team, users and other stakeholders to refine functional requirements.
* Prepare schedule workflow following **agile methodology** of software development.
* Involved in constructing an integrated **IVR CRM** (Customer Relationship Management) application to provide system access to real time customer data and information.
* Performed **Gap Analysis** to identify the gap between the optimized allocation and integration of the inputs, and the current level of allocations, **cost analysis**.
* Extensively used **SharePoint** for project documentation
* Reproduce, verify and validate issues documented in a defect tracking system and writing tractability matrices based on use cases and **business requirements (BRDs)** performed the requirement analysis and documented the requirements using Rational Requisite Pro.
* Organized impacted systems into high, medium and low impact to help business analyze the level of effort for remediation activities and ease resource allocation work.
* Created **use case models,** analysis models, implementation models, authored use cases, use case diagram, behavior diagrams (sequence diagrams, activity diagrams) based on **UML methodology using Rational Software Modeler and MS Visio.**
* Analyzed the **test results** from **QA teams** using Performance Studio Analysis to create various scenarios.
* Involved in **UAT sessions** to test and validate the system with stakeholders.
* Interacted with the compliance and audit team to make sure we were following correct HIPAA guidelines/protocols throughout the project lifecycle.

**Environment**: SQL, JAD, Java, Oracle, UML, Windows XP, Business Objects, Informatics, MS Project 2000, MS Word, MS Excel, MS Visio, SharePoint.

# Humana, Overland Park, KS Jul 2006- Jul 2008

## **Application Business Analyst**

Humana Inc.is an American managed health care company that markets and administers health insurance, the second-biggest provider of Medicare benefits. Humana markets its health insurance services in all 50 U.S. states, D.C., and Puerto Rico, and has international business interests in Western Europe and Asia. My Project was to incorporate a wide range of features for policyholders and new customers in Humana’s Web Portal. I worked with an application that was taking care of **Online Account Services** that included Billing Application, Checking the bill history, changing customer profile, ordering insurance ID cards.

**Responsibilities:**

* Involved in documenting **Business Requirements Document (BRD)** by conducting interviews with the project stakeholders, **SME’s** and Business users.
* **Documented Traceability Matrix (RTM)** to ensure all the features for the project has been captured and mapped back to the requirements in the BRD.
* Performed **GAP analysis** and documented business and system level use cases to derive the requirements illustrating the functional behavior.
* Collaboration and reviews with different application owners and SME’s to ensure the GAP Analysis was performed accurately.
* Documented and reviewed the post implementation summary with the senior management regarding the gaps identified during the project.
* Implemented an integrated RUP solution with complete line of trace ability for all the artifacts of web development projects.
* **Business Process Modeling (BPM):** Business process improvement and optimization, Document and model business processes, automated workflows and Manage business rules.
* Thorough understanding of business process to help determine the user needs.
* Developed design for the application for management to analyze the market trends, behavior, habits etc. by collecting relevant data at various points and organizing the data into appropriate **data warehouse**s and data marts.
* Developed Data Flow, Work Flow, Process Flow, and Entity Relationship Diagrams in MS Visio.
* Managed the testing phase (inbound and outbound) with various Medicaid claims, group claims by various employers, Pharmacy Benefit Management (PBM) claims etc.
* Performed application functionality **user acceptance testing experience (UAT)** (i.e. front-end application testing) in a controlled testing environment that replicates the end user usability of the application.
* Used **Clear quest and HP quality center** to log defects and assign to the right team to ensure the defects are addressed on a timely manner.
* Responsible for creating UML modeling plans, Use cases, process flows, Wire Frames and business requirements documentation using Visio.
* Ensured the UAT test scripts review sessions with business owners to test the application functionality and provided necessary training material.

**Environment:** RUP, Rational Rose, Clear Quest, Soda, Requisite Pro, UML, SQL, MS-Office, MS Project.