**Vaibhav**

Senior Business Analyst

**Professional Summary:**

* Adept knowledge about all the stages in a Software Development Life Cycle (SDLC) including the deliverables at all the stages: proficient with industry standard methodologies like, Waterfall, Agile, Scrum, Waterfall – Scrum Hybrid.
* Senior Business analyst 10 + years of proven experience in Healthcare & Insurance and Pharmaceutical Industry.
* Excellent knowledge of Epic Build, Epic Clinical Workflows, Epic Implementation, Revenue Cycle, Provider, Professional, Facility, COB, Medicare/Medicaid Claims, HL7 Interface Messages, Split Claims, Medical Necessity, Dual Coding, TA1, 999 820 EDI Transactions, EOB, EOP, Claim Adjudication, FACETS & NASCO User Interface.
* Extensive experience with various Business Analysis tools like Optimal Trace, Doors, Blueprint, content Management suites (MS SharePoint, Documentum) and CRM applications.
* Well versed with the conversion standards of HIPAA 4010 to 5010 and ICD-9 to ICD-10Codes. Exposure to HIPAA Compliance requirements and HL 7 standards. HIPAA Transaction and Code Sets (EDI 834, 835, 837, 270, 271, 276, 277, ICD-9, ICD-10), Electronic Health Record (EHR)/Electronic Medical Record (EMR).
* Having extensive domain knowledge in MMIS, EPIC, EDI X12, HL7, HIPAA, System, Medicare and Medicaid, CMS Compliances/Regulations.
* Also worked as an ETL specialist, Validation Specialist, Project Manager, Clinical Study manager, Implementation Consultant and Business Relationship Manager
* Analyzed the existing reports of the reporting system in the database. Checked the consistency of the data after ETL process using SQL queries.
* Experience with business process integration across systems, platforms & application migrations for Sales force CRM application.
* Agile product owner for a SaaS law management system, managed product backlog and oversaw local development engineers along with an offshore development team. Spearheaded effort to bring developers into the Agile fold and lead the effort to stabilize and innovate the application.
* Worked on Clinical Business Process Management, trial analysis, design, development, testing, and implementation
* Strong experience in Business and Data Analysis, Data Profiling, Data Migration, Data Integration and Metadata Management Services.
* Analyzing the test scripts provided by the End client and finding the Gaps against the test cases
* Provide technical support for Audio/Video/Web conferences with IP integration
* Functional experienced in Claim Life Cycle and Health Care Payer domain process along with various line of health insurance system like PPO, HMO, POS
* Participated in functional design sessions, creates and executes SQL test scripts, and aids in the solution of data issues.
* As the Product Owner of CaseEdge, I am involved in Backlog Refinement, Iteration Planning, Release Preparation, Story creation and Team Demos & UAT.
* Plan, build, test and maintenance of clinical databases in Medidata Rave for assigned studies.
* Adept in reviewing Test Procedures, creating Test plans, Test Scenario, executing Test Cases, Test Data reviewing and maintaining and executing detailed Test scripts for User Acceptance Testing (UAT) for CRM applications.
* Proficient in Sales force SFDC, Force.com and their use in the development of CRM solutions
* Ability to organize, document and track changes and defects, tickets using the Rational ClearQuest, Remedy and archive change request, version control and builds in Clear Case.
* Expertise in developing and documenting Scope Documents, Business Requirements Documents (BRD), User Requirement Documents (URD), User Stories, Functional Design Documents (FRD), Use Case Specification Documents, Software Requirements Specifications (SRS).
* Used data analysis techniques to validate business rules and identify low quality missing data in the existing Amgen enterprise data warehouse (EDW).
* Incorporates all external data sources e.g. lab, ECG, etc. with clinical database.
* Reviewed EDI companion guides for all payers to ensure compliance, edit integrity and maintain up-to-date list of payer contacts.
* Creating Test Scripts in HPQC for the Gaps identified.
* Manage biweekly sprints as Product Owner in agile environment using TFS. Facilitated the daily scrum meetings, sprint review, and sprint retrospective.
* Validated the test data in DB2 database on Mainframes using SQL queries.
* Participated as lead Senior Business Analyst in various activities.
* Lead design and review sessions with the technical and business teams
* Collaborate with the Product Owners and help prioritize the Product Backlog
* The technical support representatives needed the ability to search articles matching reported problems, creating new articles where appropriate, and linking articles to the customer reported problem.
* Designed the Data Warehousing ETL procedures for extracting the data from all source systems to the target system.
* Experience in understanding, detailing and implementing Full Project Management Lifecycle for software systems using Software Development Life Cycle process (SDLC), RUP and AGILE methodologies.
* Expertise in Health Insurance Portability & Accountability Act (HIPAA) standards, Electronic Data Interchange
* Implementation (EDI), 21CFR10, CDISC, Gxp & HIPAA D.0 layouts for incoming claims transactions.
* Worked extensively with developing business rules engine enabling the business rules such as referral, prior authorization, eligibility, claims processing and billing essential.
* Expertise in broad range of technologies, including MS Office (Word, Access, PowerPoint, Excel, and Visio), MS Project and MS Visio.
* Collaborate with the Product Owners and help prioritize the Product Backlog
* Involved in testing activities of Clinical Data Management activities like Data Entry, Data Validation and verification, Quality Control and error checking.
* Develop RFP and SOW documents for various payers.
* Performed data analysis on the existing data warehouse's of AFS, ACBS and infolease.
* Experienced in Tableau Server administration including setting up Active Directory users and groups, giving appropriate permissions for viewing published dashboards and scheduling data refresh instances.
* Performed ETL operations to extract data from flat files and load them into SQL server using SSIS
* Analytical and detail oriented with excellent documentation, presentation and facilitation skills.
* Experience in working with SAS environment, metadata, development, testing, documentation, maintenance and support.
* Worked heavily on SQL Server database to extract data and build Business reports.
* Creating Test Scripts in Test Link
* Facilitated Defects call with the offshore team twice every week, worked extensively on clear quest. Received all the updates related to critical open defects.
* Experience with web application development, and SAS based clinical trials applications.
* Adept in managing requirements, compliance documents in MS SharePoint suite and utilizing/accessing the various features.
* Healthcare Payer System - Health Trio - Claims Processing and Monitoring of daily operation
* Business Analyst for front & middle office trading floor applications and technical support to Fixed Income trading desks.
* Excellent understanding of Data services, Data ETL using SQL query tools and applications.
* Analyzed requirements for various reports, dashboards and created them using Tableau desktop server
* Established Best Practices for Enterprise Tableau Environment and development processes.
* Used Informatica and Data Stage for extracting, cleansing, transforming, integrating, and loading data into data warehouse database.
* Acting as Primary Technical Support for Financial and Campus Solutions modules
* Extensive knowledge in various reporting objects like Facts, Attributes, Hierarchies, Transformations, filters, Calculated fields, Sets, Groups, Parameters etc., in Tableau.

**Professional Experience**

**AbbVie Pharma Inc. Jan 2021 – Present Senior Business Systems Analyst**

**Description:** The project involved working on patient data integration and data integration, aggregation, reporting and data quality monitoring and proposing digital-focused ideas for the immunology business. Coordinating with Patient Services data strategy and Commercial Data Lake Operations for Immunology brands.

**Roles & Responsibilities:**

* Works directly with Market Access function to understand specific business needs. Collect complete and accurate requirements by means of interviews, workflow analyses, facilitated discussion to deliver data or technology solutions.
* Working on Access and Reimbursement business processes and gaps, identify demand and responsible for defining solutions to address business demand.
* Hands on experience in working closely with Process SMEs to prepare Process Definition Document (PDD) & Solution Design Document (SDD) and educated SMEs to work with Bots in production.
* Supporting business and technical teams during robotic projects and mitigate/Resolve risks and issues that may impact project schedule, cost, scope, quality.
* Facilitating priority meetings with stakeholders to help business understand the impact of the JIRA in prioritizing them.
* Responsible for review and approval of data specifications, solution, process flow and data sharing from Privacy and Compliance team.
* Performed data analysis with standard statistical methods, data profiling and data quality techniques and interpreting the results to SME’s.
* Establishing and maintaining high-quality relationships with all levels across the company and with external partners.
* Supporting HEOR organization on Real World Evidence studies with external partners and internal analysis for Immunology patient services.
* Responsible for coordinating implementation of Specialty pharmacy data integration solution with Commercial Data Lake team.
* Working in software integration testing and web services API testing using SOAP UI. Worked with QA team in creating a test suit, test cases, test file and test definition.
* Working on Integration applications like (Web Services, Mainframe, MS Office, GUI, Outlook etc.) using workflow, automation tools (Blue Prism).
* Develop Reports/interactive dashboards with dashboards with different analytics views (Drill-Down/ Dynamic, Pivot Table, charts, Tabular with filters) based on user requirements in Tableau.
* Integrate the third-party services for CDD and EDD and real-time checks on on-boarding people and company integrated our application server with the comply Advantage’s REST API.
* Create and managed user stories and Product Backlog in JIRA, helping aid customer engagement through a product management mindset.
* Responsible for architecture design, data modeling, and implementation of Big Data platform and analytic applications.

**Cigna Health Care - Minneapolis, MN Apr 2019 - Dec 2020**

**Senior Business Analyst (Health Insurance)**

CIGNA Healthcare is the for-profit health insurance company, which operates under the CIGNA corporation umbrella. CHC operates health plans throughout much of the United States and in a growing list of countries around the world. Cigna Navigator Web Application provides quality level of Health services for customers. The insurance Application involves quotation tool and enables the customer to complete the transaction after selecting the insurance plan, pricing, location details etc. Also, agents can quote or complete the application online on behalf of the customer. This includes Health insurance, Policy and Claim Service modules. I focused more on Health insurance claims automation module.  
**Roles & Responsibilities:**

* Conducted the role of Senior Business Analyst and Senior Quality Analyst for the Cigna Health Insurance Marketplace Eligibility & Enrolment project.
* Gathered Business Requirements, interacted with the Users, Designers and Developers, Project Manager and SMEs to get a better understanding of the Business Processes.
* Gathered and analyzed the User Requirements from walkthroughs and interviews with the business groups and in-house stakeholders, and many other departments like accounting, fund management, human resource and thus converted User Requirements into Business Requirement Documents (BRD).
* Used Electronic Medical Record (EMR) to extract useful information regarding patients for claim submission to the insurance company.
* Accurately forecast clinical trial timelines using advanced modeling and simulation techniques.
* Healthcare Payer Systems Change and Defect Management
* Produce and explore requirements in collaboration with product owner, scrum master and project manager at the level of detail required for Sprints
* Designed SSIS Packages to transfer data between servers, load data into database on SQL Server 2005 environment and deploy the data.
* Experience in interacting with business analysts, developers, technical support and help them base line the requirement specifications
* Analyzed requirements for various reports, dashboards and created them using Tableau desktop server
* Involved in various Facets Data models like Gateway, Claims, Membership, Provider, Billing, Capitation, Invoice, Benefits, Product and Plan.
* Mentor developers on how things work in the business domain and represent the Product Owner in Scrums
* Functioned as Primary Technical Support including production support
* Analyzed EDI X12 - 837I/P, 835 and 834 transactions consistency related to providers, payers, subscribers and other related entities
* Created Data profiling stored procedures using dynamic SQL as well as generating complex scripts to schedule various maintenance tasks
* Data Analysis: On identification, duplication, analysis and quality of stake-holder data (sources):
* Facilitated Scrum meeting with technical/non-technical team, Accounts updating, data analysis and sharing with XML patterns, SME's to clarify business rules & solve impediments, rectifying the regulatory issues with SME's and translated Functional requirements into User stories using JIRA.
* Managed Payer implementations on the system, application and system enhancements from Planning, Analysis, Design, Build, Test and Release phases.
* Used SQL to perform data analysis and generating reports for management discussion
* Prepared test data from user stories, write and execute test cases in JIRA
* Created UML Diagrams including Use Cases Diagrams, Activity Diagrams/State Chart Diagrams, Sequence Diagrams, Collaboration Diagrams and Deployment Diagrams, using Rational Rose and MS Visio and thus defining the Business Process Model and Data Process Models.
* Performed ETL operations to extract data from flat files and load them into SQL server using SSIS
* Created Test Scripts in Test Plan in the HP QC
* Collaborated with Clinical Research to accommodate to New Business Requirements.
* Used SQLs to test various reports and ETL load jobs in development, QA and production.

**Environment**: Agile, Hybrid, MS Office Suite (Word, PowerPoint, Access, Product owner, Excel, Outlook), SQL, Product Owner, Tableau, Claims, billing, HL7,Windows 2000,ETL, MS Visio, MS Project, JIRA, JAD, EDI and UML Use Case.

**Cambia Health - Portland, OR June 2018- Mar 2019**

**Senior Business Analyst (Healthcare)**

The project was to improve the claims reimbursement user interface of Coventry One for a better user experience and incorporate changes as per HIPAA guidelines. The main objective of the system was to secure the health information entered by the user at the time of submitting the claim, and to also ensure the veracity and privacy of the user information.

**Roles & Responsibilities:**

* Recommended changes for system design, methods, procedures, policies and workflows affecting Medicare/Medicaid claims processing in compliance with government compliant processes like HIPAA (4010A1) / EDI formats and accredited standards like ANSI. Worked on various modules of MMIS.
* Facilitate all agile ceremonies including daily stand-ups, weekly grooming, retrospective, and review and planning session.
* Drive weekly backlog grooming sessions with the team, ensuring work items are estimated and ready-for-work per the Product Owners priorities.
* Used SQL for querying and analysis purposes on various source tables and conditions applied and Wrote SQL joins, sub queries.
* Assessed the current system documentation for the Clinical Research Collaborations CRC System and provide recommendations for consolidating and updating the existing system documentation.
* Experience with **HEDIS Healthcare Effectiveness Data and Information Set**for benchmarking managed care effectiveness and evaluating provider payer relationships.
* Used multiple data sources by blending data on a single worksheet in Tableau Desktop
* Generated numerous Business Requirement Documents & Functional requirements specification documents, Use cases, system flow and workflow diagrams.
* Provide technical support for routine security related issues.
* Ensured compliance on all submissions in preparation of clinical data to regulatory documentation for the biological licensing.
* Produce and explore requirements in collaboration with product owner, scrum master and project manager at the level of detail required for Sprints
* Used SQL Server Reporting Services SSRS to schedule reports to be generated on predetermined time.
* Responsible for creating ETL/metadata documents for Business users to document the mapping / lineage of transactional and reference data elements using MS Excel.
* Expertise in performing Bug and Defect management using bug-tracking tools like JIRA and HP QC/ALM.
* Implemented process using EDI X12 270 / 271 verifying enrollment for all sub-contractors increasing enrollment accuracy up to 99%.
* Strong knowledge of managed care payer requirements and procedures.
* Maintained the quality of data analysis, researched output and reporting, and ensured that all deliverables met specified requirements.
* Utilized advance features of Tableau software like to link data from different connections together on one dashboard and to filter data in multiple views at once.
* Utilized JIRA to develop and track agile epics, stories and tasks.
* Mentor developers on how things work in the business domain and represent the Product Owner in Scrums
* Involved in EDI X12 process transactions tracking and reporting.
* Facilitating daily scrum meetings, enforcing time-boxes and responding to the impediments, tracking baseline, sprint planning and sprint retrospective.
* Conducted configuration and maintenance of EDI X12 formats related to Medicare, Medicaid Diversion and Commercial Payors.
* Responsible for providing database solutions using MS Access/ SQL Server/ Oracle database.
* Experienced with Microsoft SharePoint 2010, Business Intelligence Analytics SQL Server Integration services SSIS, SQL Server Analysis services, Performance Point Services,
* Ensuring Product backlog is of manageable size, preparing Product Release Burndown charts
* Experience with EMR implementation and post-implementation support.
* Managed Regulatory Document Files Managing Investigator Sites Files, Form FDA 1572, Informed Consents, Clinical Trial
* Worked with 837, UB92, UB04, CMS 1500 claims and HIPAA 835, 270/271, 276/277, 278 transactions.
* Worked on EDI transactions: 270, 271, 834, 835, and 837 (P.I.D) to identify key data set elements for designated record set. Interacted with Claims, Payments and Enrollment hence analyzing and documenting related business processes.

**Environment:** Agile,MS Visio, FACETS, EDI X12, HIPAA,Tableau,HL7, SQL,UML Product owner,2.0, MS Office Suite, MS SharePoint, Product owner, Test Director, UML, ETL, SSIS, SQL, Rational Requisite Pro, Informatica, JIRA, Rational Clear Quest, SSIS.

**Humana Healthcare, Louisville, KY May 2017 - Jun 2018**

**Business Analyst (Healthcare- Claims)**

The main goal of this project was to ensure the veracity and privacy of the user information and to secure the health information provided by users at the time of submitting the claims. I was working as a Business analyst with offshore healthcare claims team from Hyderabad and worked on planning, project management, testing, documentation, and implementation.

**Roles & Responsibilities:**

* Identifying Early Retirees, Completing the Early Retiree List Setup, Formatting the Early Retiree List, Troubleshooting Early Retiree files and informing the Plan Sponsors about the Invalid Errors.
* Created Business Process Workflow diagrams of Current and Expected System, using MS Visio and makes sure that both business and technical teams understand the process.
* Elicited business requirements by conducting JAD sessions, Interviews, Focus Groups and Brain Storming sessions.
* Prepare the MBD (Medicare Beneficiary Database) report for ERRP program. Early Retiree files were sent through the Secure Website (SWS) or a Mainframe-to-Mainframe connection, all Early Retirees on that file (excluding Spouses or Dependents) will be sent through MBD to verify that they are Medicare eligible.
* Worked on Property and Casualty insurance and provided organizational services to various companies.
* Assisting in establishing and maintaining Mainframe to Mainframe connections
* Involved in performance testing of Medicaid client server claims processing system, Medicaid MCC/MCO and Medicaid management Information System (MMIS)
* Prepared Test Plans for each release, written Test Cases and executed them as part of Functional Testing. Prepared Test Reports and Deliverables and submitted for version releases.
* Converted Business Requirements to the Functional Specification and Conducted JAD Sessions to develop an architectural solution that the application meets the business requirements, resolve open issues, and change requests.
* Coordinated the setup of new trading partners including - planning, project management, testing, documentation, and implementation. Developed and maintained functional specifications for new/existing applications needed to maintain/enhance EDI processing and address the requirements of new trading partners
* Participate in transaction analysis and mapping needs, system / interface analysis, and work with programmers to implement changes as needed. Ensure that regulatory transactions and security standards have been met.

**Environment**: Waterfall - Hybrid, MS Visio, UML 2.0, MS Office Suite, HL7, MS SharePoint, FACETS, Product Owner, Test Director, UML, SQL, Rational Requisite Pro, Rational Clear Quest, Postman.

**MAX Healthcare-Delhi, India Sep 2014-Apr 2016**

**Business Analyst**

The objective of the project is to project was to secure the health information entered by the user at the time of submitting the claim, and to also ensure the veracity and privacy of the user information. I provided support through the entire lifecycle for multiple projects involving web service and user interface development, covering Provider, Claims and Reimbursement Processing domains.

**Responsibilities:**

* Conducted various JAD Sessions to determine the filters to be used with search and advanced search
* Working one-on-one with business owners, recommending and answering questions on how AdWords can work
* Participated in all the phases of Software Development Life Cycle (SDLC) using a Hybrid Methodology
* Created Use Case Diagrams, Activity Diagrams, Sequence Diagrams and ER Diagrams using MS Visio
* Analyzed business needs, created and developed new functionality to meet real time data integration that facilitated decision.
* Worked on functions such as Change Control and Request, and managed complaints to ensure customer satisfaction.
* Active involvement in ETL design for data integration and master data management.
* Experience of managing multiple stakeholders across the organization, and in QA integration of systems.

**Environment:** MS Visio, MS Office Suite, SQL, ETL, Rational Rose, Requisite Pro, UML, Data Warehouse, Tableau, and UAT Testing.

**Religare Health Insurance -Hyderabad, India May 2012-Aug 2014**

**Business Analyst**

The project was to develop Highly Responsive Pages (HRP) and mount them on the Enterprise website with detailed demos of Improved Business Process of Insurance Company. And further location of Visitors and details are tracked and connected to the existing CRM system which helps the Organization to transform their Prospects into Potential customers.

**Responsibilities:**

* Worked with Subject Matter Experts (SME), Digital Marketing Analyst, Project Managers and BusinessOwners to understand the business process gather Business Requirements and identified enhancements.
* Conducted various sessions like JAD Sessions, Brain Storming and Focus Groups for eliciting pragmatic requirements.
* Drafted and Managed User Stories and Features and Create User story Dependency Matrix and Story mapping artifacts.
* Developed Mock Screen and Wire Frames and presented as DEMO session to the Primary Stakeholders.
* To automate Cross Browser and Cross Platform testing used Selenium Testing Framework for automated Web application testing and auto scripting.

**Environment:** MS Visio, MS Office Suite, AJAX Framework, Selenium Testing Framework, POSTGRE SQL, Apache Tomcat, Outlook, CRM Systems.

**Education**

Bachelors’ Computer application from Amravati University, MH, India

Master of Science in Information Systems, University of Memphis, TN

**Technical/ Domain Skills**

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| ***Methodologies*** | Agile, Waterfall, Rational Unified Process (RUP), UML |
| ***Business Modeling Tools*** | MS Visio, Rational Rose, Axure, Adobe Photoshop |
| ***IDE Tools*** | Rational Rose, Rational Clear Quest, Rational Clear Case, MS Visio, UML. |
| ***Requirement Management Tools*** | TFS, Rational RequisitePro, Doors, MS Share point, HP ALM, HP QC |
| ***Project Management*** | MS Project, JIRA, Confluence |
| ***Business Applications*** | MS Office Suite –MS Word, Excel, PowerPoint, MS Outlook |
| ***Testing Tools*** | Software Application Testing Life Cycle, QTP, QC, HP ALM, Selenium, HP QTP, Load Runner |
| ***Reporting Tools*** | Business Objects |
| ***Databases*** | MY SQL, SQL Server, Oracle, MS Access |
| ***Operating Systems*** | Windows, LINUX/ UNIX |
| ***Domain Knowledge*** | HIPAA, Claims Processing, EDI, HL7, HIX, EMR/HER, PPACA, FACETS, Medicaid, Medicare (Part A, B, C and D), PPO, HMO, Dental claim and POS. |