

## BUSINESS ANALYST

### Summary

Over fifteen years' experience as a senior business analyst in the state government healthcare industry. Proficient in project management and all phases of a project system development life cycle (SDLC) using both agile and waterfall methodologies. Conduct thorough assessments resulting in quality requirements. Develop system specifications that meet the client's needs and technology coding standards. Perform extensive testing ensuring quality system design and build. Maintain effective communication between client and technology to achieve a successful implementation.

### Work History

Markel Corporation

### Skills

Medicaid Management Information Systems (MMIS), Provider Enrollment Management, Professional and Institutional Claims Processing, Web-based Claims Applications - TexMedConnect (TMC), JIRA, HP Application Lifecycle Management (ALM) Quality Center (QC), Globalscape Secure Ad-Hoc Transfer Module, Joint Interface Partner (JIP) Repository, OnBase Image Repository and Reports, Project and Portfolio Management Center (PPM), OmniCaid, OmniAdd, ClearQuest, ReqPro, Consultrack, Project Web Access, SharePoint, TestDirector, Medicaid Information Technology Architecture (MITA), BI Designer, Business Objects, FTP Pro, FileZilla, Advanced Health Information Network (AHIN) application, Claredi, SeeBeyond Exchange, SQL, C/C++, MESAV, Advanced Health Information Network (AHIN), Advance Paradigm, Inc. (API), AMISYS Advance System, Database Management, Current Procedural Terminology, Healthcare Common Procedure Coding System (HCPCS), International Classification of Diseases (ICD), Medical Terminology, Electronic Data Interchange (EDI) X12 Transactions - 837I, 837P, 837D, 270, 271, 277 and 278, Ultra Edit, Windows - 95, 98, 2003, XP and 7, Microsoft Office (Word, Excel, PowerPoint, Access, Microsoft Project and Microsoft Visio).

### Experience

08/2017 to 01/2018

Business Analyst A Place For Mom 1/4 Kennesaw , PA

- Served as a liaison between software vendor and client for the Pharmacy Medication Therapy Management (MTM) module.
- Worked with client to define business workflows/system needs for new features and enhancements.
- Coordinated backlog grooming sessions with client to document and prioritize new features and enhancements in JIRA.
- Organized and documented requirements into Business Requirements Documents (BRDs).
- Developed and executed test case requirements to support accurate system functionality testing.
- Identified problems within the Pharmacy MTM Management module and communicated them through the established defect management process.
- Lead daily defect triage meetings and tracked resolution of identified defects.
- Conducted end-to-end testing to ensure accurate functionality prior to releasing product to client's environment.
- Supported client implementation of the Pharmacy MTM Management module.
- Lead daily production support meetings after implementation.

12/2013 to 08/2017

Senior Analyst Avanade 1/4 Wilkes Barre , MN

- Served as a lead business analyst on the Business Solution Development (BSD) team implementing large scale Change Order Request (COR) projects.
- Worked with client and stakeholders to define project scope, identify stakeholders, identify risks, issues, dependencies, constraints, assumptions, and quantify cost/benefit.
- Performed and lead analysis activities.
- Gathered functional business requirements from stakeholders and system users, and produce documentation required for sign-off.
- Worked with stakeholders and application architect to develop test plan.
- Performed and lead testing activities.
- Developed test cases and test data to ensure application meets business and functional requirements.
- Coordinated large testing efforts operating largely independently within set guidelines.
- Demonstrated working knowledge of multiple interrelated business functions and systems necessary to assist in the identification of cross-function/cross-system impacts.
- Effectively utilize project and test management systems to plan and track team activities.
- Defined and performed post-deployment verification procedures.
- Developed and assisted others in developing simple to moderate ad hoc SQL queries for analysis research and reviewing test data.
- Typically oversaw and coordinated the work of others.
- Managed all phases of a small to medium sized project.
- Lead a small to medium sized team.
- Conducted work planning and prioritization for assigned team.
- Adhere to the Medicaid Information Technology Architecture (MITA) process standards to maintain CMMI Level 4 certification.
- Identified, assessed, and resolved complex issues ensuring that work is within defined budget parameters and targets.
- Escalated issues when changes in scope or work effort could result in budgetary overrun or missing delivery due dates.
- Maintained effective relationships with client, stakeholders and system users to ensure business needs were met.

05/2013 to 12/2013

Business Analyst Consultant Avanade 1/4 Minneapolis , FL

- Performed requirements gathering, elicitation, and analysis in order to understand current state processes and to ensure that the context and

implications of change are understood by the clients and the project team.

- Identified and documented all business, technical, product and process requirements.
- Elicited and analyzed all requirements, including complex business rules.
- Helped to define acceptance criteria for completion of the solution.
- Created and maintained technical documentation to include business requirements documents, use cases and requirements traceability matrices Supported requirements for IT security certification and accreditation (C&A) by integrating security activities throughout the development life cycle.
- Managed and documented requirements according to the selected methodology, including agile and waterfall.
- Worked with stakeholders and customers to validate and obtain approval for all deliverables.
- Worked with Enterprise Architecture, Development and Test teams to ensure that the details of the requirements are fully communicated, understood and implemented in all phases of the system design life cycle.

02/2008 to 05/2013

Professional Services Senior Analyst Highmark Inc. 1/4 Miami , PA

- Served as a subject matter expert for Member Eligibility and EPSDT business functions and supporting systems that included Claims, Edits and Audits, EDI, Provider, Data Management, Contact Management and Benefit Plan.
- Worked with client to define project scope, identify risks, issues, dependencies, constraints and assumptions.
- Performed analysis activities.
- Gathered functional business requirements, and produce documentation required for sign-off.
- Demonstrated working knowledge of multiple interrelated business functions and systems necessary to assist in the identification of cross-function/cross-system impacts.
- Performed testing activities.
- Developed test plan, test cases and test data to ensure application meets business and functional requirements.
- Supported Recipient BA subject matter expert with recipient eligibility business functions and supporting systems.
- Performed analysis activities.
- Gathered functional business requirements, and produce documentation required for sign-off.
- Developed test plan, test cases and test data to ensure application meets business and functional requirements.
- Supported System Engineer with Unit and System Testing; and coding enhancements and modifications for EPSDT and Recipient subsystems.
- Created and updated OmniAdd views and valid values for EPSDT and Recipient table structures and fields; and generated copybooks.
- Developed detailed user manuals and system job flow documentations for EPSDT and Recipient subsystems.
- Supported System Integration Testing Team to assist with testing efforts of the Recipient, EPSDT, Claims Pricing, ERE, Claims Payment, Reference, Data Management and Contact Management subsystems for DC and North Dakota Medicaid.
- Executed system test in ClearQuest and documented test results in SharePoint.
- Logged and retested integration and system test defects in ClearQuest.
- Prepared daily status reports highlighting system testing accomplishments.
- Supported Proposal Writing Team to assist with writing proposals for the Arkansas, Louisiana, and Montana Medicaid accounts.
- Subject matter expert for Member Eligibility and EPSDT business functions.
- Performed Defect and Change Request management.
- Daily task of monitoring status of Defects and Change Request submitted in ClearQuest.
- Assigning of Defects and Changes Request to the appropriate Development Team areas.
- Coordination of re-elaborating of test cases impacted by Defects and Change Request.

12/2005 to 12/2007

Business Analyst Consultant Markel Corporation 1/4 Edinboro , CA

- Served as a subject matter expert for Compass21 eligibility business functions and supporting systems.
- Worked with client and stakeholders to define project scope, identify stakeholders, identify risks, issues, dependencies, constraints, assumptions, and quantify cost/benefit.
- Performed and lead analysis activities.
- Gathered functional business requirements from stakeholders and system users, and produce documentation required for sign-off.
- Worked with stakeholders and application architect to develop test plan.
- Performed and lead testing activities.
- Developed test cases and test data to ensure application meets business and functional requirements.
- Coordinated large testing efforts operating largely independently within set guidelines.
- Demonstrated working knowledge of multiple interrelated business functions and systems necessary to assist in the identification of cross-function/cross-system impacts.
- Effectively utilize project and test management systems to plan and track team activities.
- Defined and performed post-deployment verification procedures.
- Developed and assisted others in developing simple to moderate ad hoc queries for analysis research, reviewing test data, etc.
- Typically oversaw and coordinated the work of others.
- Managed all phases of a small to medium sized project.
- Lead a small to medium sized team.
- Conducted work planning and prioritization for assigned team.
- Adhere the Medicaid Information Technology Architecture (MITA) process standards to maintain CMMI Level 4 certification.

- Identified, assessed, and resolved complex issues ensuring that work is within defined budget parameters and targets.
- Escalated issues when changes in scope or work effort could result in budgetary overrun or missing delivery due dates.
- Assisted client in researching and resolving issues related to processing client eligibility received on the daily and monthly SAVERR eligibility interface file.
- Performed monthly analysis using Access to provide client with total of eligibility update and fatal errors received on the monthly SAVERR eligibility interface file.
- Prepared weekly status reports highlighting accomplishments, key activities, issues, and risks.
- Created and updated Standard Operation Procedures (SOPs) documents for C21 Eligibility processes.
- Maintained effective relationships with client, stakeholders and system users to ensure business needs were met.

03/2005 to 07/2005

Business Analyst Consultant Arkansas Blue Cross & Blue Shield ¼ San Diego , STATE

- Researched and resolved system issues reported by the customer regarding MMIS mainframe, PES (Provider Electronic Software) billing software and DDE (Direct Data Entry) web billing application.
- Prepared Computer System Request (CSR) defining scope and business objectives regarding system modifications to MMIS mainframe, PES and DDE.
- Estimated CSR request for scheduled time of completion and manpower.
- Developed detailed statements of understanding and achieved agreement for the appropriate solution for implementing the CSR.
- Developed detailed user requirements, system workflow documentations, and project work plans.
- Set deadlines, monitored and summarized progress of project.
- Created test plan and executed test cases using PES software written in COBOL.
- Provided data assessment of all 835, 837, 276, 277, 270, 271 and 977 transactions.
- Proactively identified, analyzed and communicated project issues and risks.
- Maintained effective relationships with client, stakeholders and system users to ensure business needs were met.
- Prepared sign-off packet outlining test case results and supporting documentation for customer review.
- Ensured system changes satisfy customer requirements before implementing change request into production.

06/2004 to 03/2005

Business Analyst Electronic Data Systems EDS ¼ City , STATE

- Identified and documented system modifications necessary to meet the processing needs of Arkansas Blue Cross and Blue Shield.
- Entered and reviewed all test data and participation in user acceptance testing using AHIN imaging application.
- Provided data assessment of all 835, 837, 276, 277, 270, 271 and 977 transactions.
- Researched and resolved processing problems related to processing claims on Group Claims Processing System (GCPS) and ITS.
- Researched and resolved issues related to RBES, PPUR, Access Only, ProvNet, Data Capture, ITS interfaces to AMISYS, Dakota Imaging, and AHIN.
- Provided status reporting on an ongoing basis to appropriate management staff.
- Resolved problems identified on daily GCPS reports.
- Reviewed and activated benefits levels on RBBRS, CLMS and GCPS on Blue Cross and Blue Shield's mainframe.
- Maintained and updated all procedure manuals.
- Informed Claims Division personnel of changes and/or modifications which might require training of special instructions.
- Developed and updated claim level edits for Pre-Payment Utilization Review.
- Identified edit needs, established edits and performed on-line maintenance and update of the Regular Business Edit System.
- Provided professional and technical assistance to Systems personnel, supervisory and management staff of the Group Services, Individual Services, ASE/PSE, Regional Offices, Customer Services, and ITS staff.

06/2002 to 05/2004

HIPAA Business Analyst Consultant Arkansas Blue Cross & Blue Shield ¼ City , STATE

- Developed detailed business user requirements, system documentation, workflow procedures, project work plan, and issues log.
- Reviewed and approved requested system changes and develop detailed provisions for implementation.
- Developed and maintained project schedule as the primary tool to ensure timely delivery and completion of solution.
- Set deadlines, assigned responsibilities, monitored and summarized progress of project.
- Assisted Systems Engineer using Implementation Guide to map and convert existing software/application to new enhancement specifications.
- Created test cases and test plans for Universal Acceptance Testing PES electronic billing software and DDE web billing application in test mode.
- Executed and delegated system testing of business specifications for PES and DDE written in COBOL.
- Proactively identified, analyzed and communicated project issues and risks.
- Prepared status reports for upper management regarding status of project.
- Produced reports from client database for data sampling, project analysis, and testing verification via SQL.
- Prepared Business Detailed Design documentations for system enhancements of the MMIS mainframe for HIPAA compliance readiness.
- Coordinated and facilitated walkthrough meetings for reviewing test plans and test cases with upper management, System Engineer and Business Analyst to ensure accuracy and completion of business specifications.
- Supported Information Analyst with Unit Testing and coding enhancements and modifications.
- Provided data assessment of all 835, 837, 276, 277, 270, 271 and 977 transactions.

- Responsible for cross walking claim level local edits to HIPPA mandated edits.
- Provided EDI support to software vendors and clearinghouses such as McKesson, Lavender & Wyatt, WebMD, MediSoft, Trailblazers; with ANSI X12 compliance requirements.
- Ensured delivered system satisfied customer requirements.
- Assisted providers with training of PES electronic billing software and DDE web billing application.
- Researched and resolved system issues related to claims processing using PES and/or DDE.
- Assisted Technical Writers with updating MMIS Tables Manual and Provider Manuals.
- Assisted Financial Analyst with producing reports from database queries using Business Objects and SQL.

08/1999 to 07/2002

Prior Authorization Support Specialist Company Name i¼ City , State

- Reviewed and analyzed determination of eligibility for high-risk prescription drugs and surgeries.
- Entered approved prior authorization request into the Advance Paradigm, Inc (API) and Blue Cross & Blue Shield mainframe.
- Entered overrides into API for extension of benefits on previously approved prior authorization request.
- Generated Health Advantage, BCBS, and USAbile correspondences to physician, member, and caseworker regarding determination of approval or denial of requested services.
- Created and maintained a database of all incoming prior authorization request and status using Excel.
- Assisted Pharmacy and Surgery Coordinator with incoming request, phone log, and database updates.

#### Education and Training

2007

M.I.S : Information Systems and Technology University of Phoenix i¼ City , State Information Systems and Technology Managerial Communication Business Systems I Business Systems II Programming Concepts CIS Project Management Systems Analysis & Development Networking Concepts Database Concepts CIS Strategic Management CIS Risk Management

2002

B.S : Health Sciences Community Health University of Arkansas i¼ City , State Health Sciences Community Health

1995

High School Diploma Joe T. Robinson High School i¼ City , State

#### Skills

Business Analyst, Business Objects, Business Solution, Business Systems I, Business Systems II, C++, COBOL, Contact Management, Data Management, Database Management, Electronic Data Interchange, EDI, Financial Analyst, mainframe, SharePoint, Risk Management, SQL, Surgery, system documentation, Systems Analysis & Development, Systems Engineer, System Integration, user manuals, technical documentation, Therapy, triage