**­­­­­­­­­­­**

Syed Ahmed

5601, Knockadoon Ct. Richmond, VA 23228

Cell: (630)-770-0955|| E: sgahmed335@gmail.com

***SUMMARY*PROFILE SUMMARY**

* Over 8+ years of experience in Requirements Analysis, Requirements Management, Use Case modeling using UML, Business Process Modeling, Data Analysis, Asset Management, Change Management, Project Management with focus on Health Insurance.
* Strong experience with Scrum methodology and well versed in writing user stories.
* Proficient in using Agile Scrum methodologies, performed roles of an Interim Scrum Master following sprint/standup sessions and wrote user stories, analyzed the Iteration Burn Down charts and reviewed defects
* Strong Knowledge of Software Development Life Cycle (SDLC), with thorough understanding of various phases such as Requirements, Analysis/Design, Development, Testing and Implementation.
* Strong experience with Data experience, Scrum experience, Digital Delivery, Testing experience
* Experienced in conducting Joint Application Development (JAD) sessions with SMEs, Business Analysts, Software Developers and Quality Assurance teams for New Corporate Accounts or Clients.
* Knowledge of health information and health care services regulatory environment including HIPAA, Medicaid/Medicare, CHIP & EDI
* Have worked on IAM technologies like Windows, UNIX, Cyber ark and hands on experience on tools like OIM and Sailpoint
* Have experience in healthcare industry in working with various modules which include claims processing using EDI X12 transactions like 837, 834, 835, 270/271, and 276 as per the HIPAA compliance.
* Experienced working with the centers for Medicare and Medicaid services (CMS), the Healthcare Common Procedure Coding System (HCPCS), Electronic Data Interchange (EDI), Medicare Part D Services, and State Pharmaceutical Assistance Program (SPAP) services
* In-Depth knowledge HL7 Standards, HIPAA, PPACA (Patient Protection and Affordable Care Act), and Compliance issues, LOINC and SNOMED Mapping, HL7 Message Validation (EHR & EMR), ICD 9, Electronic Health Records (EHR), Electronic Medical Records (EMR).

**Education/Certification**

* Masters In Information Technology, Annamalai University
* Certified Six Sigma Yellow Belt (BNEDU #95199)
* Associate member for CBAP Program

**PROFESSIONAL EXPERIENCE**

**Cotiviti, Richmond, VA June 2018- Present**

**Senior Business Analyst**

***Project Description:*** Cotiviti is a leading solutions and analytics company that provides solutions on Payment Accuracy, Risk Adjustment to healthcare clients, leverages unparalleled clinical and financial datasets to deliver deep insight into the performance of the healthcare system**.** Scope of the project was to build BI reporting dashboard on MicroStrategy platform that is visually appealing, self-service entryway for healthcare clients to understand the progress and value of Cotiviti’s work on their behalf. As a business analyst I was tasked to worked closely with Product owners (Payments Accuracy & Risk Adjustment) to gather business/functional requirements and collaborate with the internal dev team for development of Executive Dashboard.

**Responsibilities**

* Conducted interviews with the product owners to elicit, elaborate and analyze the requirements using best practices/standard technique/approach.
* Conducted effective walkthrough of requirements with internal teams and ensured that their queries are clarified.
* Facilitated daily stand-ups with the Development team onshore/offshore.
* Facilitated the Sprint planning sessions with the development team.
* Conducted sprint demo’s at the end of the sprint with the Product team to review the shipped stories and get their sign-off prior to migration and deployment to higher environments.
* Conducted backlog grooming sessions to ensure that an open backlog of all open queries/questions and clarifications is managed effectively in conjunction with the product and team members, ensured the acceptance is clearly defined.
* Reviewed test cases and assisted the QA team during sanity and regression testing.
* Conduct defect triage meetings along with the QA team to ensure that the root cause analysis of the defects is being carried out in a planned manner.
* Managed the changes in requirements and according to the priority stated by the Product team.
* Conducted weekly touchpoint meetings with the product team to provide them high-level status on the project.
* Supported the product team during UAT testing and provided them the training on MicroStrategy tool.

**Environment:** Agile-Scrum, MS Office, Atlassian Jira, Aha, SharePoint, Zeplin, SQL Server (SSMS), Oracle, MicroStrategy

**Priority Health (Spectrum Health), Grand Rapids, MI Aug 2017- April 2018  
Business Analyst/Project Co-Ordinator**

***Project Description:*** Priority Advantage is a Medicare service offering company across United States. The scope of the project was to design and implement a robust infrastructure cloud solution to support infrastructure needs for Priority Advantage employees, clients, vendors, agent, providers and members. As a business analyst I was tasked to work closely with architects and SME’s to create a project definition document, understand and document the system requirements, create request for proposal (RFP) document for different vendors, document service level agreements from various vendors.

**Responsibilities**

* Responsible for gathering the functional requirements for the health benefit claims receiving and processing system
* Participated in brainstorming sessions and walkthroughs with subject matter experts (SME).
* Developing Use Case Models, Activity Diagrams, State Diagrams and Data Flow Diagrams (DFD) using MS vison & Gliffy Prepared reports and presentation of key components and milestones to Top Management.
* Coordinated and prioritized outstanding defects and enhancement/system requests based on business requirements, allowing sufficient time frame to ensure accuracy and to meet deadlines.
* Have worked on IAM technologies like Windows, UNIX, Cyber ark and hands on experience on tools like OIM and Sailpoint
* Worked with IAM to manage the users and groups using IAM by assigning individual policies and roles to each users and group as per requirements
* Used confluence software for document storage along with Share Point.
* Participated as appropriate in decision- making activities associated with the development and management of programs related to **insurance exchange (HIX)** products
* Worked on all modules of SDLC life cycle from Initiation, plan, design, develop, test, deploy & maintenance and created artifacts to support all phases and help the Dev Team and test Team with questions/concerns around BR/FR requirements.
* Maintained the Business Impact Analysis Template (BIAT) to analyze and document the effect of proposed changes on the project schedule.
* Worked on different EDI modules using EDI X12 transactions like 837, 834, 835, 270/271, and 276

**Environment:** Waterfall, MS Visio, MS Office, HP-ALM, Qvidian (RFP tool), Jive, AWS-IAM, , Gliffy 3.7, Gatherspace

**Regence BlueCross BlueShield of Oregon, Portland, OR July 2015- Aug 2017  
Business System Analyst**

***Project Description:*** The project was to replace an existing benefit storage system that generated summary of benefit changes (SBC), EOB’s & other welcome kits for members with a commercial of the shelf (COTS) application which was purchased from a third-party vendor. As a Business Analyst, I was tasked to understand and document the existing system to ensure all the capabilities were available in the new system along with the new functionality.

**Responsibilities**

* Involved throughout the Software Development Life Cycle, (SCRUM) including sprint planning meetings, review meetings and backlog refinement meetings.
* Prepared business requirements documents by conducting client group interviews, JAD sessions and with other internal departments.
* Managed roles offshore and served as a liaison between development team and business team.
* Prepared detailed requirements as per USER STORIES to provide details of each business and functional requirement, development and implementation plan of these requirements, timelines, owners, etc.
* Worked on Claims adjudication, benefits as well as member and provider data.
* Prepared change request form to provide details of the changes requests and obtained approvals from the appropriate stakeholders.
* Implemented HEDIS reporting tool to measure the performance on critical dimensions of healthcare data, to file products with CMS
* Provided training to the users and involved in facilitating UAT sessions to gain user confidence and approval.
* Supported BRD by creating various UML diagrams such as; Flow chart, Network diagrams, Floor plans, Site maps, Business process modelling software and Venn diagrams.

**Environment:** Agile-SCRUM, MS Office, MS Access, MS Visio, iRise, MS SQL Server, Informatica Power Center, Rally, MS Project, SharePoint, TFS, Versionone, Abacus

**HealthNow NY (Blue Cross Blue Shield of WNY & Blue Shield of NENY), Buffalo, NY May 2014- April 2015**

**Business Analyst**

***Migration:*** This project involved migrating HealthNow’s core operating system technology and business (HealthNow NY claims, customer service, billing & enrollment) to Blue Cross Blue Shield of South Carolina platform (third party vendor).

***Electronic Provider Access:*** The Electronic Provider Access was a Blue Cross Blue Shield Association mandated initiative for all Blue plans. It aimed at providing electronic access to pre-service review including notification, precertification, preauthorization and prior approval to out of network providers – a service that was only available to local providers.

***CMS Mandated Medicare EOB Changes:*** A federal mandate that required all Medicare Advantage organizations to provide enrollees with a new comprehensive Explanation of Benefits (EOB) for Medicare Part C products – HMO, PPO and MSA. These new EOBs were to replace the existing ones.

**Responsibilities:**

* Conducted scope of analysis sessions to understand the true scope of requirements and the project.
* Created a Requirements Work Plan (RWP) based on the scope of analysis sessions to estimate the hours and plan the sessions needed to successfully deliver the project.
* Proficient in using Agile-Scrum & Waterfall methodologies between different project & performed roles of Scrum Master following sprint/standup sessions and used Rally tool extensively to write user stories, analyzed the Iteration Burn Down charts and reviewed defects
* Created and maintained a SharePoint site for the project to allow easy document sharing. Assisted core team members by providing general support related to SharePoint and ensuring all project related artifacts are stored on the site.
* Conducted project Kick-Off session to review the business case/project vision and scope as well as get everybody on the same page in respect to roles and responsibilities of core team members.
* Gathered business requirements from SMEs as well as CMS call letter and BCBSA requirements and related documents and used it as a means to perform SWOT & Gap Analysis.

**Environment:** Agile-Scrum**,** Rally, Balsamiq, SharePoint, Snagit, Lotus Notes, Creately 2.0, MS Office (Word, Excel, PowerPoint, MS Access), Waterfall-Agile

**Health Partner Plan, Philadelphia PA**                           **Oct 2012- March 2014**

**Business Analyst**

***Project Description:***The deliverable of the project was to build a robust system to record enrollment eligibility feed for Medicare and Medicaid plans which would consolidate different means of data transfer within the organization. Due to several limitations on eligibility parameters and certifications for waivers including provider transactions to the claims processing department, sending and receiving eligibility files from various federal and state government agencies, and receiving claims information from claims department for data warehousing, this information is extracted from the enrollment files and maintained which dictated multiple downstream impacts.

**Responsibilities**

* Coordinated with the stakeholders and project key personnel to gather functional and non-functional requirements during JAD sessions.
* Responsible for the full HIPAA compliance lifecycle from GAP analysis, mapping, implementation and testing for Medicaid Claims.
* Responsible for GAP analysis in changing old MMIS and Involved in testing with MMIS System.
* Responsible for Medicaid Claims Resolution/Reimbursement for peach state health plans.
* Assisting the project manager in creating the business case and project plan.
* Work with business representatives to understand data marts requirements and priorities and ensure that IT works is appropriately aligned.
* Responsible for creating business work flows and processes and creating management reports based on the analysis.
* Followed the UML based methods using Rational rose to create use cases, activity diagram, sequence diagram, collaboration diagram that include functional and non-functional specifications to hand off to development teams.

**Environment:** Waterfall, UML, Windows, SQL, Microsoft Office, Clarity CA PPM, MS Visio, SharePoint, MS Suite (Word, Excel, Power Point, MS Project)

**Mercy Medical Center, Rockville Center, NY August 2010- July 2012**

**Business System Analyst**

***Project 1:*** The Clinical billing system was developed using Medics Elite for Patient Information Management, Appointment scheduler, Financial Ledger and Essential practice reports for Mercy Medical Center.

***Project 2:*** The second phase of the Project for Mercy labs implemented the Electronic Lab Reporting to Center for Communicable Diseases (CDC) in HL7 Format from the State Communicable Disease Surveillance Application.

**Responsibilities**

* Conducted user interviews, gathered requirements, analyzed the requirements using RUP methodology involving Rational Suite (Rational Rose, Requisite Pro) and performed the iterative process to develop Use Cases
* Worked with the SMEs (Financial Analysts, Risk Managers, Project Managers) to define business requirements and analyze the possible technical solutions
* Created Business Requirement Document (BRD), Functional Requirement Specification, and User Requirement Specification (URS) for application development
* Conducted joint requirements planning (JRP) sessions as a facilitator to gather requirements from the business area and conducted JAD sessions with IT group
* Used Rational Suite to analyze business requirements and segregated them into Use Cases and activity diagrams using Rational Rose according to UML methodology thus defining the Data Process Models
* Strong knowledge of managed claims management process, Knowledge of Medicaid and Medicare Services. CMS, Health Assessment Systems, HL7 Standards, HIPAA, PPACA(Patient Protection and Affordable Care Act), Compliance issues, LOINC and SNOMED Mapping, HL7 Message Validation, ICD 9, Electronic Health Records(EHR), Electronic Medical Records(EMR).
* Developed and managed project plans and schedules. Managed resolution of project issues and conflicts documentations

**Environment:** Waterfall, Rational Tools Suite (Rose Requisite Pro), MS Project, MSOffice, HL7, MS word, SQL