**Bijayesh Bajracharya**

[**bijayesh.bajracharya@gmail.com**](mailto:bijayesh.bajracharya@gmail.com)

**507-401-5242**

**PROFESIONAL SUMMARY:**

An assertive professional with 6+ years of practical experience, good understanding of a diverse range of Business Solutions and their applications who possesses good presentation, client Interaction, requirement gathering and analysis. Objective is to work in an environment where I can assist to design, implement and support high quality Software Development Projects. Work with end clients to define needs and to develop clear business solutions, to gather and analyze quality data to assist management in making informed, high quality decisions.

* Knowledge of the SDLC models such as Waterfall, Agile.
* Writing & documenting Business Plan, Business Requirements Document and Functional Specification Document
* Expertise in translating user requirements into System Specifications.
* Conducted requirement analysis techniques such as Business Process Automation, Business Process Improvement, and Business Process Re-engineering.
* Experience in Use Case design and analysis, Use Case specifications, Scenarios, Business processes, Class diagrams, and Activity Diagrams and technical documentation, using Unified Modeling Language (UML), MS Office Suite, and Rational Suite.
* Requirement gathering through interviews, workshops, JAD sessions with clients, developers and QA Analysts and referring to existing system documentation and procedures.
* Ability to gather and document Business Requirements, experienced in writing Use Cases. Proficiency in SDLC, understand the workflow concept, ability to gather and document the 'As-Is' and 'To-Be' processes.
* Proficient in maintaining Test Matrix and Traceability Matrix and performing GAP analysis.
* Good knowledge of SQL queries.
* Extensive experience in preparing Healthcare Effectiveness Data and Information Set (HEDIS) reporting.
* Knowledge of HIPAA standards, EDI, Implementation and Knowledge of ICD-9, and ICD-10.
* Functional experience in health Care Industry with vast knowledge on Medicare and Medicaid.
* Expertise in creating the companion guides on various EDI transactions.
* Specialize in HIPAA 5010 implementation including GAP analysis
* Experience with various modules like membership management, premium billing, enrollment, claims processing & adjudication, benefits administration within Healthcare industry
* Tested the Professional, Institutional Claims processing and adjudication and validate data with facets.
* Good knowledge of Health Insurance Plans and Expertise in determining the membership eligibility, billing experience within life and disability in health plans.
* Worked with EMR/HER, extensively worked with FACETS, and experience with Medicare.
* Conducted User Acceptance Testing (UAT).
* Strong understanding of Account Receivable, Premium Billing.
* Experience with MS VISIO, TFS and SharePoint.
* Expertise in Bug reporting tools such as Quality Center (ALM) and SharePoint.
* Strong Knowledge on MS Office suite, MS Visio, MS Project, and MS Access
* Some understanding for GL and other finance reports.
* Good working knowledge of major Operating Systems such as Windows and UNIX
* Good Management, Execution and Documentation skills.
* Knowledge of SQA (Software Quality Assurance Testing) Methodologies and various testing tools: QTP and HP QC.
* Experience in managing requirements from project inception through release.
* Successful as a team player to work in conjunction with other DBA’s, testers, developers and other team members in validation and testing complex scenarios and projects and in the maintenance of Quality Standards in projects.
* Expertise in Analysis of Problem Severity, Defect tracking and reporting system.
* Interacted with client regarding project status and feedback on UAT and discussed the information with the development team.
* Identifying and documenting critical requirements through analysis of the department’s workflow and information flow.
* Highly motivated, organized and results and detail oriented with good interpersonal, communication and presentation skills. Proven capability of adapting to new and fast changing technologies.

**TECHNICAL SKILLS:**

**Methodologies:** Agile, Waterfall, UML, RAD, Scrum

**Modeling Tools:** MS Visio

**Database:** Oracle, SQL Server

**Management Tools:** Quality Center (ALM), SharePoint, TFS

**Operating Systems:** Windows XP/Vista/7/8, UNIX

**Business Applications:** MS Project, MS Visio, Microsoft Office Suite, MS

**PROFESSIONAL EXPERIENCE:**

**WellCare, Tampa, FL**

**Business System Analyst**

**Oct 2015 – Present**

The scope of the project was to streamline the HEDIS reporting. This reporting would enable on time reporting to the NCQA.

**Responsibilities:**

* Created Use Cases that defined the role of users who receive claims, users who process claims, and users who adjudicate claims. Used MS Visio to develop UML diagrams.
* Facilitated & conducted JAD sessions for requirement gathering, requirement review, and requirement approval.
* Performed Gap Analysis, Feasibility Studies, and Impact Analysis to for implementation of HEDIS changes.
* Responsible for maintaining of HEDIS Measures as per the NCQA specification.
* Gathered the requirements through the meeting, created agenda for the meeting and sending the meeting minutes for the whole team who are part of the project and created Business Required Documents for different type of domains such as Claims, Enrollment and Provider Management.
* Responsible for the development and implementation of functional requirements to support Medicare Part D.
* Performed In-Depth analysis of systems and business processes of Medicare Part D as per CMS rules and procedures.
* Managed Medicare Part D programs, resources and project timelines.
* Perform duties in pre-authorization ICD-10 codes.
* Created Business Requirement Documents for HEDIS reporting.
* Gathered requirements and worked on the accessibility, digital transformation and digital payment.
* Facilitated Joint Application Development (JAD) Sessions for communicating and managing expectations.
* Performed analysis on the member/eligibility information on claim.
* Shared best business practices on all the domain areas.
* Worked directly with implementation team such as developers and configuration team to ensure clear communications on requirements.
* Created Solution summary document.
* Worked on mobile application in digital transformation.
* Provided daily project status report to project manager and project presentation to the high level management on weekly basis.
* Prepared business process and extended features to implement digital transformation using specific web applications.
* Involved in writing extensive SQL Queries to retrieve the data for the purpose of data analysis.
* Implemented Agile approach for requirement gathering continuously prioritized requirements as per needs.
* Developed Data Mapping and Crosswalk documents.
* Worked on different modules of Facets such as Members/subscriber, commissions, provider, billing.
* Membership/enrollment and billing-entered information on Facets to ensure correct eligibility, etc
* Used FACETS to provide seamless transactions between the provider, members and the plan.
* Extensively used ETL methodology for testing and supporting data extraction, transformations and loading processing in a corporate-wide-ETL Solution using Informatica.
* Reviewed Functional Requirements Specifications and documented Test-Scripts and executed Test Cases for MMIS Medicaid billing system functional areas such as Third Party Liability and Claims Front End.
* Involved in preparing several Use Cases, Business Process Flows, and Activity Diagrams using Microsoft Visio, Context diagram and Event Response Table.
* Tested the billing and rendering provider, member subscriber, and payment modules of FACETS in the UI as well as in terms of database validation through SQL Queries.
* Worked on requirements of the 835 HIPAA projects, 276/277, 837, and HIPAA EDI Transactions across enterprise.
* Developed, coordinated and supported Information Technology Division on all operational requirements of FACETS claims processing system and production management.
* Facilitated Brainstorming Session involving business unit stakeholders, technical analyst, SME, portfolio managers to gather requirements and have better understanding of business process.
* Worked in testing the professional, institutional claims processing and adjudication and validate data with facets.
* Assisted in Regression Test, System Test, and UAT.

**Environment**:  Microsoft SharePoint, MS Visio, HEDIS, MS Office, UML, HP ALM/Quality Center, Toad for Oracle, Team Track, AGILE/SCRUM methodology, Facets.

**Blue Cross Blue Shield of Massachusetts, Boston, MA**

**Business System Analyst**

**Jan 2014 – Sept 2015**

The application is a web- based application mainly used by the Sales and Business Department. It includes both Consumer as well as Internal Member Enrollment process. Application is designed as such that individuals can enroll themselves by logging in themselves or by enrolling themselves through internally by a sales rep. In this project I was responsible for validating and testing different aspects of the application by creating different scenarios.

**Responsibilities:**

* Involved in testing methodologies throughout the Software Development Life Cycle.
* Assisted in writing Test Plan, Test Strategy, System Testing and End-to-End Test.
* Tested EDI transaction 834 and 820.Performed extensive manual testing of each module.
* Implemented numerous use cases based on test strategies
* Participated in QA meetings and defect tracking meetings
* Performed manual testing for screen navigation.
* Used RTMS for black box testing.
* Extensively worked with Member/Subscriber and HIPAA Privacy Facets application groups
* Created Use-Cases and Requirements documents to document business needs.
* Wrote UAT Test Plan, organized and conducted User Acceptance Testing with clients and worked as a part of support team.
* Ensured Use-Cases were consistent and covered all aspects of the Requirements document.
* Provided the management with test metrics, reports, and schedules as necessary using MS Project and participated in the design walkthroughs and meetings.
* Created use cases and Use case diagrams
* Has also worked with Billing and Claim Processing Modules on FACETS.
* Wrote complex SQL queries to extract and validate the data from the Facets database
* Evaluated and implemented QA process improvements for ongoing testing.
* Conducted manual testing to verify expected results. Mainly involved in Regression Testing.
* Facilitated analysis and user needs (use case surveys) with project teams and authored Use Case document (UCD), Functional Specifications and Requirements Traceability Matrix (RTM) with project teams.
* Involved in new development, support and enhancement of application.
* Used SPIRA as the Defect Management Tool.
* Created Test Cases and Test data after analyzing the BRD.
* Served as a liaison between business users and IT team and Implemented business process analysis, business process modeling and business process re-engineering techniques.
* Assisted manager with the development of project schedules, project planning.
* Performed Gap Analysis (“AS IS” – “TO BE”) to derive requirements for existing system enhancements.
* Assisted manager with the development of project schedules, project planning.
* Was involved in testing for other project for other applications like Salesforce.
* Reported defects using defect management tools such as Quality Centre

**Environment:** SQL Server 2000, Oracle, MS Project, Quality Center, Agile, MS Office, MS Visio, Toad, FACETS

**Highmark, Pittsburg, PA**

**Business Analyst**

**July 2012 – Dec 2013**

Project involved working on a web-based application mainly used by the Administrative Department of Highmark. The application is developed to assign health care programs for current and new employers and their employees, view employee dependents, and other related information. Each employer is assigned to a particular health-care program and the user interface gives more flexibility to add new employers and assign programs.

**Responsibilities:**

* Responsible for requirements analysis, design and developing technical requirements.
* Reviewed the Business requirement, Functional Design Documents and Technical Specification documents
* Logged of defects in Quality Center to maintain Test requirements and to communicate the bugs with the Developers.
* Performed Backend testing by writing SQL validation queries in Oracle Toad against the database.
* Facilitated Joint Application Development (JAD) Sessions for communicating and managing expectations.
* Performed Data analysis from the data warehouse along with business intelligence solutions delivery team.
* Identified processes for developing and documenting detailed business requirements. Data was collected from end-users, and analysts. Created Use-Cases and Requirements documents to document business needs.
* Requirements were gathered through interactions and meetings and periodic walkthroughs with SMEs, client, and other potential users of the application.
* Maintained requirement traceability matrix on daily basis and participating in status meeting.
* Conducted Use-Case reviews and identified gaps, leading to improvements/enhancements.
* Maintained documents and the effect of proposed changes on the project schedule and costs.
* Managed and tracked Defects using Quality Center.
* Worked directly with software engineers to ensure clear communications on requirements and defect reports.
* Designed and developed scenarios based on business requirements.
* Worked with EMR/HER, worked with ICD-9 and ICD-10, and was involved in testing of billing modules.
* Worked with providers and Medicare or Medicaid entities to validate ANSI EDI transaction sets or Internet portals.
* Interacting with other teams through walkthroughs, teleconferences, meetings, etc. to resolve various issues.
* Facilitated analysis and user needs (use case surveys) with project teams and authored Use Case document (UCD), Functional Specifications and Requirements Traceability Matrix (RTM) with project teams.
* Served as a liaison between business users and IT team and Implemented business process analysis, business process modeling and business process re-engineering techniques.
* Assisted manager with the development of project schedules, project planning.
* Performed Gap Analysis (“AS IS” – “TO BE”) to derive requirements for existing system enhancements.
* Wrote UAT Test Plan, organized and conducted User Acceptance Testing with clients and worked as a part of support team.

**Environment:** SQL Server 2000, Oracle, MS Project, Quality Center, Agile, MS Office, MS Visio, Toad.

**Regence Blue Cross Blue Shield, Portland, OR**

**Business Analyst**

**Feb 2011 – June 2012**

Regence Group implemented a set of projects under a common program called CP-SS (Common Process Single System). CP-SS will bring individual four states legacy system affiliated with Regence group into a common Platform to deliver valuable experiences to its members. Participated in the implementation of Claims Processing, member enrollment, and Billing modules in the system.

**Responsibilities**:

* Studied existing business application and processes, collected end user requirements and suggested the improvised business process model.
* Gap Analysis of client requirements, generated workflow process, flow charts and relevant artifacts.
* Defined and documented the vision and scope of the project.
* Conducted one on one interviews with high level management team and participated in the JAD session with the SME’s.
* Worked as a liaison between the business and technical side to convey the business needs to the system architects.
* Worked in association with RUP mentors to ensure fidelity to the standard RUP practices of the institution.
* Validate EDI Claim Process according to HIPAA compliance.
* Designed Use Cases using UML and managed the entire functional requirements life cycle using RUP.
* Created and managed project templates, Use Case project templates, requirement types and trace-ability relationships in Requisite Pro.
* Involved in handling EMR/EHR.
* Provided the management with test metrics, reports, and schedules as necessary using MS Project and participated in the design walkthroughs and meetings.
* Worked on a project associated with Medicaid and Medicare.
* Documented the test plans and developed related documents.
* Analyzed the “As is” and “To be” system documents to show the current and proposed functionalities of the system using MS Visio.
* Worked with the clients on the final signing process in the User Acceptance stages.
* Coordinate with Development and Business team to develop high level Business and Technical documents.
* Implemented Standardized and Unified process throughout the software Development Life Cycle (SDLC).

**Environment**: MS Visio, MS Project, MS Office, SQL, Agile, Windows XP, Rational Requisite Pro.

**Education:**

**Master in Business Administration.**