Ushma Desai

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**SUMMARY OF QUALIFICATIONS:**

* Business analyst with **Over** **Seven** years of work experience and solid understanding of business data modeling, process flows ,case tools ,software requirement analysis and business analysis in healthcare industry, health insurance industry and financial sector.
* Strong knowledge of object oriented analysis and design using UML, SDLC, RUP, Agile, SCRUM, MS Visio professional, Rational Rose and facets.
* Competence in analyzing and creating narrative use cases, user stories, use case diagrams and activity diagrams.
* Adept at preparing business requirements documents (**BRD’s**),used case specifications ,functional specifications, software requirement specifications (**SRS**),defining project plans and delivering project/status reports, requirement traceability matrix (**RTM**) and testing documents.
* Experienced working as a **lead business analyst** with both **on shore** and **offshore** requirements for over two years
* Strong knowledge of object oriented analysis and design using UML, SDLC, RUP, Agile, SCRUM, MS Visio professional, Rational Rose and facets
* Excellent in conducting joint application development (**JAD**) sessions, joint requirement planning sessions (**JRP**), walkthrough, interviews, workshops and rapid application development (**RAD**) sessions with end-user/clients/stake holders and the IT group.
* Familiar with varied standards or protocols involved in healthcare like **EDI**, **HL7**, **UB92**, **837I**, **837P** respectively along with in depth experience in financial analysis and financial modeling. Skilled with data modeling and data mapping of CMS Files, **EDI 834** and Vendor Interface files.
* Experienced with **Facets** **4.21**, **4.71** front end applications and back-end data models
* Experienced with **Facets** **4.21**, **4.71** front end applications and back-end data models.
* Excellent knowledge of **HIPAA** (Health Insurance Portability and Accountability Act) transaction codes such as **270/271** (inquire/response health care benefits), **276/277** (claim status), **470** (benefit codes), **835** (payment or remittance advice), **837** (health care claim) and **834** (benefit enrollment).
* Captured all HIPAA-related EDI data in the repository using FACETS
* Experience in conducting **Gap** analysis, User acceptance testing (**UAT**), **SWOT** analysis
* Adept in performing analysis of bugs, defect tracking and interacted with team members in fixing errors and assisted in post production support.
* Accepted inbound transactions from multiple sources using FACETS
* Successful as a team player to work in conjunction with testers, developers and other team members in validation and testing complex scenarios and projects and in the maintenance of quality standards in projects especially with test director.
* Belief in team work, dedication and professional ethics within working environment with excellent communication skills, writing skills as well as presentation skills. Experience working with business user’s as well senior management.

**TECHNICAL SKILLS**

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| --- | --- |
| Project management | MS Project, MS Visio, MS PowerPoint, MS Word, MS Excel |
| Business Modeling Tools | MS Visio, RUP, Rational Rose. |
| Analysis/Modeling tools | UML, JAD, RUP, Waterfall, Agile |
| Change management tool | Rational clear quest, rational clear case |
| Testing tools | Mercury quality center, Test director |
| Business skills | Business definition requirements, Business process analysis & research, Use case modeling and analysis. |

**PROFESSIONAL EXPERIENCE:**

**CIGNA HEALTHCARE, CT** **June 2012 – Present**

Business Analyst

The project focused on implementing an online Insurance quoting system selling directly to customers. The Project goal was to eliminate the middleman (Insurance agent) and sell insurance directly to the customers online. The system provided full information regarding plans and benefits offered by the company.

**Responsibilites**

* Assisted the Project Manager in facilitating **JAD** sessions with SMEs’, Product owner, and Development managers to understand the business process, gather Business Requirements and identify enhancements for the application
* Involved in conducting requirement sessions, identifying business needs, obtaining sign-off on requirements and capturing requirements in Caliber RM
* Supported integrated EDI batch processing and real-time EDI using FACETS
* Used **Soap UI** to manually test each of the **Web service** API requests.
* Created and executed various data driven test scenarios using **Soap UI**
* Performed manual and automated test procedures for functional testing of Web services using Soap UI
* Executed Test Cases using **SOAPUI** and HP Service Test hosted on a Web Logic Server and validated responses.
* Created activity diagrams in Define IT for the development team to better understand the business flow
* Well versed with HIPAA, Facets, claim adjustments, claim processing from point of entry to finalizing, claim review, identifying claims processing problems, their source and providing corresponding solutions
* Responsible for architecting integrated HIPAA, Medicare solutions, Facets
* Worked with design team to prepare UI documents for the Billing module
* Followed **AGILE** methodology viz. **Scrum** throughout the project
* Created story cards with **user stories** interviewing the SMEs
* Involved in planning, prioritizing and managing the **user stories** and defects in Rally
* Estimated, assigned and tracked Sprint tasks with the Sprint backlog to assist PMO for a bigger picture of the release functionalities
* Conducted working sessions to gather and document high level business requirements and detailed level business requirements for different business units impacted by ICD 10 such as EDI Claims Intake, FACETS- Claims Adjudication, Medical Management- Utilization Management, Case management and Provider Reimbursement- Provider Payment
* Conducted weekly coordination meetings with offshore QA team
* Facilitated pre-planning meetings, demos, burn down charts, scrum board and velocity charts for the Scrum process
* Maintained Engineering and **sprint backlog** for the project
* Assisted the manager in planning additional resources for completion of tasks in various sprints/iterations
* Educated clients and internal stakeholder with Healthcare reform and implications such as Medical Loss Ratio, Administrative Expensive and quality procedures mandated by reform, disease/case management for preventive care.  Facilitated workshops for ICD-10 and HIPAA5010 – Reimbursement Implications (Bundle Payments).
* Designed and developed logical data and **business** **models** using MS Visio.
* Responsible for preparing Software Requirement Specification **(SRS)** and documenting them. Created process work flows, Functional Specifications documents and documented system requirements.
* **Environment:** MS Office 2007, MS Visio 2007, Electronic Data Interchange (EDI), Rally, JAVA, IBM Data Power, XML, DB2, MS Project, SQL, MS SharePoint, HP Quality Center

**PROVIDENCE HEALTH CARE, WASHINGTON DC May 2011 – June 2012**

Business analyst

The project was to provide real-time **Enrollment** and **claims** data to FEP business partners by creating a Web-service framework. The goal of the project was to allow business partners access the data such as **Healthcare Eligibility Benefit** and **Claims** status information necessary for their applications more quickly and efficiently.

**Responsibilites :**

* Responsible for developing and reviewing **business requirements**, **functional specifications**, **project schedules**, **documentation** and **test plans**.
* Closely interacted with designers and software developers to understand application functionality, navigational flow and updated them about end-user sentiments.
* **Collecting information** from various insurance companies to be able to develop an   application for checking the outstanding balance **Bridging gap** between the Business needs and the Technical solutions.
* Well versed with HIPAA, Facets, claim adjustments, claim processing from point of entry to finalizing, claim review, identifying claims processing problems, their source and providing corresponding solutions
* Used **Waterfall** methodology to satisfy business need Defining the **Business Process Model** and **Data Process Model** Follow **HIPAA compliance** to safe guard patient information
* Coordinated with Project Managers to **resolve risk issues** and ensure compliance of Security System-Related to the **HIPAA**.
* Facilitated JAD sessions with the Configuration Team and the Project Manager for brainstorming to arrive at best practices for the process of Facets configuration
* Performed **Gap analysis** pertaining to **4010 – 5010 conversion** to accommodate the **ICD-10-CM** and **ICD-10-PCS** **code sets**.
* Involved in testing different interfaces and web application for FACETS
* Managed and developed **EDI** specifications, gap analysis, and applications  structures for data feeds and mappings for integration between various systems, including **XML**, to follow **ICD 10 Code set**, **ANSI X12 4010** formats including **270** Eligibility/Benefit Inquiry , **271** Eligibility/Benefit Information, **276** Claim Status Request, **277** Claim Status Response, **700** Attachment Request, **701** Attachment Response, **810** Invoice, **820** Payment Order/Remittance Advice, **834** Benefit Enrollment, **835** Remittance Advice, **837** Claims and Encounter, and **997** File Transmission Acknowledgement, to meet and exceed HIPAA requirements set forth by the federal government.
* Hands on experience in all facets of User Acceptance Test: UAT scheduling, walkthrough sessions, UAT test plan and cases, creating data set, user manual, rollout plan, release note, smoke test etc
* Developed **use cases, and traceability matrices** to better assist software development.
* Led both internal peer review and external reviews of use case specifications and in the process clarifying the critical requirements.
* Familiar with **User acceptance testing** (**UAT**), **System testing**, **Integration testing** and **Regression Testing.**
* **Environment:** MS Word, Excel, PowerPoint, UML, Rational RequisitePro, MS Visio, Rational Rose Data Modeler, Rational ClearQuest, SQL Server, MS Visual Studio, ASP.NET, eRoom

**Mylan Laboratories,Inc,PA Aug 2009– Mar 2011**

Business Analyst

Mylan is the third-largest generic pharmaceutical company in the world with more than 570 products to consumers in more than 140 countries and territories across the globe. Automate support for the Adverse Event Case Receipt business process including the management of case submission, case data capture, and case data verification. Reporting module was also implemented to generate reports on case submissions.

**Responsibilites :**

* Reviewed and gathered requirements from the Subject Matter Experts (SME) and Business Partners using various elicitation techniques
* Implemented the entire **Rational Unified Process** (RUP) methodology of application development with its various workflows, artifacts and activities
* Created Scope Management Documents, Business Requirements Document (BRD), and Functional Requirement Document (FRD).
* Well versed with HIPAA, Facets, claim adjustments, claim processing from point of entry to finalizing, claim review, identifying claims processing problems, their source and providing corresponding solutions
* Experienced working as a **lead business analyst** with onshore requirements where created artifacts such as Use Cases, Prototypes, and Business Flows and Work Flow diagrams for effective plans.
* Responsible for architecting integrated HIPAA, Medicare solutions, Facets
* Gathered user and business requirements through open-ended discussions, brainstorming sessions and role-playing.
* Performed in-depth **GAP Analysis** on the requirements identified the gaps and documented the GAP Analysis report.
* Managed changes in requirements using a Change Control process.
* Validated **test cases** to verify products
* Involved in Black Box Testing and User Acceptance Testing (**UAT**) by preparing logical test cases
* **Environment:**MS Word, Excel, PowerPoint, MS Visio, CaliberRM, DefineIT, Rally, Visual Studio, .NET, SQL Server, MS Project, MS SharePoint, Expression Blend, MS Team Foundation Server (TFS)

**CITIBANK, NEW YORK May 2006 – July 2009**

Business analyst

The purpose of this project was to host apps created for Citigroup professionals and also serve as an elegant governance mechanism employing help desk services, standards and app submission requirements to ensure design, quality, usability, sustainability and brand compliance across both client-facing and non–client facing applications.

**Responsibilites :**

* Establish and maintain activity logs, performance metrics, project plans, and other pertinent forms and documents to provide the basis for resource allocation, reporting, budgeting, and forecasting
* Used **Six-Sigma** tools for process improvement and achieving desired goals.
* Managed Change Requests and performed impact analysis, created and managed a master project plan with work breakdown structures in MS Project.
* Providing liaison between engineering teams, business areas, and end users.
* Generate the weekly, bi-weekly and monthly cyclic reports, program/project metrics and milestone tracking for senior management. Facilitated Elicitation sessions with the clients to determine business needs.
* Identified, assessed and documented requirements recommending business priorities and advising business on options, risks and costs versus benefits of various solutions.
* Facilitated the solution design with the architecture and development team

Identified and communicated risks to delivering solutions on time.

* stDetermined risk mitigation strategies.
* Developed technical specifications, functional impacts and prototyping to further represent the need.
* **Environment**: Windows XP, MS Office suite, UNIX/Oracle Platform, XML, Oracle Application server, Oracle, MS Visio, Bugzilla.

**EDUCATION**

Bachelors in Science, India