**Mahidur Rahman Khan**

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**Project Summary:**

* 5+years’experienceasaHealthCareBusiness DataAnalyst/EDI Data Analyst.
* ExtensiveexperienceinClinicalDataManagement,dataanalysisandgeneratedCRTtables,reports,graphsforFDAsubmissionaccordingtoprotocol.
* Experiencedinpayerrules,requirements,governmentalregulationsandHIPAAcompliance.Interactedwithclaimspaymentandenrollmenttoreview,analyzeanddocumentbusinessprocesses.
* Experiencewithhealthcaresystem,Medicaidandwithprimefocusonclaimsencounters, adjudication,provider,eligibilityandpriorauthorization.
* ExpertiseindevelopingSoftwareTestPlans,TestCaseDesign,TestScriptsbasedonUserRequirementsSpecification(URS), SystemRequirementsdocuments(SRS),FunctionalRequirementSpecificationDocuments(FRS)
* ExposedtoHIPAA/EDItransactioncodeinclude(270,271,276,277,278,834,835and837).
* StrongexperienceinconductingUserAcceptanceTesting(UAT)anddocumentationofTestCases.ExpertiseindesigninganddevelopingTestPlansandTestScripts.
* Experience in receiving Claims and Institutional Encounters for EDI 837 (I).
* Experience working with 999 EDI Implementation Acknowledgement document.
* Wide-rangingexperienceinmanagingartifactsinmethodologiessuchasWaterfall,RUP,Agile(SCRUM).
* Excellent experience in migration of data from Excel and flat files to MS SQL Server by using SSIS.
* Strong experience in coding using SQL, SAS/SQL, SAS macros.
* WellversedwithHIPAA,Facets,claimadjustments,claimprocessingfrompointofentrytofinalizing,claimreview,identifyingclaimsprocessingproblems,theirsourceandprovidingcorrespondingsolutions.
* AdequateknowledgeinHealthAdministration–Claimsprocessing(autoadjudication),COB,EOB/Drafts,Claimspricingandtesting,HIPAA,enrollment,EDI,Medicare,Medicaid,CDHP(consumerdrivenhealthplans).

**TechnicalSkills:**

**OperatingSystems :**Windows, Linux, UNIX, Mainframe

**Languages:**UML,SQL,PL/SQLandClient/Serverarchitecture

**Database :** Oracle, DB2, Teradata

**Process/Model tools :** Rally, MS Visio

**Testing Tools :** HP ALM, Quality Center, Jira

**OfficeTools :**MSOfficeMSWord,MS SharePoint, MSExcel,MSPowerPoint,MS

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**ProfessionalExperience:**

**HCAHealthCare,Nashville,TNAugust2016­June 2018**

**Data Analyst/EDI Analyst**

**Description:** HCAInc.hasdevelopedanapplicationformanagingand processing InsuranceClaims ­ ClaimsManagement and Reconciliation(CMR).Patient'sinformation,historyaboutdiseaseandmedicationiscollectedandstoredintheCMRHealthInformationManagement/EnterpriseDocumentManagementSystem.IworkedforenhancementstothisapplicationwiththevariousBusinessOwners.

**Medical Claims Application:**

The project involved developing a web-based medical claims application, which is HIPAA compliant. This application automates the health insurance claims process from the time a claim is received to the time when the claim is adjudicated and fully paid. The implementation of this quality system involved the use of the following ANSI X12 Transaction Sets: 837, 835, 276, and 277.

**Responsibilities:**

* Providedanalyticalandprocessingsupportofallsystemssoftwareapplications.
* Worked in Agile environment.
* Assisted Product Owner and Scrum Master in backlog grooming and creating user stories.
* PreparedandreviewedfunctionalprogramspecificationsandrequirementforallbusinessunitsspeciallyforhealthcaresectorwhichinvolvedSAP,EDI,HIPAA,Healthcare,InsuranceMarket,SoftwareandSystems&Unitvalidation
* Designing, documenting, configuring and deploying MS SharePoint intranet solution for corporate documents, client management, issue management and task management.
* Validated the following: 837 Health Care Claims or Institutional Encounters, 835 Health Care Claims payment/ Remittance , 270/271 Eligibility request/Response , 834 Enrollment/Dis-enrollment to a health plan
* Responsibleforcreatingandmanagingtestplansandprojectschedules
* ExpertiseinClaims,Subscriber/Member,Plan/Product,Claims,Provider,CommissionsandBillingModules
* MedicalClaimsexperienceinprocessdocumentation,analysisandimplementationin835/837/834/270/271/277/997(X12Standards)processesofMedicalClaimsIndustryfromtheProvider/Payerside,Medicaid,&Medicare
* WorkedontheEligibilityandClaimStatusOperationRulesspecifictoCMSstandards.
* KnowledgeofhealthinformationandhealthcareservicesregulatoryenvironmentincludingHIPAA,Medicaid/Medicare,CCHIT,EDIandXML.
* Developing and implementing SharePoint Plan for organization wide collaborative document sharing.
* MS SharePoint Administration: user setup, security permission, site configuration.
* MS SharePoint Training: Trained all staff on tool features and business agreed upon usage.
* Performed back­end testing using SQL commands
* Strong working experience with HIPPA Transactions
* Processed EDI 837P, 837I and 837D transactions, verified 837 transactions were converted correctly to XML file format and verified the claims data loaded to Facets for further processing.
* Worked with Medicare part D for drug validation project.
* Drafted the Physical Data Mapping document for the data flow from Facets to the data warehouse.
* Extracted the data and creating reports, tables and figures (SAS, Excel, SPSS).
* Used MS Excel spreadsheet, PowerPoint, MS Visio, MS Projects.
* Analyzed 999 EDI implementation Acknowledgement document.
* AnalyzedbusinessneedsandleadprojectsinthehealthcaremarketandaswellasworkontechnicalprojectsinclusiveofSAP,EDI,HIPAA,Healthcare,InsuranceMarket,SoftwareandSystems/Unitvalidation.
* Created SSRS Report Model Projects in MSBI studio and created, modified and managed various
* ExperienceincreatingandmaintainingtherequirementsdefinitiondocumentsthatincludedBusinessrequirementsandFunctionalrequirements
* Created Sub Reports, Parameterized and Drill down Reports based on the requirements provided using SSRS.
* Manage User Stories in JIRA.
* Created various SSRS reports such as Multi-valued reports, Parameterized, Linked reports, Drill down reports, Tabular Matrix reports and Chart diagrams.
* Scheduled SSRS reports for end users and managed the security of the reports.
* Exported SSRS reports to various formats like PDF, Word and Excel and scheduled to reports to send as an email body.
* KnowledgeofhealthinformationandhealthcareservicesregulatoryenvironmentincludingHIPAA,Medicaid/Medicare,CCHIT,EDIandXML
* InvolvedinOutputgeneration,InterfacedevelopmentandMigrationofLegacyapplicationProjects
* ProvidedanalyticalsupportsolutiontothecustomersonProductionIssues
* Performedback­endtestingusingSQLcommands
* ExperienceincreatingRequirementsTraceabilityMatrixtoensurecomprehensivetestcoverageofrequirements
* WorkedwithprovidersandMedicareorMedicaidentitiestovalidateEDItransactionsetsorInternetportals.ThisincludesHIPAA4010;837,835,270/271,andothers.Providedhealthcareproviderproblemresolution.
* Created EDI Export and import processes and work with EDI Trading partners, payer and vendors.

**JohnsHopkinsHealthCare­GlenBurnie,MDSeptember2014­June2016**

**Data Analyst**

**ProjectDescription:**TheprojectinvolvedupgradingtheClaimsProcessingWebApplicationasperHIPAA5010guidelines.IworkedonbothProfessionalandInstitutionalclaims.Thisproject required extensiveinvolvement in all the phasesof claims processingfromreceivingtheclaimsfromprovidertoitsfinaladjudicationordeferralforManualIntervention.

**Responsibilities:**

* Gathereduserrequirementsanddirecteddevelopersforpracticaldeliverables.
* WorkedwiththefullSDLC,elicit,analyzeanddefinerequirements.
* ConductedJADsessionswiththeclientstoidentifytherequirements.
* DesignedanddevelopedUseCases,ActivityDiagrams,SequenceDiagrams,OOADusingUMLandBusinessProcessModeling.
* Researchedtheexistingclientprocessesandguidedtheteam inaligning with the HIPAA rules andregulations for thesystemsforalltheEDItransactionsets.
* ConsultedwithhealthcareinsurancecompanytodevelopconversionspecificationsforotherinsuranceCoordinationofBenefits(includingMedicare).

● FollowedtheUMLbasedmethodsusingRationalRosetocreate:UseCases,ActivityDiagrams/StateChartDiagrams,SequenceDiagrams,andCollaborationDiagrams.

* Workedextensivelywithinsurancebrokers.
* WorkedwithprovidersandMedicareorMedicaidentitiestovalidateEDItransactionsetsorInternetportals.ThisincludesHIPAA5010;837 (Claims and Encounters),835,270/271,andothers.
* Providedhealthcareproviderproblemresolution.
* ParticipatedTestingandEvaluationofprojectsatestablishedintegrationpointstoassessprogressandidentifykeyfunctionalityissues.
* Performedtherequirementanalysis,impactanalysisanddocumentedtherequirementsusingRally and MS Visio.
* ObtainedDatarequirements,identifieddatasources,determinedthecontentofdatafieldsandcreatedDataMappingDocumentsandperformedDataExtractionandDataCompilationusingSQLqueries.
* ResponsibleforintegratingwithFacets.DesigningtestscriptsfortestingofClaimsinDevelopment,Integrationandproductionenvironment.
* AssistedJADsessionstoidentifythebusinessflowsanddeterminewhetheranycurrentorproposedsystemsareimpactedbytheEDITransaction,CodesetandIdentifieraspectsofHIPAA.
* Performed monthly Development server refresh using SQL Server Agent.
* Loaded portfolio data on monthly basis using SQL Server Agent.
* WellversedwithHIPAA,claimadjustments,claimprocessingfrompointofentry tofinalizing,claimreview, identifyingclaimsprocessingproblems,theirsourceandprovidingalternativesolutionsusingbestpracticemodelandprinciples.
* WorkedwithClaims,enrollment,eligibilityverificationformembersandproviders,benefitssetup,andbackendpaymentcycleinfacets.
* Establishdocumentationforagilemethodologyforimplementationwithaverywaterfall centricdevelopmentteam.
* Developing project plan and ensuring all tasks stay on track while maintaining all documents in MS SharePoint.  
  Exported SSRS reports to various formats like PDF, Word and Excel and scheduled to reports to send as an email body.
* Workwithprojectmanagertobuildoutplansusingprojectmanagementtool.
* Researchedtheexistingclientprocessesandguidedtheteam inaligning with the HIPAA rules andregulations for thesystemsforalltheEDItransactionsets.
* InteractedwithBusinessUserstoconductthoroughRequirementsAnalysis.
* CreatedInterfacetestcases,reporttestcases,expectedresultsvalidation,defecttrackingusingJIRA.
* ResponsibleforcreatingabusinessprocessandworkflowdocumentationusingBPMNstandards.
* WorkedinDataAnalysis,DataReconciliationandDataMapping.
* Createdstandardtestcasetemplateaccordingtothecompanyrequirementsandstandards.
* Documentedmonthlystatusreportsforenhancementandmodificationrequestsforthedevelopmentteamtoassisttheminefficienttrackingandmonitoringofopenissuesoftheproject.

**Tenet Healthcare Corporation May 2013–August 2014**

**Dallas, TX**

**Data Analyst/Business Analyst**

**Description:** The system initiates all the necessary procedures, standardizes and validates the data according to HIPAA regulations, and provides error-processing for the transactions that could not be fully processed through the system. The new application also allows the agents to track and manage the status of a health benefit claims.

**Responsibilities:**

* Worked on HIPAA Transactions and Code Sets Standards according to the test scenarios such as 270/271/277/ 837/835 transactions.
* Worked on Institutional Encounters for EDI 837.
* Tested the interface between database and the application
* Checked the data flow through the frontend to backend and used SQL Queries to extract the data from the database.
* Configuration and evaluating the impact of proposed changes in rules and regulations.
* Involved in writing extensive SQL Queries for back end testing oracle database.
* Retrieved files using SQL statements.
* Created SSIS Packages to migrate slowly changing dimensions.
* Performed Data Quality Analysis to determine cleansing requirements.
* Used SSIS to extract, transform, and load data from transaction systems.
* Worked on EDI 999 Acknowledgement document.
* Designed, Developed and Deployed reports in MS SQL Server environment.
* Designed and tested packages to extract, transform and load data using SSIS
* Coordinated with the developers and IT architects to design the interface of the new system according to the X12 (270, 276, 278, 834, 837 (I,P,D) and 820) standards.
* Develop, design & implement department plan to operationalize new FACETS integrated processing system, to include but not limited to, workflow, management oversight and performance analysis.
* Translated business requirements into functional specifications and documented the work processes and information flows of the organization.
* Maintained Traceability matrix and Test Matrix
* Created and maintained SQL Queries for back-end testing
* Wrote SQL Scripts to insert regression test data into the database.
* Validated some of the reports, using complex SQL queries, generated during the process.
* Involved in writing complex SQL queries to extract the data from Oracle database
* Maintained various versions of Test Scripts

**Education:**

Master’s Degree