**Mukhiya Gurung**

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**715-497-7304**

**OBJECTIVE**

**Senior Business Analyst** with around 8 years of IT experience in Healthcare Insurance. I have good Experience in implementing Billing, Enrollment, Claim Processing, Reconciliation, and Benefits. Excellent problem solving and conflict management skills including the ability to manage conflict and find mutually acceptable resolutions.

**SUMMARY**

* Advanced level knowledge in software development life cycles followed in CMMI Level 5 Company. Performed **Requirement Gathering/Analysis, System analysis, Design & Data Modeling, Development, Testing, Performance tuning and Functional Consulting**.
* Expert knowledge of the claims process and how that process is related to the **FACETS system.**
* Extensive Experience in **eliciting, analyzing**, **documenting** and managing **requirements** and converting these into **System/Functional Requirements Specifications (SRS/FRS)**.
* Experience with **issue analysis, problem solving**, identifying **root cause problems** and making **recommendation** **solve issues** and/or increase efficiencies.
* Expert in rapidly **configuring benefit plans, provider networks and pricing.**
* In depth knowledge of **EDI Processes and ANSI X12 Standards.**
* Specialized in **Claims Processing, Accounting, Providers Maintenance, Enrolment/Membership and Claims Payment**.
* Worked on Data migration, Facets version upgrades, Reports Implementation, letters, Inbound/outbound Interfaces and Facets Extensions. **Implemented EDI transactions 835, 270/271, 276/277 and 834.**
* **Coordinating** various **technical and managerial teams** at all levels.
* Experience with creating **EDI Specifications, EDI/XML Mapping** using the EDI Software such as BizTalk
* Highly skilled in Inbound & Outbound interfaces, Mercator/EDI configuration, Mercator data mapping using **ANSI X12 standards** in both Windows and UNIX Environment.
* In depth knowledge of **EDI Processes and ANSI X12 Standards.**
* Adept with industry standard methodologies like **Rational Unified Process (RUP),** Object Oriented Analysis and Design (OOAD)**, Agile development, Waterfall model and** Extreme Programming (XP).
* Competent in analyzing and authoring **Use Cases, Use Case Diagrams, Activity diagrams, Data Flow/Navigational flow diagrams using UML Tools like MS Visio, Rational Rose** and **MEGA.**
* Experience in conducting **Joint Requirement Planning (JRP), Joint Application Development (JAD)** and **Rapid Application Development (RAD) sessions**.
* Comprehensive knowledge of **System Configuration Management, Change Request Management, Risk Management and Mitigation and Version Management processes**.
* Excellent track of leadership skills **handling mid-sized teams** and acted as an onsite coordinator managing the tasks between onsite and offshore effectively.
* 4 years of **Client facing experience** with people of different backgrounds including end users, functional experts, senior management and PMO.
* Have received accolades from various clients for the **techno-functional expertise**, commitment towards the project completion and contributions/value additions above and **beyond the call of duty**.

**AREAS OF EXPERTISE**

Operating Systems: **Mac OS X, Windows 2000/XP/NT, UNIX.**

Software development methodologies: **RUP, SDLC, UML, SWOT, Six Sigma**

Requirements Management Tools:  **Rational** **Requisite Pro.**

Business Modeling Tools**:** **Rational Rose, MS Visio, WebSphere, Business Modeler (6.0.2.1)**

UML Diagrams: **Rational Software Modeler**

Project Management Tools: **MS Office, MS Project.**

Programming Languages: **C, C++, Java, SQL, and PL/SQL**

Data Bases: **Microsoft Access, MS SQL Server 2000.**

Version Control System: **Rational Clear Case.**

Testing Tools: **QTP, Load Runner, and Test Director**

Web Technologies: **HTML, XML, MS Front Page**

Bug Tracking: **Test Director, Clear Quest.**

Reporting Tools: C**rystal Reports, Jira, Sharepoint**

**PROFESSIONAL EXPERIENCE**

**United Health Group, Minnesota, MN April 2013 – Present**

**Sr. Business Systems Analyst**

United Health Group has a unique opportunity to build an open, inclusive and engaged health system, adaptable to shifting market conditions and industry demands. The project involves in configuration of **NetworX Pricer** **Agreement Configurator** Application for creating contracts terms for institutional and professional pricing. . Worked on Configuring class plans/Commercial, COBRA, Mandatory Medical products and others require by the client /benefit summaries/commission arrangements/billing entities/ billing components/ and premium rate tables. Ensure that subscribers are located in the correct class plan/ order ID cards and worked daily reports concerning members errors.

**Responsibilities:**

* Interacted and arranged meetings with Business and End users to gather business requirements for configuration of Benefits with various other systems.
* Worked on **Configuration of Benefits** with Enrollment and Claim processing systems. Also configure Coordination of Benefits calculation methods; Charges, Facets allowable, Higher allowable, other carrier allowable**.**
* Worked on **Configuring** the Claim Processing Requirements for **COB (Coordination of Benefits**).
* Wrote Functional Requirement for **configuration** of Benefits, Enrollment and Claim processing.
* Configure **Multi-Engine batch process** to distribute **claims** to work queues and engines.
* Worked on FACETS GRGR\_CK, SBSB\_CK and the MEME\_CK for the **Configuration** of Member & family accumulator data.
* Researched compatibilities for **CPT and ICD-9 codes**.
* Involved in **Data Analysis** for the data warehouse and datamart system for the **Configuration** of Benefits with Members.
* Worked on **Microsoft Excel** for preparing the **PVM (Product Variation Matrices) and Network Agreements.**
* Generated Business scenarios in the **5010 transaction** format by applying valid combinations of new and modified data, on **4010 transactions**.
* **Mapped the codes for each benefit from benefit grids to Service Payment files using the rule engine.**
* Developed mapping specifications to convert non-compliant data formats to **ANSI HIPAA** compliant formats.
* Tested member conversion **from Mainframe Legacy systems** to FACETS.
* Documented of the configuration of **Billing, Benefits & Enrollment of Health Care Exchange**.
* Manage **test file trading** with external Trading Partners (Clients / Payers, Providers, Clearinghouses)
* Negotiate modifications to the Trading Partner's implementation based on **HIPAA EDI** Companion Guide.
* Worked on **Billing Entity** and **FACETS Reporting** system to produce premium statement and reports from the data.
* Coordination of Benefits calculation methods; Charges, Facets allowable, Higher allowable, other carrier allowable**.**
* Coordinate with IT any **EDI** map customizations, including assistance with Design and internal testing
* Work with the trading partners to retrieve necessary trading partner setup information such as sender/receiver ids, communication protocols, and contact information
* Set up trading partner information using **Data Stage’s Partner Manager** Graphical User Interface (GUI)
* Dealt with ETL (extraction, transformation, and load) processes using **Oracle and Data Stage.**
* Tested HIPAA Transactions and Code Sets Standards such as 837/835, 270/271, 276/277 transactions
* Manage trading partner testing including creation and transmission of test files, as well as evaluation of incoming/outgoing files.
* Configuration of Benefit plan, eligibility, claims, Group (new and existing), Accumulators and provider configuration on Web based relational based software and on Unix OS.
* Monitor the **trading partner's migration** from test to production status
* **Communicate testing status** to the appropriate business process owner and Trading Partner contacts.
* Defined and presented overall  **strategy** for the project, including testing phases for **system, user acceptance, performance** and **end-to-end testing**
* Coordinated testing readiness effort, including creation of **test plans**, **test cases** and **test scripts,** for multiple **testing phases.**
* Validated **cpt, hcpc, icd 9** code sets from Data Flat files to support configured benefit plan building.
* Utilized certificates of coverage\ benefit plan summaries while configuring benefit plans for groups. Utilized client web portals for backend configuration, data compression, extraction and test
* Involved in **positive and negative testing, Security, Integration, functional, regression testing**, and GUI testing on each build and version of the application
* Generated membership reports and as well as mock bills.
* Involved in **UAT and End to end testing** designed, scheduled and executed test plans within the predefined timeframe
* Performed Transaction, Navigation and User Interface testing.
* Involved in UAT and coordinating with users while performing User Acceptance Test.
* Arranged **daily/weekly issue** **meeting** with testing staff to ensure all issues gets appropriate attention
* Tested HIPAA Transactions and Code Sets Standards such as **837/835, 270/271, 276/277** transactions.
* Documented of the configuration of **Benefits & Enrollment**.
* Manage **test file trading** with external Trading Partners (Clients / Payers, Providers, Clearinghouses)
* Negotiate modifications to the Trading Partner's implementation based on **HIPAA EDI** Companion Guide.
* Coordinate with IT any **EDI** map customizations, including assistance with Design and internal testing
* Work with the trading partners to retrieve necessary trading partner setup information such as sender/receiver ids, communication protocols, and contact information
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* Manage trading partner testing including creation and transmission of test files, as well as evaluation of incoming/outgoing files
* Monitor the **trading partner's migration** from test to production status
* **Communicate testing status** to the appropriate business process owner and Trading Partner contacts.

**Environment:** FACETS 4.x, RUP, UML,**ANSI**, Lotus Notes, MS OFFICE, **Data stage,** DB2, Rational Clear Quest, Rational Clear Case, Rational Requisite Pro, File Parser, HTML, MS Visio, Windows xp/2000,MS Project, DOORS.

**Regence Blue Cross Blue Shield, Portland, OR Jan 2012 - March 2013**

**Sr. Business Systems Analyst**

Regence is a not-for-profit health care company. We offer individual and group medical, dental, vision and life insurance, Medicare and other government programs, and pharmacy benefit management. Involved in Configuration of **Members, NetworX Pricer, Claims, Workflow and Benefits.** Requirements are gathered as per the client need, the **workflow modules** are configured based the user roles and how it is queued to the corresponding Workflow manager and other users. The members and Benefits are configured based on the **Plans and Variations** according the Line of business Worked on **EDI transactions** like 270/271, 276/277, 835/837 and EDI’s.

**Responsibilities:**

* Configured and created source benefit documents into Benefit Reports (Business Analysis)
* Analyzed and studied the different Business Processes across various Business Units.
* Benefit plan configuration for Self Directed plans
* Installation of new accounts for situs states
* Installed benefit rules, exclusions, (UM, DM,CM) eligibility, Medical procedures, Mental Health, Cob Rules, thresholds, and network pricing rules etc
* Involved in the Review of **Requirements Specification** with functional manager and technical specialists of the application
* Prepared **NetworX Provider** Vision / Approach, and Design documents
* Created Agreement/ fee schedule crosswalks from Legacy to **NetworX**
* **Validating product ID’s and naming according FACETS ID standard.**
* Identified **Use Cases** from the requirements and created **UML** Diagrams in Enterprise Architect, including **Sequence Diagrams**, **Collaboration Diagrams** and **Class Diagrams.**
* **Prepare Variation matrices for** HMO, PPO, HSA/HRA, and FSA.
* Worked on different segment of **270/271** transaction such as AAA01, AAA02, AAA03.
* Worked on **EDI transactions like 270/271, 276/277, 835/837** and EDI’s. Worked on **Use Cases for Batch processing for EDI’s.**
* Involved in Writing use case based on **HIPAA standards.**
* Used **UML/RUP** to develop requirements and architect a solution.
* Responsible for creation of **Collaboration Diagrams, Activity Diagram, Project Flow Diagram in MS Visio.**
* Gathered Requirement from the Client to fulfill the Application need for **FACET Implementation.**
* Involved in **HIPAA 270/271** transaction for eligibility benefits.
* Built subscriber benefit master files from benefit summaries then tested eligibility and subscriber modules.
* Extensively involved in **Batch testing** of **claims submission.**
* Conducted **System, Integrated** and **Regression testing** to the application.
* **Created a single architecture** for **viewing, querying, analyzing, and authoring** for collaborative contributions to any **report** including dashboards.
* Designed Benefit plan and run claims against newly installed automated utilities for error correction.
* Wrote requirements for various **reports** to be generated.
* Participated in writing **data mapping** documents and performing gap analysis on the systems.
* Done extensive **data analysis** and converted the full logic to plain SQL codes and put it in data selection strategy document
* Pioneered innovated **team building** and **cross-functional** training programs to expedite workflow, simplify process and reduce operation cost
* **Conduct de-briefing sessions** with selected users and/or other designated project personnel following UAT to confirm completion of all UAT activities;
* Confirm that all outstanding issues have been resolved or agreed to be resolved later;
* Confirm that all required workarounds have been defined, agreed, implemented, documented and presented to internal project personnel; and
* Confirm that all UAT test scripts and results have been documented and presented to internal project personnel

**Environment:** FACETS 4.51, RUP, Oracle, Sybase, **PEGA** PRPC, TIBCO, Onyx, CMS, UB04, , Clarity, HP Quality center ,Web logic, SQL, Crystal reports, ANSI X12, XML, Java, JavaScript, HTML and Lotus Notes.

**Blue Cross Blue Shield of North Carolina, Durham, Jan2011 - Dec 2011**

**Sr. Business Systems Analyst**

The National Provider Identifier Project’s objective is to comply with the BCBSA mandate that effective with the federal compliance date, all Providers who conduct electronic business via HIPAA Transactions with BCBSNC will be required to obtain and use an NPI. All internal BCBSNC processing and data storage will be done using the BCBSNC 5-character Proprietary Provider Number (PPN). Any NPI’s received on HIPAA incoming transactions (claims or inquiries), must be translated to the correct PPN before data access is done. Worked on HIPAA transactions **837** (Institutional/Professional), **835**(Payment Remittance Advice), **270** (Eligibility Request) / **271** (Eligibility Response), **276** (Claims Status Inquiry Request) / **277** (Claims Status Inquiry Response), **834**(Benefit Enrollment and Maintenance Transaction), **278** (Prior Authorization), **997** (Transaction Acknowledgement).

**Responsibilities:**

* Worked closely with Business end-users and developers for detailed understanding of the opportunities for improvements of systems in order to Gathered Requirements and prepared a comprehensive set of documents to define the specifications and business value of the system.
* Converted Business specifications into Functional Specifications.
* Design and development of inbound and outbound maps.
* Worked on **EDI transactions like 270/271, 276/277, 835/837** and EDI’s. Worked on **Use Cases for Batch processing for EDI’s.**
* Involved in Writing use case based on **HIPAA standards.**
* Used **UML/RUP** to develop requirements and architect a solution.
* Responsible for creation of **Collaboration Diagrams, Activity Diagram, Project Flow Diagram in MS Visio.**
* Gathered Requirement from the Client to fulfill the Application need for **FACET Implementation.**
* Prepared **Use cases, Sequential Diagrams** with detailed screen layouts with regards to various types of corporate actions.
* Extensive **Analysis of HIPPA rules** to incorporate in the Development of Utility application which is not HIPAA compliant.
* Wrote Test Cases and Test Plans for Testing HIPAA Transactions and Code Sets Standards such as **837/835, 270/271, 276/277 transactions.**
* Implemented **Rational Unified Process (RUP)** in terms of disciplines and phases, each consisting of one or more iterations. With the iterative approach, the emphasis of each workflow varies throughout the lifecycle. The iterative approach helps address risk early and continuously, through demonstrable progress and frequent executable releases.
* Identified High-Level Requirements for developing and documenting detailed business requirements using Rational.
* Exposed to **ICD-9-CM** terminology server and directly mapped textual descriptions of the VBA disability codes to **ICD-9-CM**, then mapped **ICD-9-CM** and the VBA Disability codes to SNOMED CT.
* Evaluated the results and the project timeline by setting milestones in RUP.
* Wrote Functional Requirement for **configuration** of Benefits, Enrollment and Claim processing.
* Coordinate with IT any **EDI** map customizations, including assistance with Design and internal testing
* Work with the trading partners to retrieve necessary trading partner setup information such as sender/receiver ids, communication protocols, and contact information
* Set up trading partner information using **Data Stage’s Partner Manager** Graphical User Interface (GUI)
* Dealt with **ETL (extraction, transformation, and load)** processes using **Oracle and Data Stage.**
* Authored **Business Requirement Document (BRD)** and then converted Business Requirements into **Software Requirement Specification (SRS)** Document
* Used SharePoint for content management, and to share the information with the groups involved during the project
* Developed timelines for project delivery, and managed projects and resources to successful completion
* Using detailed knowledge of application features and functions, assessed scope and impact of business needs throughout analysis and completion of all enhancement specifications
* Assisted in UI development
* Assisted the technical team in understanding and developing the appropriate functionality
* Worked closely with QA and development teams for batch testing, system testing and production deployment
* Assisted my team with creation of **UAT** expected results by connecting to various databases (operations TDS and Corporate Data Warehouse) using **MS Access** **ODBC** connection and creating queries to apply business rules on source data
* Performing Black Box testing for some application features
* Handling Change Management and new features/enhancements during regular release cycles.
* Single point of contact to provide regular Production Support and prioritizing implementation of change requests

**Environment:** Agile, Microsoft Office, Requisite Pro, Data stage, SQL Navigator, IBM Rational Clear Quest 2000, Rational Team test 2000,TSO,File Aid, CICS, JCL, ISPF, MS Excel, IMS Unified Modeling language, Microsoft Visio, MS SQL Server, Abnitio, Business Objects.

**International Business Machines (IBM), Mechanicsburg, PA Jan 2010 – Oct 2010**

**Systems Analyst**

**Unemployment Compensation Modernization System (Unemployment Insurance)**

Unemployment Compensation Modernization System (UCMS) is a type of income support system. UCMS is a SOA-based application, which will provide a new platform for growth and innovation that will serve the Commonwealth. The Department of Labor and Industry (DLI) constructed a request for proposal that would replace its aging legacy unemployment compensation systems with a new, Service-Oriented Architecture (SOA) based, custom developed family of applications that would manage unemployment taxes, wage record, benefits and claims for employers and constituents of the Commonwealth. The UCMS gives DLI to simplify work, automate workflow and document management, expand self-service for claimants and employers and create a consistent unemployment compensation/insurance system, which will drive the business transformation of the DLI.

**Responsibilities:**

* Conducted business requirement analysis, feasibility and cost benefit analysis. Split Unemployment Compensation (UC) into different domains (Accounting payable (AP), Audit, Collections, Common Processes, Compliance, Rating, Payments and Receivables, Registration, Tax Appeals, Profit Center Accounting (PCA) and US DOL Reporting) by conducting series of JAD sessions with DLI
* Created PMO Team Room on IBM’s Quick Place and managed the information and artifacts.
* Worked on the project plan and scheduled the deadlines for the final deliverables (both GSD and DSD).
* Conducted quality assurance, risk management, project server, and project web access and issue management presentations. Resolved questions and issues regarding the same.
* Conducted DSD level JAD sessions with the subject matter experts (SMEs) for each and every domain. Recommended alternatives on processing business processes and gained agreement on a wide range of difficult business processes.
* Designed Business Process Flow Models for all the domains using IBM’s WBM tool.
* Conducted Work Sessions for gathering features for UCMS and documented the Features Document. Features document defined specifications for the upcoming system.
* Conducted gap analysis and documented the gap analysis document using Excel.
* Created the AS-IS and TO-BE documents.
* Defined UML Sequence diagrams, activity diagrams, state diagrams process flows etc., using the Rational Software Modeler tool.
* Created test plans, test cases, test scripts and testing traceability matrix. Developed test strategies for User Acceptance Testing (UAT).
* Respond to user questions regarding reports and products, including the sources of the data flow and the meaning of each data element which helps simplifying the technical aspect for the users.

**Environment:** Microsoft Project Server (v2007), Java, Java Script, Web Sphere Business Modeler, QuickPalce, Rational Tools Suite (Rose, Requisite Pro, Clear Quest and Rational Software Modeler), SDLC, MS Project, MS Visio, UML(state diagrams, sequence diagrams, process flows etc.), Microsoft Office (Word, Access, Excel, Outlook, Power Point), Windows XP, Test Director, Web Sphere, Crystal Reports.

**United Parcel Service (UPS), Mahwah, NJ March 2009 – Nov 2009**

**Sr. Business System Analyst**

**Project Description: Enterprise Contact Management**

Enterprise Contact Management (ECM) was designed to enable agents across all Business Units (Supply Chain Solutions, UPS Freight, Small Package International and Small Package US) of UPS to ID the Caller, manage Cases (concerns and messages), and route them to the appropriate destination for research and resolution. The benefits by implementing this project was that it would reduce concerns and messages and their average handling time, improve International Preferred **Service/channel** Agent’s (PSA) Case processing, reduce Inaccurate Information Processing review costs and reduce churn among Strategic Preferred **Service/channels**. ECM will help all the Business Units of UPS to work on a common platform and keep track of all the Concerns for reporting. It was developed on SAP-BW using the Siebel Call Center and Data Warehouse was used for retrieving the data elements.

**Responsibilities:**

* Analyzed and studied the different Business Processes across various Business Units in UPS.
* Designed a common process for all the Business Units across UPS and developed Process flow diagrams using MS Visio.
* Conducted Work Sessions with the Business Users for capturing Business Requirements and documented them in MS Word which was saved it in the central repository.
* Used a 3 – Phased RUP methodology
* Defined Business Rules after capturing the Business Requirements and took sign offs from the Business Users.
* Used MS-Project for status reporting and planning.
* Created Scenarios and by using MS Office Power Point demonstrated the new Process flow of ECM.
* Used FileNet content manger to work with workflow and process capabilities to automate and drive content related tasks
* Conducted work sessions on Functional Design and documented them in the functional design document. Reviewed the Functional Specifications created by the architect and conducted knowledge transfer sessions on iProcurement and iExpenses to ensure understanding of the BRs.
* Produced Data Dictionary and Interfaces Matrices along with many other Matrices for mapping the data flow.
* Used Electronic document management system (EDMS) to track and store electronic documents and images for processing paper documents.
* Conducted, documented and implemented the Gap Analysis.
* Prepared Use Cases and drafted business Use Cases such that any future changes could be easily detected and managed.
* Created Test Cases for ECM and assisted the Users in using ECM.

**Environment:** Rational Tools Suite (Rose, Requisite Pro, Clear Quest), RUP, MS Project, MS Visio, Microsoft Office (Word, Access, Excel, Outlook, Power Point), Windows XP, Test Director, SAP-BW, Siebel Call center and Data Warehouse.

**Deutsche Bank, New York, NY Sep 2008 – March 2009**

**Business Systems Analyst**  
**Project Description:** **Banking Portal**

The personal banking portal of Deutsche Bank targeted for Brazilian market. It allows users to open Personal Accounts on the web and provides various features like accounting maintenance, wire transfer within and outside the portal. Credit Derivatives Management System (CDM) is an intranet-based system for management and allocation of credit derivative trades. It gives users the ability to manage **derivatives** from a single, unified workstation. The application is capable of handling electronic import and export of trade details.

**Responsibilities:**

* In Banking Portal, analyzed the processes involved in Opening an **Online Bank Account**.
* Worked on different domains of corporate action involving Cash Dividend, Bond Redemption, interest payment, Bond Conversions, Tenders, and Stock Splits etc.
* In CDM project, analyzed traditional Swaps and Credit Default Swaps and their trading and allocation processes.
* Suggested product features by conducting **Competitor Analysis**.
* Analyzed business requirements, business process and system architecture/design.
* Assisted in establishing and managing a common **SDLC (System Development Life Cycle)** process for all regulated system development/procurement, review regulated documents (SOPs, Policies and Procedures).
* Assisted in educating clients, stakeholders and end users on the benefits and risks associated with the project.
* Used Openlink’s risk management and operations processing system which allowed all the transactions move in real-time in a straight-through-processing (STP) environment giving users greater control over the risks connected with each and every transaction.
* Used **UML based methods** to create **Use Case diagram**, **Sequence diagram** and **Activity diagram.**
* Identified and involved all key stakeholders, contributors, business, operations and technical resources in the project.
* Ensured that contributors were motivated to complete assigned tasks within the parameters of the project plan.
* Retrieved Data by writing **SQL queries**.
* Created and managed **project templates**, **Use Case** project templates, requirement types and trace-ability relationships in **RequisitePro.**
* Initiated and validated changes (Clearquest) and facilitated new user training and ongoing training.

**Environment:** Rational Tools Suite (Rose, Requisite Pro, Clear Quest), Java, Java Script, RUP, Open link’s risk management tools, MS Project, MS Visio, Microsoft Office (Word, Access, Excel, Outlook), Windows XP

**Standard Charted, Nepal April 2006 – June 2008**

**Jr. Business Analyst**

Standard Charted is one of the leading global investment banking, securities and investment management firm that provides a wide range of services worldwide to a substantial and diversified client base that includes corporations, financial institutions, governments and high-net-worth individuals. Its services include financial advisory, underwriting, trading and principal investments under fixed income & commodities, equities and asset management & securities.

**Responsibilities:**

* Analyzed the Core Banking system and Customer care systems and developed a As Is and To Be models for Account Open Business Process and Loan Arrangement Process
* Ensured the creation of key project documents such as: Product Design Requirements, System Requirement Specifications, Quality Plan, Risk Management Plan, and the Development Plan according to the Design Control procedures.
* Assisted in analyzing a Service Oriented and Modeling Architecture of Core Banking Processes
* Analyzed and developed a model to retrieve customer information, analyze profile and make product recommendations for cross selling of Bank’s products
* Part of an IT team that integrated the systems that support Bank’s various channels and lines-of-business such as the online, branch, and call center systems are all in different infrastructures.
* Conducted JAD sessions with Stakeholders to capture business requirements and system
* behavior
* Wrote a weekly aging report, which kept track of all bugs/issues in the system using Rational Clear Quest
* Assisted in building a business analysis process model using Rational Rose and Visio.
* Created UML class diagrams, use case diagrams and sequence diagrams to view the system from different perspectives.

**Environment:** Rational Requisite Pro, Clear Quest, Windows NT/2000 Microsoft Office (Project, Publisher, Excel, Word, PowerPoint and Visio), J2ee, Webspere, Lotus Notes, SDLC, Oracle.