**NAYNA PRAJAPATI**

[**npanalyst@gmail.com**](mailto:npanalyst@gmail.com)

**551-221-2498**

**Summary:**

* Around 8+ years of diverse experience in Software Quality Assurance with a thorough knowledge of Functional and Performance testing methodologies.
* Hands-on experience in design, development and execution of Test Plans, Test Strategies and Test Scripts for both Automated and Manual Testing.
* Ability to identify problems, analyze test results, and investigating their cause and suggesting remedies. Proficient in all stages of the SDLC as well Agile including QA testing cycle.
* Expertise in analyzing and designing automated as well as manual test procedures for validation and implementation of accurate testing strategies for the successful deployment of real-time solutions.
* Extensive experience in reviewing and understanding of Business & functional requirements and writing detailed Test Plans, Test Cases, and Test Scripts for Web and Client/Server applications. Working knowledge of Software Development Life Cycle (SDLC), having thorough understanding of various phases like Requirements, Analysis/Design, Development and Testing.
* Involved in entire QA Life Cycle includes Designing, Developing and Execution of the entire QA Process.
* Involve in the telephonic testing by using various tools like SFCTI, Cookie link, Mobile communicator.
* Experienced in different testing scenarios such as Functional Testing, Regression Testing, Integration Testing, Black Box Testing, GUI Testing, Back-End Testing, Browser Compatibility Testing, and Unit testing in different stages of SDLC.
* Excellent in analyzing Business Requirements Specification, developing Test Plans and Test Cases.
* Hands on experience with all phases of Software Development Life Cycle (SDLC).
* Worked on different Methodologies such as Agile, Waterfall, and RUP.
* Well versed with all the Testing concepts and methodologies.
* Working Knowledge of ICD-9, ICD-10 and CPT diagnostic codes.
* ICD 9-ICD 10 Conversion knowledge -Worked in the analysis of the ICD 9 - 10 codes.
* Worked on upgrading from ICD-9 to ICD-10 Diagnosis/Procedure Code sets.
* Experience with creating and implementing Requirements Traceability Matrix (RTM).
* Experience in HIPAA EDI 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).
* Working knowledge of ANSI X12 EDI transactions.
* Developed SQL queries using joins and sub queries to test data tables against the source and target and to validate data and verify.
* Business knowledge of Group, member, provider, enrollment, HL7, Medicaid/Medicare member eligibility, Benefit Plan enrollment, and MMIS.
* Participated in design reviews with the Development team.
* Self-starter and ability to adapt and learn new things quickly.
* Excellent Communication and Documentation Skills.
* Good Process Management and organizing skills with remarkable ability in gathering requirements to bring out quality products
* Proficiency in testing the applications compatibility on Windows XP/2000/2003 platforms.
* Knowledge of Financial/Trading, Banking, Insurance, Tele Communications, Pharmaceutical and Health Care.
* Hands on experience in creating generic, reusable, efficient and effective automated Test Functions and Scripts in TSL Using Win Runner and using Quick Test Pro.
* Experienced in Reporting and Tracking Defects using Bug Tracking tool such as Test Director.
* Experience in Backend testing by writing PL/SQL queries to test the integrity of application.
* Excellent Documentation Management and presentation skills for the complete QA project including Test plan, Test case specifications, Test Requirement, Test case matrix and defect Reports.
* Possess problem-solving skills, Ability to follow industry standards and procedures. Quickly master new concepts and applications. Strong communication and Interpersonal skills.
* Extensive understanding of HIPAA compliance and Medicare and Medicaid advantages. Strong Experience in HIPPA 4010 EDI Transaction codes such as 837 (Health care claim), 276/277 (Claim Status), 270/271 (Inquiry/Response), 834(Benefit) and 835(Payment and ICD 9 and ICD 10 coding and EDI and working on Facets Trizetto

**Technical Skills:**

**QA Testing / Defect:** Tracking Tools WinRunner6.0/7.0/7.5/7.6, LoadRunner6.5/7.8/8.0, Test Director6.0/7.0/7.6/8.0, QTP6.0/6.5/8.0/9.0,10.0, QC 9.0/10.0,Clear Quest, Bugzilla, TOAD, DOORS, Microsoft Office, Track, Cognos, SFCTI, Selenium, lotus notes, Test link , Run as, LDAP, Jira

**Programming Languages:** C, C++, C#, COBOL, JCL, Java, VB.NET, ASP.NET, VB 6.0, SAS 9.1

**Data Warehousing:** Informatica Power Center 7.1.2/6.2,Powermart 6.2/5.1/4.7 (Source Analyzer, Data warehousing designer, Mapping Designer, Mapplet, Transformations), ETL, Data mart, OLAP, OLTP.

**RDBMS:** Oracle 8i/9i, SQL Server 2000, MS Access 2000

**Web/Application Servers:** Web Logic, Web Sphere, IIS 5.0, Java Web server

**Scripting Languages:** JavaScript, VBScript,

**Networking:** TCP/IP, UDP, SOAP

**Version Control:** Visual Source Safe, PVCS, Clear Case.

**Operating Systems:** UNIX, Linux, Windows NT, DOS,

**Education:**

* MBA in Health care Management, Virginia International University, Fairfax, Virginia
* Bachelor of Science in Microbiology, Sardar Patel University, Gujarat, India, 2002
* Diploma in ICD10 and HIPAA

**Professional Experiences:**

**Blue Cross Blue Shield, Birmingham, AL Jan 2014 to till the date**

**QA Analyst Lead**

**Health Care Reform Programmed and ICD10 Implementation**

The Healthcare Reform legislation requires that group health plans provide coverage for dependent children up to age 26 for plan years beginning October1, 2010. recently a communication was sent stating that Blue Cross and Blue Shield of Alabama is electing to voluntarily comply with this dependent age requirement for all of their underwritten business effective June1, 2010. Within this communication we identify an eligible dependent child as child up to 26 with all other eligibility requirements (Such as residence, financial support and marital status) remaining the same.

The ICD-10 Project which is a federal mandate to replace the current ICD-9 Diagnosis and procedure codes with the ICD-10 Diagnosis and Procedures code set. The US Department of Health and Human Services HHS) is requiring health plans, Physicians, hospitals, and other health care professionals to be ICD-10 compliant by October 1, 2014. This project mainly involved in the conversion of ICD-9 to ICD-10

**Responsibilities:**

* Reviewed Business & functional Requirement Documents and the Technical Specification.
* Extensively involved testing the XML workflows Integration and Database testing.
* Performed Backend, Functional/Regression testing, Batch Testing, Integration testing under agile methodology.
* Getting the Requirement for 837 Edi file and processing that information by using ultra edit tool
* Responsible for Browser Compatibility testing for search engine.
* Tested the functionality of the applications and tested its compatibility on Windows XP/2000 on different versions of Internet Explorer, Netscape, and Firefox.
* Working on Blue chip for ICD 10 procedure and diagnosis code for claim processing
* Performed Analysis of ICD 9 Procedure and Diagnosis Codes in accordance with ICD 10 CM and ICD 10 PCS Conversion Compliances.
* Prepared Test cases with positive and negative scenarios for ICD 9 – ICD 10 code conversion.
* Created test data (EDI Files) for 837 with ICD 10 codes for business rule validation.
* Performed End to End Testing for ICD 9 – ICD 10 code changes.
* Tested ICD 10 code for impacted systems under Claims processing.
* Executed test cases and verified the actual results against expected results.
* Validated the data that is mapped onto inbound databases.
* Working on Accum and Contract GUI for benefit and contract
* Search the member by using the member Inquiry GUI and provide details by using the NPI crosswalk
* Analyzed the application and performed Black Box and end-to-end testing.
* Checked for the Database Integrity using SQL Queries.
* Used Quality Center as the test repository for executing test cases, generating various reports and graphs for further analysis.
* Perform the UAT testing with BA and end client before product is going live
* Performed testing the applications compatibility on UNIX and Windows environment.
* Involved in User Acceptance Testing to verify the functionality of various systems.
* Working on web service application of BCBS for member enrollment and benefit for member, spouse and dependent
* Defects are raised in HP Quality Center and maintained to keep track of the bugs for re-test and close operations and also used HP Quality Center as the test repository for executing test cases, generating various reports and graphs for further analysis.
* Extensively used SQL scripts/queries for data verification at the backend.
* Working on MMS app for 834 Medicaid eligible member enrollments.
* Working in passport mainframe app for claim processing for Medicaid eligible member.

**Environment:** HP Quality center 10,QTP 10.0, Java/J2EC-JDK 1.4/1.5, web sphere application server 6.1, Agile, ICD10 Procedure code and Diagnosis code, Rational Quality Manager 4.04, Main frames, IBA DB2V9, IBM web sphere MQ, Blue chip, Terminal emulator, IBM Rational Jazz Team Server 4.0.3, Ultra Edit 16.10, MS Visio 2010, MS Excel 2003, MMS, Pure SCMALM, MKS integrity.

**Blue Cross Blue Shield HQ/Health Care Service Corporation, Chicago, IL Oct 2012 to Dec 2013**

**QA Analyst Lead**

**Contracts and Benefit Determination (C&BD) and ICD10 Implementation**

Contract and Benefit Determination is a multiple phased project which we modify the current benefit coding and benefit adjudication process. Real time adjudication will be realized by way of linking to blue chip. This project will also result in optimized and improved accumulators processing. The current SP4 phase requires close coordination with enterprise product platform (EPP) and the administrative service only business improvement initiative (ASOBI). C& BD project has 2 components contract and benefit determination.

ICD-10 Project which is a federal mandate to replace the current ICD-9 Diagnosis and procedure codes with the ICD-10 Diagnosis and Procedures code set. The US Department of Health and Human Services (HHS) is requiring health plans, Physicians, hospitals, and other health care professionals to be ICD-10 compliant by October 1, 2014. This project mainly involved in the conversion of ICD-9 to ICD-10.

**Responsibilities:**

* Reviewed Business & functional Requirement Documents and the Technical Specification.
* Extensively involved testing the XML workflows Integration and Database testing.
* Performed Backend, Functional/Regression testing, Batch Testing, Integration testing under agile methodology.
* Getting the Requirement for 837 Edi file and processing that information by using ultra edit tool
* Responsible for Browser Compatibility testing for search engine.
* Tested the functionality of the applications and tested its compatibility on Windows XP/2000 on different versions of Internet Explorer, Netscape, and Firefox.
* Working on Blue chip for ICD 10 procedure and diagnosis code for claim processing
* Performed Analysis of ICD 9 Procedure and Diagnosis Codes in accordance with ICD 10 CM and ICD 10 PCS Conversion Compliances.
* Prepared Test cases with positive and negative scenarios for ICD 9 – ICD 10 code conversion.
* Created test data (EDI Files) for 837 with ICD 10 codes for business rule validation.
* Performed End to End Testing for ICD 9 – ICD 10 code changes.
* Tested ICD 10 code for impacted systems under Claims processing.
* Executed test cases and verified the actual results against expected results.
* Validated the data that is mapped onto inbound databases.
* Working on Acccum and Contract GUI for benefit and contract
* Search the member by using the member Inquiry GUI and provide details by using the NPI crosswalk
* Analyzed the application and performed Black Box and end-to-end testing.
* Checked for the Database Integrity using SQL Queries.
* Used Quality Center as the test repository for executing test cases, generating various reports and graphs for further analysis.
* Perform the UAT testing with BA and end client before product is going live
* Performed testing the applications compatibility on UNIX and Windows environment.
* Involved in User Acceptance Testing to verify the functionality of various systems.
* Working on web service application of BCBS for member enrollment and benefit for member, spouse and dependent
* Defects are raised in HP Quality Center and maintained to keep track of the bugs for re-test and close operations and also used HP Quality Center as the test repository for executing test cases, generating various reports and graphs for further analysis.
* Extensively used SQL scripts/queries for data verification at the backend.

Environment: HP Quality center 10,QTP 10.0, Java/J2EC-JDK 1.4/1.5, web sphere application server 6.1, ICD10 Procedure code and Diagnosis code, Rational Quality Manager 4.04, Main frames, IBA DB2V9, IBM web sphere MQ, Blue chip, Terminal emulator, IBM Rational Jazz Team Server 4.0.3, Ultra Edit 16.10, Leap I10

**State farm Insurance, Bloomington, IL Feb 2012 to Oct 2012**

**QA analyst Lead / Telecom tester**

Unified communication and Response Center Service

Unified communication is the communication system where as customer is calling to the rep and rep is transfer call to the available agent to give all the details about the quote, payment, account information etc.

Whereas response center service is the totally web testing of the 24 hours application for quotation of the claim and buying, paying payment and generating the auto ID card.

**Responsibilities:**

* Reviewed Business & functional Requirement Documents and the Technical Specification.
* Extensively involved testing the XML workflows Integration and Database testing.
* Validating the different call flow for rep and agent by using different tools like SFCTI, cookie link, and mobile communicator.
* Creating test plans, test build, adding platform and writing test cases and assigning the test cases by using the test link.
* Finding defect or issue and reporting that defect in track tool.
* Performed Backend, Functional/Regression testing, Batch Testing, Integration testing under agile methodology.
* Using IMB COGNOS tool to generate the report.
* Responsible for Browser Compatibility testing for search engine.
* Tested the functionality of the applications and tested its compatibility on Windows XP/2000 on different versions of Internet Explorer, Netscape, and Firefox.
* Doing the UAT Testing with end client for production release support
* Executed test cases and verified the actual results against expected results.
* Validated the data that is mapped onto inbound databases.
* Analyzed the application and performed Black Box and end-to-end testing.
* Checked for the Database Integrity using SQL Queries.
* Used Quality Center as the test repository for executing test cases, generating various reports and graphs for further analysis.
* Performed testing the applications compatibility on UNIX and Windows environment.
* Involved in User Interface Testing to verify the functionality of various systems.
* Defects are raised in HP Quality Center and maintained to keep track of the bugs for re-test and close operations and also used HP Quality Center as the test repository for executing test cases, generating various reports and graphs for further analysis.
* Extensively used SQL scripts/queries for data verification at the backend
* Doing Regression testing by using selenium tool
* Working on HP Service Manager tools for regression testing related to apps

Environment:J2EE, .Net, VB6.0, HP Quality center 10,QTP 10.0 UNIX, XML, HTTP, FTP, Unix, Oracle , Selenium

**Cardinal Health, Dublin O Feb 2011 to Dec 2011**

**QA Consultant / Performance tester**

OE-Reporting and mobile

Provide hospital customers a cohesive acute care ordering solution tailored to their unique needs which include: Goggle-like search capabilities, category browsing, linked item recommendations, vendor port lets, order tracking, route delay/outage notifications, improved product availability information, enhanced back order management, improved inventory management and better integration with 3rd party hospital applications.

**Responsibilities:**

* Reviewed Business & functional Requirement Documents and the Technical Specification.
* Extensively involved testing the XML workflows Integration and Database testing.
* Performed Backend, Functional/Regression testing, Batch Testing, Integration testing under agile methodology.
* Testing the cart functionality by using the mobile emulator
* Responsible for Browser Compatibility testing for search engine.
* Tested the functionality of the applications and tested its compatibility on Windows XP/2000 on different versions of Internet Explorer, Netscape, and Firefox.
* Executed test cases and verified the actual results against expected results.
* Validated the data that is mapped onto inbound databases.
* Analyzed the application and performed Black Box and end-to-end testing.
* Checked for the Database Integrity using SQL Queries.
* Used Quality Center as the test repository for executing test cases, generating various reports and graphs for further analysis.
* Performed testing the applications compatibility on UNIX and Windows environment.
* Involved in User Interface Testing to verify the functionality of various systems.
* Defects are raised in HP Quality Center and maintained to keep track of the bugs for re-test and close operations and also used HP Quality Center as the test repository for executing test cases, generating various reports and graphs for further analysis.
* Extensively used SQL scripts/queries for data verification at the backend.

Environment: J2EE, .Net, VB6.0, HP Quality center 10,QTP 10.0 UNIX, XML, HTTP, FTP, Unix, Oracle , Mobile emulator 6.1

**State of Nebraska, Lincoln, Nebraska Sep 2009 to Dec 2010**

**Quality Analyst**

The project comprised of improvising the **Health Care** for their customers which is called **Medical Home Pilot Program** to make the calling process more manageable and user friendly. The end result should be improving health care for the clients, cost management purposes for state of Nebraska.

**Project Description 1:**

The **Universal Caseload project** implements business functionality that supports the DHHS service delivery change that moves Economic Assistance clients in N-FOCUS from assigned caseloads to a universal model of casework management. Four Customer Service Centers (CSC) are being implemented across the state, two document Management Hubs are being implemented to support the paperless case files. A new IVR phone system is being developed to serve clients and direct them to a 1-800-383-4278 for direct support. Universal Caseload changes that affect MMIS include the change in caseworker assignment to cases. Caseworker assignment is maintained in N-FOCUS and is then passed to MMIS. Some cases will remain assigned to a caseworker; in MMIS, those cases will continue to populate the caseworker/office details. For cases that are part of the universal caseload, MMIS is making changes in order to populate the universal caseload information. MMIS performed scans, identified various Reports, Letters, Screens, Feeds which has caseworker details on it.

Glossary:

IVR-Interactive Voice Response

DHHS-Department of Human Health Services

N-FOCUS- Nebraska Medicaid Eligibility System

MMIS- Medicaid Management Information Systems

**Project Description 2:**

**MHSA Claims File and Pharmacy File new Managed Care Organizations (MCO)**

**Share Advantage and Coventry**

An RFP has been released with the intent to procure 2 new MC Vendors and eliminate the PCCM for Physical Health Managed Care. An MHSA claims file and Pharmacy file was requested to be sent to the new vendors during the RFP process.

Glossary:

PCCM- Primary Care Case Management purpose.

RFP- Request For Proposal

**Project Description 3:**

**Medical Home Pilot Phase I**

Legislative mandate. New **Medical Home Pilot**. Need attribution methodology to link client to PCP; add new payments; have ability to evaluate pilot. **Definition of the Nebraska Medicaid Patient Centered Medical Home Pilot:** The Patient Centered Medical Home Pilot (PCMHP) is defined as “ a health care delivery model in which a patient establishes an ongoing relationship with a physician in a physician-directed team, to provide comprehensive, accessible, and continuous evidence-based primary and preventive care, and to coordinate the patient’ s health care needs across the health care system in order to improve quality, safety, access, and health outcomes in a cost effective manner.”

**Responsibilities:**

* Contributed to the design and **end-to-end optimization of the Medical Home Pilot Project**.
* Implemented business improvement projects and initiatives focused on Payment Methodology, patient doctor interaction.
* Prepared **test plans and test cases in Quality Center.**
* Prepared and Created **Test Cases /Test Data** according to **5010 Business requirements.**
* Tested HIPAA transactions for multi version support (**4010 and 5010**) and validating the database to file elements.
* Performed **Gap Analysis and Impact Analysis of 5010.**
* Prepared **Test Strategies** for the **5010 Compliance**.
* Involved in preparing data for 837I,837P and 835 for **4010A1 base line testing and 5010 parallel testing.**
* Performed testing on **HL7 messages** based on the requirements provided.
* Worked extensively on inbound transaction set 834(Benefit Enrollment & Maintenance) Claims Adjudication EDI (837), Remittance (835), Claims Status (276/277), Eligibility enquiry (270/271).
* Coordinated and Developed QA activities.
* Performed Analysis to check if EDI Type trees for transaction sets 834, 837,   835 are HIPAA Complaint.
* Involved in **backend testing using SQL queries** and verified the EDI data transactions in the database.
* Executed vast amount of SQL queries to test the integrity of the database using TOAD.
* Tested XML application and **validated data using SQL.**
* Responsibilities included interaction with subject matter expert, and preparation of test plan, which specifies testing overview, testing approach, testing strategy, roles and responsibilities, and scope of testing.
* Wrote test plans and created planning progress graphs in **Quality Center**.
* Performed system testing and **Regression testing** by executing the test scripts.
* Investigated software faults and interfaced with SME to resolve technical issues.
* Errors found in the system were acknowledged to the test and development team through E-mail.
* Involved in the **weekly status update with the Manager** and project leader.
* Contributed to the system design in order to implement multiple concurrent process improvement home pilot project and initiatives in designing of the system.
* Developed a high-level Payment standards for the providers like PMPM, Enhanced payment methods design strategy that creates a framework for the detailed dialog design and meets the business, caller, and application requirements
* **Translating and mapping the Business Requirement Document (**BRD) to Functional Specification Requirement (FRS).and Functional requirement document
* Interpreted and utilize **usability testing data to** improve the design and attribution methodology
* Developed the Detailed Design Specification that meets the **Provider, client, and application requirements,** including: Specifying application logic, including state descriptions, special features, and exit and entry states.
* Devised actionable plans and strategies for implementation of improvement opportunities
* Worked with the IT department to clarify business requirements and set priorities in the development and implementation of **Medical Home Pilot solutions.**
* Worked with attribution of clients to the providers to ensure implementation details are consistent with best practice principles and intended solution design
* Worked with Implementation team to **assist with UAT**

**Environment:** Mainframe, Microsoft Office suite, Microsoft Visio, UML, Excel, Lotus Notes, Clarity.

**Premera blue cross, Seattle, WA July 2008 to Aug 2009**

**Sr. QA Analyst**

Project mercury

Project Mercury involved integration efforts from IBC and Highmark side towards the creation of a new data warehouse. The new data warehouse was named as Unified View (UV).

**Responsibilities:**

* Reviewed the Business Requirements Documents and Technical Specifications.
* Involved in completion of Test Plan.
* Test applications built using VB and SQL using black box testing techniques.
* Validate data in Oracle database while testing the front-end/GUI
* Working on for ICD 9 procedure and diagnosis code for claim processing for benefit and eligibility of member
* Generated Manual Scripts and responsible for executing and bug tracking.
* Configure test environment for specific test cases, create test data, and execute automated or manual tests, document results, and update defect tracking systems.
* Working on registration, account checking , member enrollment and benefit determination for diff health care plan for that member their spouse and dependent ( Grandchild)
* Participate in defect-tracking meetings.
* Working on Trizetto facets for member management and subscriber management modules
* Work closely with Developers, Business Analysts, and end users and participate in the product design process including specification and other document reviews.
* Select the test cases and perform the UAT testing with client
* Systematic bug tracking and reporting through Quality Centre 8.2
* Used SQL Queries and PL-SQL Procedures to perform database testing.

Environment: SAS 9.1,Putty,Linux,UltraEdit, Oracle 10g,,QTP 8.2,Quality Centre 8.2, SQL Navigator, SQL Server2005, TOAD, VB.Net, C#, LoadRunner, TrizettoFacets, TFS2010

**HSBC Bank, India May 2005 to Jun 2008**

**QA Analyst**

HSBC is one of the largest banking and financial services organizations in the world. HSBC provides a comprehensive range of financial services: personal financial services; commercial banking; corporate, investment banking and markets; private banking; and other activities.

**Responsibilities:**

* Involved in Defining, and Analyzing the Testing Requirements based on the Application Functionality.
* Gathered test data requirements for data conditioning from Business Units to test total application functionality.
* Conducted Test Plan walkthroughs.
* Created test scenarios for System testing and Regression testing.
* Prepared Test Plans, Test Cases for both positive and negative scenarios and mapped the same to requirements.
* Executed test scripts manually and analyzed the test results.
* Used Test Director to track defects and attended meetings with developers in resolving the same.
* Tested Web page presentation manually for different browser compatibility.
* Tested broken links and inter application links (page redirects to respective URLs) in Development, Test and Production environments.
* Executed test cases before and after bug fixes for each build for User acceptance testing.
* Back-end testing of the database by writing SQL & PL/ SQL queries.
* Tested the application for third party vendor confirmation and client reports as peruse cases.
* Interacted with developers regarding priority of bugs and update the status of bugs once they are fixed.
* Used Test Director as a central repository for all the test activity.

Environment: Windows 95/NT, Oracle, Web/Application Server, Java, HTML, JavaScript, Test Director, UNIX.