**QUAN LE**

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**PROFESSIONAL SUMMARY**

* **5 years industry experience** as Business Analyst with solid understanding of Business Requirement gathering, Business Process flow, Business Process Modeling and Business Analysis and worked **extensively in Health care domains** in diverse business and technical environments.
* Organized many **Joint Application Developments (JAD)** and Joint Requirement Planning sessions (JRP), **Interviews**and requirement elicitation sessions, sessions with end-user and the development group.
* Comprehensive knowledge and experience in all aspects of the **Software Development Life Cycle (SDLC).** Proficient in Object Oriented Analysis, Design and Development.
* Experience in development methodologies like **AGILE, SCRUM and Waterfall**.
* Extensive experience on Agile processes and techniques (blend of XP and SCRUM features)
* Experience in developing surveys and interview questionnaires for interviewees and selecting the target population segment
* Defining Test Cases, analyzing bugs, interaction with team members in fixing errors and **User Acceptance Testing (UAT).**
* Experience in customer / client interaction, deep understanding of business systems functionality and technicality.
* Proficient in using UML in behavioral, structural and architectural modeling – in creating Use Case, State, Activity, and Class and Sequence diagrams using **MS Visio, MS Project and Balsamiq.**
* 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.**
* Conducted training sessions for business users, technical users, stakeholders for better understanding of the application.
* Conducted **Gap analysis** (AS IS to TO BE) and interacted with users for business requirements.
* Experience in **HP Quality Center, Quick Test Pro (QTP).**
* Strong experience in**HIPPA transactions EDI 834, 837/835, 271/270, 277/276**, Implementation and Knowledge of HIPAA code sets, ICD-9, and ICD-10 coding.
* Proficient in HIPPA standard **4010 – 5010 x 12, ICD9-ICD10.**
* Involved in Facets Output generation, Interface development and **Facets Migration Projects**.
* Experience with healthcare payer/provider management TriZettos Facets Application Groups: Claims Processing, Guided Benefit Configuration, Medical Plan, Provider, Subscriber/Member, and Utilization Management.
* Strong communication, problem solving, organizational, interpersonal, and presentation skills.

**TECHNICAL SKILLS**

**Business Tools:** Rational Suite (Requisite Pro, Rose), MS Visio, MS Project, MS Access, MS Office

Suite, SharePoint, Balsamiq, Business Object (Crystal Reports)

**Testing Tools:** HP Quality Center, QTP, JIRA.

**Methodologies:** RUP, Waterfall, Agile, UML & Business/Data Modeling

**Operating Systems:** Windows XP/95/98/NT/2000, Mac OS X, DOS, UNIX, Linux

**Databases:** Oracle, SQL Server, Access, MS SQL Server, and DB2

**Languages:**  UML, HTML, SQL, PL/SQL.

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

**PROFESSIONAL EXPERIENCE**

**AFFINITY HEATH PLAN – BRONX, NY Aug2012 –Nov 2013**

**Business Analyst**

Affinity Health Plan is one of the nation's leading health care payor, offering a seamless array of acute, primary, tertiary, quaternary, and preventive care backed by excellence in research and education. The main deliverable of this assignment was to develop an integrated solution to provide quality healthcare, optimized process flows, and exceptional and consistent patient experience across all services. The project focus is on HIPAA Claims Processing (HIPAA 837 & 835 transactions) and ICD 10 readiness. Also worked with trading partners and automated process of the payments.

Responsibilities:

* Involved in up-gradation of HIPAA ICD9-CM (Clinical Modification) to ICD10 - CM/PCS (Clinical Modification/Procedure Coding System) simultaneously.
* Worked on impact analysis on 837 (P), 835 834 for transitioning fromICD9 – ICD10.
* Involved in discussion with subject matter experts (SME's) during gap analysis sessions to identify the areas of impact to Gateway, backend systems, and frontend systems for the ICD10 remediation.
* Performing impact analysis for readiness of ICD10 conversion.
* Coordinated with business users to gather requirements to configure the Graphic User Interface (GUI) of FACETS system as per the business rules and HIPAA guidelines.
* Conducted interviews, JAD sessions, and requirement elicitation sessions to extract the business requirements to understand the need to upgrade the existing system to ICD-10
* Constructed the Business Requirement Document (BRD) and the Functional Requirement Document (FRD) for 837 (Professional, Institutional and Dental) 835, 277CA.
* Worked with FACETteam for HIPAA Claims Validation and Verification Process (Pre-Adjudication).
* Schedule meetings with technical team to determine technical parameters for Electronic Data Interchange (EDI) and other related processes including communication, security, and privacy.
* Create transaction sets requirements using MS Excel for HIPAA transactions 835, 837-(P), 835 remittances and others.
* Did forward and backward data mapping between the fields in mainframe and FACETS.
* Analyzed the mainframe reports for member/eligibility/claims and mapped the fields with FACETS batch jobs and reports.
* Tested the changes for the front-end screens in FACETS related to following modules (membership, billing, and providers).
* Actively involved in documentation of UAT (User Acceptance Test), Functional Test, Integration Test Scenarios and Bug Log.
* Worked with Trading Partners to ensure that certain requirements (EDI, Medicare/Medicaid) aremet, which is specific to business.
* Analyzed trading partners' specifications and created EDI mapping guidelines.
* /Involved in reengineering of the EDI Gateway to assist in the development of HIPAA repository to process 5010 claims in accordance with CMS requirements.
* Represented as the point of contact in the HIPAA core team to respond to related to technical support.
* Managed the privacy and security environments of healthcare data that was governed by HIPAA and other government mandates.
* Documented key elements of HIPAA compliance and made sure that they were understood by the development teams.
* Maintained a communications, activities, and schedules to monitor the progress of project using MS project.

Environment: MS Project, MS Access, Rational Unified Process (RUP), QTP, MS Visio, Windows 2000/XP, Quality Center, FACETS.

**MORRISTOWN MEMORIAL HOSPITAL - Morristown, NJ Oct 2011 – Jul 2012**

**Business Analyst**

HI-exchange project dealt with development of an online health information exchange (HIE) and a secure web portal to enable authorized Morristown Memorial Hospital providers to have fast and easy access to patient's electronic health record. HI-exchange web portal features EMR functions and integrated clinical decision support tools for better care Management. The project dealt with development of a Health care cost Containment system and implementation of an automated inter-operable web application that tracks patient medical history and health care plans via viewer application and electronic health records.

**Responsibilities:**

* Conducted JAD to gather requirements and analyzed the requirements using Visio and Balsamiq.
* Collaborated with project manager to define project scope, risks and determined appropriate methodologies to apply based on Scope/Vision documents, and developed project time lines for on time delivery based on SDLC methodology.
* Facilitated requirements meeting, group discussions with business users and subject matter experts (SME) to elicit requirements.
* Responsible for updating Business Requirement Document (BRD) and Functional Requirement Document (FRD).
* Conducted Feasibility analysis through mapping of As-Is Business processes versus To-Be Business processes.
* Made recommendations to development teams regarding the design and implementation of the missing functionality.
* Designed new process flows for the existing system as well as for the enhanced system.
* Worked with the manager and other users and creating Work flow diagrams as per the requirement analysis.
* Conducted status report meetings with the business and the IT team on a weekly basis.
* Used safety mart for clinical safety Data Management.
* Worked with ICD9-ICD10 using mapping tool General Equivalence Mapping (GEM).
* Assisted project manager with the development of project schedules, development requirements and preliminary design for client applications.
* Worked with QA team members to develop test strategies and test scenarios.
* Performed analysis and design projects using a systems development methodology.
* Observed on Regression testing, Integration testing, End to End testing.
* Prepared test data for User Acceptance Testing (UAT) and Production issues.
* Performed User Application Testing (UAT) on HIPPAA EDI transactions and Medicare/ Medicaid eligibility and generated UAT report.
* Tested HIPAA EDI 837/276/834 transactions for the inbound transaction using HP QC.
* Tested membership benefit information HIPPA EDI 270/271.
* Translated customers/client needs into new features and new services.
* Drafted User Training Manuals outlining the features of the application and step-by-step process for using the functionality provided by the application.
* Participated in the logical and physical design sessions and developed design documents.

**Environment**: Agile, Balsamiq, QC, MS Project, MS Visio, MS SQL Server, Windows, GEM

**BLUE CROSS BLUE SHIELD OF MINNESOTA - Eagan, MN Feb 2010 – Sep 2011**

**Business Analyst**

Project Description: Blue Cross Blue Shield of Minnesota is an independent licensee of Blue Cross Blue Shield Association and is one of the leading healthcare providers in the United States, serving 1.6 million people, from individuals to Fortune 100 companies. They provide retirement plans, health, life, vision, dental, long-term care coverage, and other related services. The assignment involved the Claims Migration Program. In the assignment the Business System Analyst provided research and resolution to testing and development teams for all functional areas created and maintained global and detailed configuration report documents to support business decisions.

**Responsibilities**:

* Organized JAD sessions with NASCO and TMG to collect requirements from Subject Matter Experts (SMEs').
* Developed, coordinated, and supported technical team on all operational requirements of their adjudication system and production management.
* Conducted workflow, process diagram, gap analysis, and performance analysis to derive requirements for existing system enhancements.
* Identified end-to-end requirements for all systems and business units that may be impacted by the project.
* Created documentation analysis reporting, strategy planning, risk analysis, contingency plans for company's executives.
* Prepared business and functional requirements documents (BRD & FRD) for claim migration into FACETS system.
* Analyzed business requirements and process through UML diagrams (Use Cases, Class, Sequence, and Activity diagrams) using MS Visio and adapted UML standards to define modularized Data Process Models.
* Ensured Use Cases were consistent and covered all aspects of the Requirements document.
* Worked with FACETS System implementation: claims configuration, inbound interfaces involving HIPAA 834 and proprietary format files.
* Captured the list of all the tables from Member/Subscriber modules in FACETS and all the dependent and related tables from other modules such as Claims and Providers for data mapping.
* Continuously communicated with business users to validate and update business scenario requirements by verifying test cases and test script.
* Established and maintained traceability matrix (RTM)until business requirements were signed off.
* Involve in project status meetings, QA review meeting, and system test meeting.
* Coordinate and facilitate the execution of User Acceptance testing (UAT).

**Environment**: MS Office, MS Project, MS Visio, UML, Rational Unified Process (RUP), FACETS, Window XP, HTML, XML, JIRA, SQL

**HORIZON HEALTHCARE SERVICES Inc., Newark, NJ. Nov 2008 – Dec 2009**

**Business Analyst**

The project was to implement the conversion of **837/835, 834 EDI** transactions from **4010 to 5010**.

**Responsibilities:**

* Prepared requirements documents for conversion of 834 4010 to HIPAA compliant 5010.
* Worked with the project manager for planning and organizing the project activities, and in communicating with other business center mangers and stakeholders of the project.
* Gap Analysis of client requirements, generated workflow process, flow charts and relevant artifacts.
* Worked with FACETS Team for HIPAA Claims Validation and Verification Process (Pre-Adjudication)
* Involved in claim adjudication process of facets application
* Worked on the EDI 834-file load to Facets through MMS (Membership maintenance sub-system)
* Worked with FACETS edits and EDI HIPAA Claims (837/835/834) processing.
* Assisted the EDI team in the development and documentation of the test strategies for the EDI transactions, which included all standard transactions, auditing, and error correction processes, and the creation of the transactions.
* Worked on HIPAA Transactions and Code Sets Standards according to the test scenarios such as 834, 837/835 transactions.
* Coordinated with the EDI team in developing and documenting the detailed testing work plans and created the various testing documents for the assigned EDI transactions.
* Gathered requirements, developed Process Model and detailed Business Policies.
* Designed Use Cases using UML and managed the entire functional requirements life cycle using RUP.
* Worked with the project manager to estimate best/worst case scenarios, track progress with weekly estimates of remaining work to do, conducting informal meetings ad hoc and as needed.
* Followed the RUP methodology for the entire SDLC.
* Involved in writing and implementation of the test plan, and various test cases for UAT.
* Initiated, proposed and implemented critical analytical and technical turnkey solutions extensively increasing the quantitative and qualitative value of the application.
* Worked with FACETS, E-Billing and EDI HIPAA Claims (837/835/834) processing.
* Prepared the Business Workflow using MS-Visio with input, output, Pre and Post conditions.
* Verified that the data outputs and transformations between systems remain true and not compromised as systemπs are bundled together.
* Participated in various meetings and discussed Enhancement and Modification Request issues.
* Tested the HIPPA EDI, 834, 837/835 transactions according to test scenarios and verify the data with Facets on different modules.
* Attended weekly meeting to discuss progress and modification to test plans due to change in business requirements.

**Environment:** Facets, Oracle, HP QC, Unix, SQL, Scrum, MS Visio, and AS400/DB2

**WESTERN UNION - Queens, NY Jan 2008–Aug 2008**

**Business Analyst**

As a Business Analyst my role was to write Technical Specifications documents by analyzing legacy Cognos (MNT) system and third party edits interfaces with one new, comprehensive web-based application. The new application is user-friendlier and streamlines the data entry process.

**Responsibilities**:

* Participated in making Business Requirement Documents (BRD) and Functional Specification Documents (FRD).
* Conducted some Joint Application Development (JAD) sessions to develop and agree upon a system that focuses on the business requirements.
* Documented all system changes and request for user access using Change Management Forms in the WUS document library.
* Updated BRD, FRD based on requirement changes.
* Responsible for collecting reports from Development Team, Testing Team, Designing Team and Release Management Team and updating project status on system using Western Union System (WUS).
* Implemented and support software installation packaging and distribution using Web Based Software Development (WBSD).
* Involved in making prototype using Balsamiq and flow chart diagram using MS Visio.
* Deployed UNIX, WINDOWS NT packages to servers located at HQ and other stores.
* Troubleshoot development and production failed packages and communicate offline end points to appropriate support team and developers.
* Regularly interacted with offshore and onshore development teams.
* Participated regularly in Walkthroughs and Review meetings with the Project Manager, Quality Assurance Engineers, and Development Team.

**Environment**: UNIX, Windows, Balsamiq, MS Visio, JAD, WUS, WBSD, and Agile.

**EDUCATION**

Masters of Business Administration

Bachelor of Business Administration