**RAHMAN**

**SUMMARY OF EXPERIENCE**

* Diversely talented professional with more than Seven years of cross-functional expertise in the IT Services and consulting industry
* In-depth understanding of Healthcare and Insurance industry environment and business requirements
* Proven success as a business analyst through the years, providing a well-balanced understanding of business relationships, business requirements, and technical solutions
* Experienced in **Software Development Life Cycle (SDLC)** methodologies—Traditional **Waterfall Model** and **Iterative** approach to software development as per **Agile (Scrum)** and **Rational Unified Process (RUP)**
* Comfortable in working with different requirement gathering techniques like Brainstorming, JAD sessions, Focus Analysis, Reverse Engineering, Survey, Document Analysis, Interview, Prototyping and Observation
* Good working knowledge of Claims processing, HIPAA Regulations and 270, 837P, 837I, 837D EDI Transactions, ICD 9 and ICD 10 for health care industries
* Solid understanding of Business Process definition, Risk Analysis, Impact Analysis, SWOT Analysis, GAP Analysis (As Is – To Be) and SDLC methodologies.
* Excellent in Developing and evaluating business process Models
* Design and review of various documents including the Software Requirement Specifications (SRS), Business requirements document (BRD), Use Case Specifications, Functional Specifications Document (FSD), Systems Design Specification (SDS), Requirement Traceability Matrix (RTM) and testing documents
* Proven success as a business analyst through the years, providing a well-balanced understanding of business relationships, business requirements, and technical solutions
* Professional experience in business analysis, operations management and development, design, documentation and testing
* Knowledge of **Data Warehousing** concepts and Extraction, Transform and Loading **(ETL)** Processes using Infomatica and Ab Initio
* Excellent Analytical, methodical, and resourceful approach to problem solving, identifying and documenting root causes and corrective actions to meet short and long term business and system requirements
* Effective in executing multiple tasks and assignments ahead of schedule. Created and maintained effective budgets
* Excellent in Business proposal Risk Assessment. Highly effective management and organizational skills with ability to prioritize
* Exposure to Client/Server, Web Application developmental tools and Software development and design
* Demonstrated ability to identify root causes of problems, consider both the long and short-term impact of proposed solutions and develop workable solutions. Ability to manage (Multiple) project tasks with changing priorities and tight deadlines. Ability to work well in a team. Open to Team related tasks, team meetings, team interaction and conference calls

**TECHNICAL SKILLS**

Methodologies : Rational Unified Process (RUP), Iterative – Agile (Scrum), Waterfall

Office Tools : MS Word, MS Excel, MS PowerPoint, MS Access, MS Project, MS Outlook, Lotus Notes, MS SharePoint

Modeling tools : MS Visio, Rational Rose, Smart Draw

Testing Tools : Test Director, HP Quality Center, WinRunner, Load Runner, Clear Quest

Operating Systems : Windows Vista, NT/2000/2003/ XP/98, MS DOS, UNIX

Data Warehousing : Infomatica, Ab Initio

Quality Management : HIPAA, CMMI, CMM, Six Sigma, TQM

Languages : SQL, PL/SQL, HTML, XML

Database : MS Access, SQL Server, Oracle 9i & 10g, Teradata.

Other Tools : Macromedia Dream Weaver, Macromedia Flash and Adobe Photoshop

**PROFESSIONAL EXPERIENCE:**

**Indiana State-FSSA, Indianapolis, IN    (August 2011 – Current)**

**Business Analyst**

**Project Description** :The state of Indiana Medicaid had to comply with CMS mandated HIPAA 5010 and ICD-10 requirements within the timelines. The objective of the Project was to do the assessment for **Indiana state-FSSA (MMIS and other State systems)**, and perform **GAP analysis** between current HIPAA 4010 / ICD**-**9 and compliance HIPAA 5010 / ICD**-**10 followed by Implementation Phase, which will include the actual conversion from 4010/ ICD**-**9 to 5010/ ICD**-**10.

**Roles & Responsibilities:**

* Involved in overview Interview sessions, training presentation sessions and detailed interviews. Worked with State-Client to gather the information about the documents and business processes
* Actively worked on Business requirement gathering, analysis and Data analysis
* Contributed in 5010/ ICD-10 Awareness Training Management Plan, created evaluation tool, and survey questions
* Conducted JAD sessions and developed various strategies to distribute the work in team, dealing with huge number of documents from state to meet the deadline
* Reviewed state documents (policies, manuals, business processes, systems documents, banners, bulletins) from various divisions. Analyzed and performed quality assurance to determine areas impacted by HIPAA 5010 and ICD-10 related data.
* Performed Gap Analysis using ‘Tracer’ tool, created gaps and generated weekly reports based on results and used Share point 2010 to store all Project Artifacts
* Mapped ICD codes and prepared final result summary documents with reports
* Created BRCs of EDI inbound and outbound transactions (837 P/I/D, 835, 270, 271, 276, 277, 834) and mapped the provided data
* Contributed in process development, issue solving process, and creation of the process flow documents and diagrams
* Extensively involved in HIPAA 5010 User Acceptance Testing (UAT). Defined and maintained Test Cases for EDI transactions.
* Authored and executed test cases and test scripts for 5010 testing. Used HP Quality Center for error reporting and tracking and for communicating between developers, production support and test team members

**Health Insurance Plan (HIP), New York (Oct 2009- July 2011)**

**Business Analyst**

**Project Description**: Health Insurance Plan Corp (HIP) is a full health management company providing full range of HMO, PPO, and POS benefit plans. HIP wanted to have data consistency and proper data mapping between the old and the new system. Developed the Business Crosswalks for 837(P, I, D), 835 and 276/277 according to HIPAA implementation rules. This project also involved creating the medical claims processing system. It consisted of different modules like provider enrollment, member enrollment, programs and coverage. This project also involved the maintenance of claims workstation that automatically handles the entire claims life cycle.

**Technologies**: Rational Unified Process (RUP), MS Office, MS Visio, MS Project, DB2, Rational Requisite Pro, Rational Test Manager, Win Runner, Rational Clear Quest, HTML, XML, XSL and XSLT.

**Roles & Responsibilities:**

* Gathering and documenting the requirements in Requisite Pro those are critical to the business mission and using those requirements to design application software using a Use Case approach
* Created EDI documents for EDI maps to generate requirement documents and Project Charter, and logical design documents for EDI transactions and code sets
* Working with clients to better understand their needs and present solutions using structured SDLC approach
* Developed integrated tools for business assessment utilizing existing system modules from different vendors including billing data for Healthcare clinic scheduling data and Dictaphone timestamp data, as well as internal scheduling data for this large provider of radiology healthcare in hospitals and clinics
* Involved in the full HIPAA compliance lifecycle from GAP analysis, mapping, implementation, and testing for processing of Medicaid Claims
* Developed the User Interfaces, AS-IS and TO-BE flows and the Use Cases to encapsulate the information with ease
* Performed process management, process improvement, business process re-engineering, and risk management in the analysis, design, build, test and launch phases
* Modeled the As-Is system and performed a complete Gap Analysis to identify to-be state
* Involved in mentoring specific projects in application of the new SDLC based on the Agile Unified Process, especially from the project management, requirements and architecture perspectives
* Worked on modules related to Providers, Contract & Claims and worked with Claims, Provider attributes, enabling EOB & Remit rules associated with Provider configuration process in QNX
* The HIPAA component efforts included mapping and gap analysis of legacy claims formats, CMS 1500 and UB92 to 837P and 837I
* Preparing BRD, Business Cases, and presentation to the clients, Business Re-engineering proposals
* Preparing UML artifacts viz. Use Cases, Activity Diagrams, recommended by RUP (Rational Unified Process) for Requirements
* Collaborated in building a business analysis process model using Rational Rose, RequisitePro, and Visio
* Documented, tabulated and reviewed methods of valuation in effect, using SQL (to continue working on prototype developed by self)
* Conducted user interviews, gathered requirements, analyzed the requirements by using Rational Rose, Visio and Requisite pro - RUP
* Responsible for creating test scenarios, scripting test cases using testing tool and defect management for Policy Management Systems, Payables/Receivables and Claims processing
* Created DTS Packages for migration of data between MS SQL Server database and other databases like MS Access, MS Excel and Flat Files
* Developed Use Case diagrams, business flow diagrams, Activity/State diagrams and Sequence diagrams so that developers and other stake holders can understand the business process by using UML
* Involved in determining test strategies based on requirements and architecture
* Engaged in analysing requirements, identifying various individual logical components, expressing the system design through UML diagrams
* Analyzed and Documented Business Requirement Document (BRD), Functional Specification Documentation, and System Requirement Documentation, using UML methodologies
* Assisted Project Teams in preparing Software Requirement Specifications (SRS), User Interface Design, designing of Application Architecture & Database Modeling.
* Worked as an interface between the users and the different teams involved in the application development for the better understanding of the business and IT processes.
* Involved in the documentation and technical writing of the requirements in an elaborate way
* Handled change request and change management and project management using Niku Project
* Conducted User-Acceptance Testing

## Texas Medicaid & Healthcare Partnership, Austin, TX (July 2008 – Sep 2009)

**Business Analyst**

**Project Description**: Firebird Grievance remediation was undertaken by TMHP to simplify the grievance handling process by TMHP operations. The Firebird Grievance module is an internal grievance handling application for TMHP which is utilized by the Fair Hearings and Complaints staff at TMHP. The project was undertaken to simplify the workflow processes involved in scheduling the Fair Hearings process for Medicaid Clients and providers. Firebird Grievance Module was remediated to handle new requirements and processes which would reduce manual intervention in the lifecycle of Fair Hearings and Complaints. The system was an online portal which allows the TMHP operations staff to create and manage Fair Hearings and Complaints records and report on the details of both Complaints and Fair Hearings activities to the state.

**Technologies**:Windows XP,SQL server, XML, MS Office, Test Director, MS Visio, Adobe Professional V.8.

**Roles & Responsibilities:**

* Interacted with the software developers and Fair Hearing SME’s to liaison the business requirements to ensure that the application under development confines to the business requirement
* Involved in requirement gathering from TMHP operations staff and state stakeholders and creating Business and User requirement document for approval and sign off.
* Involved in defining workflow requirements for all grievance handled through the TMHP Firebird Grievance Module
* Designed new reports and Interfaces as part of the development effort in the form of Mock ups for approval from the stakeholders
* Created Functional Specifications document and conducted walkthrough sessions with the stakeholders to get approval and signoff
* Created Test approach and Test plan for the project, conducted walkthrough for both documents and achieved approval and signoff form all stakeholders
* Created Test cases for the project in Test Director and was responsible for reporting on various metrics required as part of Accenture Delivery Methods (ADM) to the state.
* Conducted peer review sessions for all documents requiring signoff’s
* Involved in testing the application through the various development environments such as Development environment, Product Test environment, Regression Environment and production environment
* Assisted in developing UAT test scripts for operations and running them in Test Director
* Conducted two UAT (User Acceptance Testing) sessions for different stakeholders in the project
* Involved in preparing test data for the functional test cases. Executed test cases, evaluated test results and prepared test summary reports
* Involved in post implementation activities such as Deployment verification and product verification processes

**Group Health Insurance, Chicago, IL** (**July 06-April 08**)

**Business/System Analyst**

**Project Description** GHI contracted with the Medicare Centers and Medicaid Services (CMS) to provide quick, easy, and affordable access to the health care service of their choice. Market Prominence™ is the only system that provides management with the ability to tailor each step of the regulatory process based on the health plan's interactions with each of its beneficiaries. Project involves integrating Market Prominence and the Claims processing System with the data warehouse to support the reporting requirements. My duties were included designing the model of ODS to automate and maintain the ETL process

**Technologies:** Rational Clear Case, Doors, XML, SAS, RUP, Oracle, Rational Rose, Rational RequisitePro, MS Office, DB2, Sybase, SQL Server Reports, Quick TestPro

**Roles & Responsibilities:**

* Prepared Business Context Diagram, Use Case diagrams and corresponding Activity Diagrams using Rational Rose to depict the workflows to be incorporated into the development of Pega Business Process Management (BPM) tool.

# Worked with data migration (ETL development), document data manipulation processes and scripts

* Managed the team of consultants responsible for developing on-demand Medicaid Management System (MMIS) reports.

# Involved in analyzing the claims on basis of Primary and Secondary Payers and performed Medicare subsidy eligibility check for employee group plans.

* Researched the existing client processes and guided the team in aligning with the HIPAA rules and regulations for the systems for all the EDI transaction sets.
* Reviewed the data model and reporting requirements for Cognos Reports with the Data warehouse/ETL and Reporting team.
* Wrote database interface specifications and documented in Data Manager data dictionary
* Create and maintain data model/architecture standards, including master data management (MDM)
* Responsible for integrating with Facets. Designing test scripts for testing of Claims in Development, Integration and production environment.
* Extensively involved in the modeling and development of Reporting Data Warehousing System.
* Performed Business Process Mapping and performed AS IS and TO BE analysis
* Created and managed Project Templates, Use Case Project Templates, Requirement Types and Traceability Relationships in Rational RequisitePro.
* Integrate Data from wide range of sources including in-house clinical data management systems, labs and contract research organizations and perform data cleaning.
* Involved in creating automated Test Scripts representing various Transactions, Documenting the Load Testing Process and Methodology. Created meaningful reports for analysis and integrated the Performance Testing in the SDLC.
* Assisted in mapping the requirements to the source systems, the DW and applicable data marts.
* Organized the data for the court report performing data extraction from different data repositories
* Tested the final application for Usability testing to verify whether all the User Requirements were catered to by the application

## Siemens Health Solutions, Malvern, PA (Feb 05 – June 06)

**Business Analyst**

## Project Description:

Siemens Health Services provides leading-edge software and service solutions that help healthcare providers improve patient care while reducing costs. They enable customers to achieve proven outcomes in quality, patient safety and financial performance through IT solutions that streamline workflow to create greater efficiencies across the healthcare continuum.

**Technologies**: Microsoft Office Suite, MS Visio, Windows XP, SQL, PLSQL, XML, Crystal Reports, SSRS, Adobe Photoshop, Mercury TestDirector, WinRunner, LoadRunner

**Roles & Responsibilities:**

* Completed a thorough customer analysis and prepared a Request for proposal (RFP) document and got the shortlisted vendor document signed off. Finally CRM was decided upon by the stakeholders among shortlisted as final implementation customer
* Worked with HIPAA rules and regulations to draft business rules and claim processes.
* Create and maintain Use Cases, visual models, including activity diagrams, logical Business process models, and sequence diagrams using UML.
* Substantial report development experience utilizing SQL Server Reporting Services (SSRS), Cognos Impromptu, and Microsoft Excel
* Created source table definitions in the DataStage Repository by studying the data sources.
* Prepared Use cases and Data flow diagrams and Work flow diagrams, considering the scope of the project with MS Visio 2003.
* Integrated Requisite Pro with Rational Rose to provide all teams visibility and maintain traceability among requirements, use cases and change requests.
* Reviewed Stored Procedures for reports and wrote test queries against the source system (SQL Server) to match the results with the actual report against the Data mart (Oracle).
* Created and scheduled Sessions based on demand, run on time and run only once using Informatica Server Manager.
* I was responsible for all project deliverables and the technical architecture supporting the Business Intelligence environments including all aspects of data warehouse construction.
* Developed demonstrated prototypes including data models, business objects, reports and business dashboards and received their feedback to define the information access strategy for an integrated data warehousing and reporting solution.
* Worked on MS Excel Macros for creating automatic reports
* Responsible for executing User Interface Testing, System Testing, Data Quality Testing on the configuration design and prototypes.
* Assure that all Artifacts are in compliance with corporate SDLC Policies and guidelines.
* Functioned as the primary liaison between the Business line, operations, and the technical areas throughout the Project Cycle.
* Defined the test criteria and project schedules, and baseline the Test Plan with the help of project meetings, walkthroughs.
* Developed Functional Specification Document and Supplementary Specification (non-functional) Document.
* Participated in the Logical and Physical Design sessions and developed Design Documents.
* Developed schemas for extraction, transaction, and loading (ETL) using Infomatica to expedite data integration between systems.
* Worked with Quality Control Teams to develop Test Plan and Test Cases.
* Develop User Manuals, and Training Manuals as per Project Specifications and timelines