# Professional Summary

* Experienced and distinguished Sr Business Analyst with 8 experience in Software Development Life Cycle (SDLC) and Healthcare Industry Claims processing
* Experience in the development, implementation and integration strategies towards a team oriented environment, utilizing quantitative and qualitative analytical skills.
* Proficient in gathering business and technical requirements from both formal and informal sessions through interviews, NetMeeting, questionnaire, [video conferencing](http://www.devbistro.com/resumes/Syedraza123), JAD sessions and conference calls.
* Documentation: BRD (Business Requirement Document), FRD (Functional Requirement Document) and Non-functional Requirement Document.
* Experience in interviewing Business users & SMEs providing recommendations to resolve issues for various business/technical groups & defining strategic solutions to business problems in a multiple project environment.
* Excellent understanding and experiences in Agile Methodology – SCRUM creating user stories
* Good understanding and experiences in Agile Methodology.
* Expert in Tracking and Managing the Requirements using Requirement Traceability Matrix (RTM) that controls numerous artifacts produced by the teams across the deliverables for a project.
* Strong knowledge of Use Cases, Sequence Diagrams, Collaboration Diagrams, Activity Diagrams, and Class Diagrams.
* Identified complex problems and review related information to develop and evaluate options and implement solutions.PRD & RMP.
* Good knowledge of DCO (direct Capture of Objectives) in PRPC and developing process flows using DCO.
* Experience in Extraction, Transforming and Loading (ETL) data flows using SSIS; creating mappings/workflows to extract data from Oracle, SQL Server and Flat File sources, legacy systems and load into various Business Entities.
* Helped developers with the following list of HIPAA-EDI Transaction Code Sets: (837, 835, 270/271, and 276/277).
* Knowledge of Health Insurance Portability and Accountability Act (HIPAA) standards, Electronic Data Interchange (EDI) and implementation of ASC X12N code sets 4010A/5010, ICD-9, ICD-10
* Knowledge and Implementation experience in Eligibility System, Facets Data model, Configuration Implementation of FACETS module.
* Involved in using FACETS for various health insurance areas such as products, enrollment, members and other modules related to FACETS.
* Work experience in data warehousing projects dealing with ETL (extraction, transformation, load) using Oracle
* Good knowledge on different modules within healthcare (Membership, billing, enrollment, claims, capitation, providers).
* Strong Experience in Claims Processing and Claims Scrubbing in HMO, PPO, Medicaid and [Medicare](http://www.devbistro.com/resumes/Syedraza123).
* Experience with Medicare, Medicaid & commercial insurances in HIPAA ANSI X12 4010 & 5010 formats including 270,271, 276, 277,820, 837, 835, 997, NPI, ICD 9, ICD 10 codes, NSF formats for interfaces & images to clearinghouses/ trading partners’ applications/Expertise in ICD-9 to ICD-10 Conversion.
* Experience with Pega Rules Process Commander in the implementation of the system to streamline various operations like credit cards and accounting management
* Worked on various Professional billing and Hospital billing products.
* Experience with health care Systems FACETS, Medicare Part A, B, C, D, Medicaid systems.

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| TECHNICAL SKILLS: |

Methodologies: SDLC, RUP, UML, RTM,ACA,PEGA,DCO, PRD,RMP, Agile, Business Modeling, Process and Data Modeling

Project Management: Microsoft Project, Microsoft Office

Modeling Tools: Rational Rose, Microsoft Visio, Rational Requisite Pro, Clear Case, Clear Quest

Change Management Tools: Rational Requisite Pro, Clear Quest, Test Director.

Version Control Systems: Rational Clear Case

Testing Tools: Rational Enterprise Suite, Test director, Win Runner

Languages: C, C++, Java, .Net, XML, UML, HTML

Databases: Oracle, MS SQL server, MS-Access

Operating Systems: Windows family, familiar with UNIX and LINUX

RDBMS and Databases: SQL Server, Sybase MS Access   
Healthcare: ANSI X12, HIPAA, EDI, Enrollment,Claims,Benefits, HIPPA, 5010, 4010,EDI,834 ,820,837, FACETS, Claims, Medicaid, ICD 9 to ICD 10

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| PROFESSIONAL EXPERIENCE: |

**Blue Cross Blue Shield of Tennessee. TN Sr. Business Analyst July, 2014 – May-2015**

**Description** This project involved the Member Dashboard - Genesys Interaction Workspace which is a Member Experience Excellence IHM Initiative to support the IHM goals of improving an individual's healthcare experience, advancing the health status of the population, creating a reduction in medical trend and fostering service representatives with a single comprehensive view with routinely accessed information that is as close to real time as possible from disparate systems. The Dashboard will allow for better interaction with members and providers by delivering prioritized, proactive engagement opportunities across all call center environments. The goal of this project was to improve member/provider experience, an enhanced way for representatives to see member information, and deliver education opportunities for members regarding specific health care needs (Member Centric Decision Management). It also involves up-gradation of HIPAA 4010 to 5010 and ICD 9 to ICD 10. And also involved up-gradation of HIPAA X12 4010 transaction to HIPAA X12 5010 and ICD 9-CM (Clinical modification) to ICD-10-CM/PCS (Clinical modification/procedure coding system) simultaneously

**Roles & Responsibilities:**

* Expertise in Agile methodology, Use Cases, Software Development Life cycle (SDLC) Processes.
* Worked on the EDI 834, 835,837 file load through MMS (Membership maintenance sub-system) and including Claims, Provider, Portal, Billing, Benefits
* Prepared Scrum scope, product backlog, PRD,RMP and prioritize the backlog.
* Performed GAP analysis for ICD codes and EDI 5010 X12 with the 4010 Structure for EDI 834, 835,837 Transactions.
* Extensive experience in gathering Business and Functional Requirements, developing Use Cases,
* Conducted Gap Analysis and preparing Training manuals.
* Worked on DCO (Direct capture of objectives) in Pega Rules Process Commander for the creation of the use case and the requirements for the ‘to be’ process.
* Using PEGA, developed workflows for services appeals, member maintenance, callback flows, Service Level Agreements etc.
* Detailed understanding of ACA Edge Server for Risk Adjustment, Reinsurance and Risk Corridors
* Excellent Business writing in creating Business requirement Document (BRD), Use Case and Product Backlog Item (PBI).
* Migrated data from Heterogeneous data Sources (Datamart, Access, Excel, Flat File) to centralized SQL Server.
* Assisted the Product Managers/Product owner in setting up timelines for the various teams (development and testing teams) as per the Agile SDLC.
* Created process flows for HIPAA EDI transactions such as 270, 271, 276, 277 and 820.
* Initiated the Agile Scrum methodology for the project execution.
* Identifying Business rules and specifications for Enrollment files, Medical Claim Files and Pharmacy files for the ACA Edge Server project.
* Worked in the agile framework & followed scrum.PRD and RMP Documented.
* Gathered requirements from the users and analyzed the requirements for RQ System, Facets etc.
* Extensively worked with FACETS Implementation, FACETS Billing, Claim Processing and Subscriber/Member module.
* Managing the project using Agile method and implemented scrum methodology.
* Prepared and maintained requirements traceability matrix (RTM) throughout the project lifecycle.
* Developed several detail and summary reports including line and pie charts, trend analysis reports and sub-reports according to business
* Generated queries on SQL to verify the integrity of database.
* Documented business process design and created system use cases in the Pega tool using DCO.
* Recognized as a subject-matter expert in Workers' Compensation, Medicare, and Medicaid regulatory interpretation and the translation of policy into information technology systems.
* Supported analysis of EDI infrastructure to receive ACA data from contributing organizations for the ACA Performance Dashboard (ACAPD)
* Proficient soliciting client Requirements through interviews, workshops, existing system documentation and organizing JAD sessions.
* Defined complex information systems solutions to address business needs. Initiatives are large in scope, typically cross-functional and often involve multiple platforms and technologies.
* Ensures that requirements specifications are captured in standard templates and are written using natural language in clear, unambiguous, and concise terms.
* Maintained Requirement Traceability Matrix (RTM).

**Environment:** Facets, HIPAA ANSI X12, Rational Rose, Rational Requisite Pro, Microsoft Visio, MS word, MS Excel, MS outlook, MS Access, EDI, Oracle, MS SQL Server, Agile Scrum, Pega, DCO, PowerPoint, Rational Requisite.

**Health Highway, Boston, MA            Position: Business Analyst January, 2012 – May, 2014**

**Description** The project involved reengineering their current processes and enhancing their web integrated application for claims, pricing, and guest experience. The application supported different health care programs with different providers. The implementation resulted in reduced timelines in servicing their customers, better reporting in customized formats, and enhanced capability of customer contact representative to efficiently serve callers using the system. Our team was involved in the quality planning and testing of a web based ordering solution of the pharmaceutical company. Facilitated test plans and user acceptance tests and regression analysis as well.

**Roles & Responsibilities:**

* Collected the information related to ongoing application upgrade and their impact on ICD-10 implementation and impact, benefits and risks of ICD-10 code application.
* Constant touch with all the submitters of part A and B helping them with transition from 837 4010 to 837 5010 transaction.
* Used Agile software development methodology in defining the problem, gathering requirements, development iterations, business modeling and communicating with the technical team for development of the system.
* Involved in documenting the business process by identifying the requirements and Preparing the PRD such as Animal Disease with the product and RMP/Clarity.
* Use agile systems and strategies to provide quick and feasible solutions, based on agile system, to the organization.
* Followed AGILE methodology throughout the software development life cycle for some of the projects worked on.
* Conducted daily SCRUM meetings during the Sprint Development as a part of Agile Methodology. Also captured and addressed concerns from IT to Product Management or Business Team as needed
* Conducting DCO sessions with the team members
* Created Use Cases and developed Business Rules document for the implementation of Workflows in Pega PRPC
* Assisted the Product Managers in setting up timelines for the various teams (development and testing teams) as per the Agile SDLC.
* Interface with internal and external clients continuously to maintain effective communication and coordination
* Vendor Management – Work as a facilitator for Testing Efforts and New Requirements between the Healthcare Company and its various Vendors.
* Coordinated the upgrade of Transaction Sets 837P, 837I and 835 to HIPAA compliance.
* Involved in the formulation of Business Requirements Document (BRD),PRD,And RMP.
* Analysis and Design of existing transaction sets, and modification of these transaction sets to ensure HIPAA compliance.
* Did gap analysis for HIPAA 4010 837P, 837I and 835 transactions and HIPAA 5010 837P, 837I and 835 transactions.
* Monitored the compliance mapping of transactions to the EDI transactions standards ANSI -X12.
* Accepted inbound transactions from multiple sources using FACETS.
* Supported integrated EDI batch processing and real-time EDI using FACETS.
* Developed, compiled and updated the Requirement Traceability Matrix (RTM) during all phases of the software lifecycle.
* Recommend tactic to implement HIPAA 4010 ( EDI X12 837,834,278,270) in the new System
* Worked on Electronic health record system as a CRM web based application.
* Extensively worked on preparing the business use cases for the new Pega application from the requirements gathered in the elaboration sessions with the business subject matter experts.
* Gathered Business Requirements from the Subject Matter Experts (SMEs) and documented the requirements in the BRD. Utilized use case diagrams to represent information provided by the Business Owners.
* Worked for Version document with SME. Primary Liaison between Business User and Development Team.
* Assisted Project Manager and User managers to conduct Market Research and Feasibility Studies, and to develop Scope/Vision Documents.
* Created use-case scenarios and storyboards in MS Word and MS PowerPoint for better visualization of the application and managed them using Rational Requisite Pro.
* Conducted Gap Analysis, and Gathered User Requirements by Interviews, user meeting, JAD session, and Requirement Elicitation Sessions
* Followed a methodical Change Management Process and documented any Change Requests into Clear Case for any changes in the requirements after the requirements were base lined.

**Environment:** Pega,FACETS, Agile, RMP, Scrum EDI, HIPAA,X12,Quality Center (Windows, Java, XML, Oracle, Toad, HTML, UNIX,JIRA, Clear Quest

**State of New Mexico, Albuquerque, NM Position: Business Analyst Jan, 2009 – December, 2011   
Description** In accordance with the Affordable Care Act (ACA – Obamacare); NMHIX was setup by State of New Mexico to facilitate the purchase of health insurance at affordable prices. Business Analyst, I reviewed and monitored project activities to identify risks, issues and quality assurance concerns through participation in meetings, interviews and formal assessment tools. I also contributed to written project status reports and other deliverable reports and assessed and documented implementation and operational readiness.Agile Methodologies specifically on Extreme Programming.data warehouse data analyst in analyzing existing reports and identifying iteration metrics.

**Roles & Responsibilities:**

* nteracted with stakeholders to get a better understanding of client business processes and gathered requirements.
* Collaborated with business analysis team members in understanding existing business processes and requirement management process.
* Followed a structured approach to organize requirements into logical groupings of essential business processes, business rules, and information needs, and insured that critical requirements were not missed
* Planned the meetings by providing advanced meeting Agendas and previous minutes
* Kept record of the meeting minutes and action items
* Ensured clear communication via Activity Diagrams, Workflows, Use case Diagrams, Swim lanes
* Identified the Gaps and conducted GAP analysis
* Conducted Product Review on various aspects of the business documents that were submitted by clients, to see the progress of the project.
* Worked on the consolidation of the Oversight Checklist area based on the Product Review to identify the process of the business and identify the gap to provide feedback to the client.
* Worked as a secondary lead on Requirement Management, Data Management and System and Acceptance Testing to help the lead of the designated areas to accomplish the task.
* Prepared Weekly and Monthly Report with the guidance of Project Manager to be submitted to the client.
* Maintained the Daily Meeting Log to keep track of the Meetings attended and assuring that a Meeting worksheet has been submitted.
* Designed use cases and activity diagrams for the processes highlighted specifically by the business.
* Facilitated JADs for requirement walkthrough, identification of nonfunctional requirements from system users and updated business requirements that provided appropriate scope of work for technical team to develop prototype and overall system.
* Mapped the test scenarios to business requirements as part of creating traceability matrix
* Verified the Business Scenarios on new builds to allow extended testing by the QA team
* Attended various meetings with the NMHIX, GetInsured, CMS and Public Consulting Group (CMS).
* Attended a two day Final Design Review Meeting with NMHIX, PCG, CMS, Deloitte, HSD (Human Services Department) to see the progress of the project.
* Ensured that the Project SharePoint site is up-to-date and versioning of the documents are clearly maintained
* Supported the CAPMS (CMS Agency Project Management System) for the Affordable Care Act (ACA) and Non-ACA projects
* Used SQL tools like TOAD to run SQL queries to view and validate the data loaded into the warehouse.
* Extensive experience in ETL processes in extracting data from Operational and Legacy Systems to Data Warehouse using Informatics.
* Worked closely with System Architect to implement Service Oriented Architecture (SOA), Client side Validations, Server side Validations, Web Services and Web Methods involved.

**Environment**: RTM, MS Project, MS Visio, MS Word, MS Excel, MS PowerPoint, MS SharePoint, JIRA, Windows XP, HIPAA HTML, Agile

**First United Bank, Dallas, TX Business Analyst Jan, 2007 – Dec, 2008**

**Description** Managed networking, negotiating, and defining requirements, obtaining approval, developing and testing product system projects from UAT, through implementation. Strived for quality and process improvement. Directed and mentored staff of five. Supported Operations and Business Channels. Worked closely with Senior Management, Legal, Compliance, and Subject Matter Experts and outside Vendors. Facilitated meetings with business and staff.  **Roles & Responsibilities:**

* Gathered user requirements and business requirements from business/user group and documented User, Business, Functional, and Technical requirements specifications using MS Word and MS Visio that provided appropriate scope of work for technical team to develop prototype and overall system.
* Used HP Quality Center to track and manage all defects and enhancement process.
* Used MS PowerPoint to create presentations for the business owners and other stake holders.
* Used MS Visio to create UML diagrams and design High Fidelity wireframes.
* Wrote SQL queries for requirement analysis and data validation.
* Perform data analysis and validate business requirements.
* Prepare data mapping specifications – Include data flow diagrams, field level mappings and rules for multiple applications.
* Provide data analysis and recommendations for the correction, enhancement and/or development of Customer Analytics applications.
* Managed and coordinated all phases of Software version update project and supported staff - met stringent deliverables and implementation date.
* Process mapped Operations, which identified redundancies, manual processes and backlogs, which improved efficiency of departments and service levels.
* Identifies Actors, Activities, Artifacts, and Workflows and developed use case diagrams using MS Visio.
* Implemented Rational Unified Process (RUP) as the software development methodology.
* Performed GAP analysis and came up with alternative options which could be preferred to better serve its members and customers.
* Ability to lead requirements definition and design sessions through use of interviews, surveys, user workshops, product/prototype demo
* Wrote test cases and test plans for the related and assigned scripts according to the test strategies defined in the project and testing team guidelines.
* Tracked and maintained Stakeholder requested enhancements and changes using Requirement Traceability Matrix (RTM).
* Documenting the retail Mortgage Servicing with emphasis on Default, entire loan life cycle and processes.
* Experience documenting investment related business process, trade reconciliation and trade processing.
* Experience using API to create automated information display and lead assignment for mortgage.
* Extracted and manipulated data using SQL.
* Designed and implemented SQL queries for the retrieval and management of data.
* Reviewed development plans, quality assurance test plans, and user documentation to ensure correct interpretation of original specifications.

**Environment:** Windows XP/NT, UNIX, C++, Java, HTML, XML, .NET, Java Script, Oracle, Rational Requisite Pro, UML, Win Runner, Load Runner, Test Director, TOAD , HP Quality Center, JIRA, Load Runner , MS Visio , MS PowerPoint , MS Excel , MS Word.