**SOUMYA VEDAM**

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### Business Analyst

### Looking for a challenging role as a Business Analyst in the healthcare industry in a result driven work environment where I will have opportunity of utilizing my experience and knowledge to meet business targets and ensure client satisfaction.

### SUMMARY:

* Experience in **Business Requirement gathering, Business Process flow, Analysis, and writing Business /Technical Requirements Documents** using **MS Visio/Rational Rose.**
* Experience in all phases of the **Software Development Life Cycle (SDLC**), Rational unified process **(RUP), agile** methodology.
* Experience in conducting **Joint Application Development** JAD sessions, workshops etc. to resolve open issues, and change requests.
* Experience in performing **Gap Analysis** to check the compatibility of the existing system infrastructure with the new business requirements.
* Experience in implementation of **HIPAA 4010** and **HIPAA 5010** changes in the existing claim processing integrated system.
* Proficient in **ICD-9-CM** and **ICD -10-CM** coding and claims processing.
* Knowledge of **Medical Management Information Systems (MMIS)**, **Medicaid**, **Medicare**, **Procedural and Diagnostic codes** and **Claims Process**
* Excellent knowledge of Health Insurance Portability and Accountability Act (**HIPAA**) transaction and code set rules such as **837** for submitting claims, **835** for payments, 834 for benefit enrollment, **270/271** forhealth care benefit sand eligibility, **275** for patient information, **276/ 277** for claims status and **278** for transmitting health care service information.
* Knowledge of **EMR/EHR, Health Care Reform and Patient Protection and Affordable Care Act (PPACA).**
* Experience in writing **Test Plan**, **Test Scripts and Test Cases** for **Functional, System, Integration, UAT, and Regression Testing based on the Design Document and User Requirement Document for the Functional, Security, and Performance Testing.**
* Experience in databases like **Oracle, SQL**.
* Knowledge of standards like **CMM, Six Sigma**.
* Excellent written and verbal communication.
* Strengths include quick learner, problem-solving capability, and ability to work as team player and lead the teams. Consistently demonstrated ability to achieve tight deadlines.

### TECHNICAL SKILLS:

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| **Operating Systems:** | Microsoft Windows, UNIX, Mac |
| **Languages:** | SQL, HTML, XML,VB, ASP.Net, SAS v9.1 |
| **Databases:** | Oracle, MS SQL server, MS Access |
| **Tools:** | MS Word, Excel, Access, Power Point, Project, Visio, Rational Rose, ClearCase, Clear Quest, Load Runner, HP Quality Centre, Test Director |

### PROFESSIONAL EXPERIENCE:

**Magellan Health Services, New York City, New York Feb 2011 – Present**

**Consultant/Business Analyst**

Magellan Health Services, Inc. provides the high quality, cost-effective specialty health care management services to government agencies, corporations and health plans in the country. Its Medicaid administration services include pharmacy benefits administration, medical management information services, fiscal agent services, and healthcare management services.

The project involved performing **Gap Analysis** and identifying the changes proposed in **HIPAA 5010** to upgrade the **Medicaid Management information System (MMIS)** to comply with the new standards mandated by **HIPAA**. The process involved performing **gap analysis**, compiling the results, impact assessment, and designing new screens for system. It also involved the implementation and configuration of **Enrollment, Billing, and Claim Payments.**

**Responsibilities**:

* Gathered requirements and prepared **Business Requirement Documents (BRD), System Requirement Specification (SRS)** by interviewing Business Users/SME's.
* Documented the **Business Process Flows, Business Use Cases, System Use Case, Business Rules** and **Use Case Realization** following the **Rational Unified Process (RUP)** methodology.
* Interacted with the project team to help define the **Business and System Objectives**, confirmation of scope, identify constraints and the measures of success for the system to be developed.
* Conducted **Joint Application Development (JAD)** sessions and walk in interview with the business users to gather requirements.
* Analyzed HIPAA 5010 related to **837,835, 270/ 271** transactions and performed gap analysis between the **4010** and **5010**.
* Analyzed the business requirements for **Medicare claims Part A, B, C and D** determining the membership eligibility for **Enrollment** and **Claims processing**.
* Adhered data transition of the payment and remittance advice as per the **EDI 835**(for payments).
* Maintained **Requirements Traceability Matrix** in Rational Requisite Pro and used **Clear Quest** to manage change requests and track defects.
* Scheduled meetings with Developers, Testers and System analysts for status reporting and resource allocation planning using **MS Project.**
* Actively involved in generating test cases for each phase deliverable and documented the results in **Test Reports**.

**Environment:** Rational Requisite Pro, SQL, HP Load Runner.

**State of NJ, Paramus, NJ Apr2010- Jan2011**

**Consultant/Business Analyst**

The State of **New Jersey** offers **Medicaid plan** that provides health insurance to parents/caretakers and dependent children, pregnant women, and people who are aged, blind or disabled. These programs pay for hospital services, doctor visits, prescriptions, nursing home care and other healthcare needs, depending on what program a person is eligible for.

The project entailed the development of software that would provide the following features for: 1) checking a customer’s eligibility for Medicaid, 2) checking funds availability, 3) processing of Medicaid request forms and Medicaid claims.

**Responsibilities:**

* Gathered **Business Requirements**. Interacted with the Users, Designers and Developers, and the Project Manager to get a better understanding of the Business Processes.
* Collected, documented and managed **business requirements, functional requirements** and **non-functional requirements** using MS Word.
* Facilitated meetings with the technical team and client team to analyze the current process and gather requirements for the proposed process.
* Presented several documents and Use Cases for multiple transactions and worked with **ANSI X12 5010** and **ANSI X12 4010** including the standards for medical transactions like **837I, 837P, 835, 276, 277, 270, 271**(both inbound and outbound) transactions.
* Analyze **EDI –X12** data elements captured by the existing system to validate it against the data elements required for new system.
* Responsible for the **HIPAA 4010/5010** compliance lifecycle from **gap analysis,** mapping, implementation and testing process of **Medicaid** Claims in the new **MMIS** system.
* Responsible for mapping documents, **test plan**, **test scenarios, test cases** for unit, system and system integration testing.
* Developed **UAT** test cases associated with the functional requirements.
* Used the **Rational Unified Process** (**RUP)** to build the different phases of Software development life cycle.
* Involved in **GAP** analysis around the identification of business rules, business and system process flows, user administration, requirements and assumptions.
* Worked closely with QA and Developers to clarify/understand functionality, resolve issues and provided feedback to nail down the bugs.
* Trained and acted as point of contact for new employees.

**Environment:** UML, Load Runner, MS-Project, MS Visio, SQL

**Qual Care Inc, Piscataway, NJ May 2009- Feb 2010**

**Consultant/Business Analyst**

QualCare, Inc. is one of the region's leading providers of healthcare coverage. Formed by a consortium of hospital systems, QualCare's mission is to provide the public and private marketplace with a higher-quality, lower-cost alternative to commercial insurance companies.

The application implemented was a web based claims submission process. Claims were submitted online in the form of **HIPAA** compliant transactions. The main purpose of this project was to maintain patient related information and help Account Receivable Team to increase the collection, follow up and closing of the claim as per HIPAA compliance.

**Responsibilities:**

* Involved in the analysis of **HIPAA compliance** and **EDI transaction sets** and actively participated in the designing of the EDI transactions using the new **HIPAA 5010** version also including the use of **ICD-10** codes
* Interacted with the project team to help define the **Business and System Objectives**, confirmation of scope, identify constraints and the measures of success for the system to be developed.
* Participated in**JAD** sessions, daily meetings, brainstorming sessions to solve the problems and enhance the workflow.
* Assisted in building a Business analysis process model using **Rational Rose** and **Visio.**
* Monitored change requests and documented requirements, integrating them with**Clear Case.**
* Experienced in **RUP software development cycle methodology** with four consecutive phases - Inception, Elaboration, Construction and Transition.
* Participated in preparing Scope Document and identifying Business areas included in the project and areas not part of Project Scope.
* Ensured that the claims processing is strictly under the **HIPAA** compliance regulatory document to safe guard patient information.
* Part of the team assisting in documentation involved in this project such as RFP, proposal, evaluation criteria, proposal approval, design document, project plan, project scheduling, project report, release document.
* Prepared and presented monthly collection reports.
* Documenting **workflow** and results of analysis for the aging accounts.
* Clarified **QA team issues and reviewed test plans** and **test scripts** developed by development team and QA team to make sure all **requirements** have been covered in scripts and tested properly.
* Maintained **Test Matrix** with the test results obtained.
* Followed the UML based methods using Rational rose to create **use cases, activity diagram, sequence diagram, collaboration diagram** that include functional and non-functional specifications to hand off to development teams.

**Environment**: Windows, SQL Server, MS Office, MS Visio, MS Project, Requisite Pro

**Alpha Stats Inc., Plainfield, NJ Sep 2008 – Apr 2009**

**Consultant/Business Analyst/SAS Trainee**

Alpha Stats Inc is a specialty CRO providing Biostatistics, Statistical Programming, and Medical Writing services to the pharmaceutical and biotechnology industry. The company supports clients by way of functional roles on clients’ projects, both on-site support and via remote access to clients’ systems and specializes in SAS technology.

The project involved working in an on-site application platform which collects and synchronizes information such as patient’s data, medications, lab results and physician details.

**Responsibilities:**

* Perform validation on derived datasets and following the standard operating procedures during the validation process.
* Generated reports in HTML, PDF or RTF formats according to the client specifications.
* Conducted analysis and **generated tables, listings and graphs using SAS**.
* Created new analysis datasets from raw datasets for clinical trials.
* Extensively involved in creating safety and efficacy tables, listing and figures
* Performed **Quality Checks** on the existing table, listing and figures.
* Extensively used company standard macros for effective and efficient outputs for **clinical trials.** Created study specific macros for better performance
* Actively participated in monthly departmental meetings and providing the necessary inputs on how to improve the standards.
* Worked closely with Statisticians and Data managers to get requirements.

**Environment:** SAS/Base, SAS/Macros, SAS/SQL, MS-Excel

**MEDCO Health Solutions,Inc ., Franklin Lakes, NJ Feb 2007–Jan 2008**

**Consultant/Junior Business Analyst**

**MEDCO Health Solutions,Inc .,** is an American managed health care company currently serving the needs of more than 65 million people. Medco provides pharmacy services for private and public employers, health plans, labor unions, government agencies, and individuals served by Medicare Part D Prescription Drug Plans.

The application developed was for Work at Home Pharmacist and Pharmacy Technicians which involved in patient’s data and medications and contacting physicians.

**Responsibilities:**

* Worked as a liaison between technology and the business clients to improve business processes and support critical business strategies.
* Gathered business requirements from SME’s and drafted **business requirement document (BRD)**
* Participated in**JAD** sessions for user interviews to gather requirements.
* Organized program leadership meetings for the top management to discuss these issues, risks and assign actions to specific work stream owners.
* Identified all necessary **Business and System Use Cases** from requirements and created UML diagrams using MS Visio.
* Maintained a continuous follow-up with the technical leads and stakeholder, generating periodic brief reports and validating the Requirement Documentation.
* Carried out a dynamic **Gap analysis** to determine the proficiency of the new process plan in comparison to the old one, as well as conformance to the requirements.
* Implemented an incremental maintenance process plan to enable user acceptance testing on the go.
* Actively involved in generating **test cases** for each phase deliverable and documented the results.
* Primarily responsible in managing deployment of each phase deliverable and successful fusion into the current running system.

**Environment:** MS Visio, Word, UML.