**Sunil Gurung**

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**SUMMARY**

* 7+ **years** of Business Analyst experience in **Health care.**
* Experienced in performing **Business Process Reengineering**/**Gap Analysis** to check the compatibility of the existing system infrastructure with the new business requirements.
* Managed complex business initiatives to balance requirements for functionality, efficiency and quality.
* Excellent knowledge of Health Insurance Portability and Accountability Act (**HIPAA**) transaction and code set rules such as **EDI 837,270,271,276,277,834,835.**
* Experienced with Rational tools like **ReqPro, Clear quest, Clear Case Rational soda, Rational Rose**.
* Worked on different **EDI healthcare transactions** like **837** for submitting claims**, 835** for payments**, 834** for benefit enrollment**& 820 for premium payments to insurance products, 270,271 for health care benefits** and **eligibility, 275 for patient information, 276, 277 for claims status** and **278** for transmitting health care service inform.
* Experience with health care Systems: FACETS, Medicare Part A, B, C, D, Medicaid systems
* Expertise in handling issues and getting it solved in a quick and efficient manner.
* Experienced working in **Medicare** and **Medicaid** projects.
* Solid understanding of **Business Requirement gathering, Business Process flow, Business Process Modeling and Analysis**, **design documentation.**
* Experienced in all phases of the **Software Development Life Cycle (SDLC**), Rational unified process (RUP), agile methodology.
* Experience in configuration of claims adjudication systems, i.e., MMIS, Facets.
* Exceptional Documentation Skills for writing **Use Cases** and **Functional Requirement Documents.**
* Experienced in conducting **Joint Application Development** JAD sessions, workshops etc.
* Expertise in Analysis and Review of Software and Business Requirement Documents.
* Experience in implementation of **HIPAA 4010**in existing claim processing integrated system.
* Extensive experience in **claims** processing and **billing**, **Medicare/Medicaid billing** and **claims management.**
* Proficient in**ICD-9-CM**and **ICD -10-CM**coding and claims processing
* Prepared **Business Process Models** that includes modeling of all the activities of the business from the conceptual to procedural level. Followed top down, leveled technique for building Business Process Models.
* Extensively participated in verification of **EDI** file formats against Standards.
* EDI healthcare experience working with implementation guides.
* Proficient in developing **UAT plans**, **UAT cases**, **UAT scripts** and **executing UAT**.
* Proficient in writing **queries/ SQL/ MS Access** to assist in UAT, data validations and data analysis.
* Experience using **Rational Rose**, and **MS Visio** for business process modeling and designing data flow diagrams.
* Expertise in creating **Use Case diagrams, Activity diagrams, Data Flow Diagrams (DFD), Sequence diagrams, State diagrams based on UML Methodology and business process flow diagrams using MS Visio/Enterprise Architect/Rational Rose.**
* Good Knowledge of **Test Plan**, **Test Scripts and Test Cases** for **Functional, System, Integration, UATand Regression Testing basedon the Design Document and User Requirement Document for the Functional, Security, and Performance Testing.**
* Experience with **ISO, Six Sigma, and CMM** standards.
* Excellent written and verbal communication.
* Experience in databases like **Oracle, SQL**.
* 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.

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| **Operating Systems:** | Windows, UNIX, LINUX, Mac. |
| **Languages:** | Java, **SQL**, HTML, XML, C#, VB, ASP, .Net |
| **Databases:** | **Oracle**, MS **SQL** server, MS Access, IBM DB2 |
| **Tools:** | MS Office: Word, **Excel, Access**, Power point, **Project, Visio**, Front Office |
| **Industry Standards:** | HIPAA, SOX, ISO, Six Sigma, CMM. |

**Professional Expertise**

**Client: Group Health Seattle, WA July 2014-Aug 2016**

**Title: EDI Analyst**

Group Health Cooperative, more commonly known as Group Health, is a [Seattle, Washington](http://en.wikipedia.org/wiki/Seattle) based nonprofit healthcare organization.[[1]](http://en.wikipedia.org/wiki/Group_Health_Cooperative#cite_note-1) Established in 1947, it today provides coverage and care for about 700,000 people in [Washington](http://en.wikipedia.org/wiki/Washington_(U.S._state)) and [Idaho](http://en.wikipedia.org/wiki/Idaho) and is one of the largest private employers in Washington. Patients who receive care at its medical centers are provided Web access to their medical records secure emailing with doctors and nurses and the ability to fill prescriptions online that are mailed to homes without a shipping charge.

**Project Description:** As a Business Analyst in Group Health, I was involved with HIPAA 5010compliance for the new MMIS system. The project also involved performing gap analysis and identifying the changes in HIPAA 5010 to upgrade second web portal to comply with the new standards approved by the Health Insurance Portability and Accountability Act (**HIPAA**), all of this consisted of applying gap analysis, compiling the results achieved and screening them.

**Responsibilities:**

* Gathered **Business Requirements** from all the stakeholders and interacting with the providers, managers, developers to develop the business Processes.
* Conducted **Risk Analysis and Impact analysis** whenever there is any change in the business requirement and continually updating the **business requirement document**.
* Conduction JAD sessions and ultimately reducing the time spent in moving all the information from stakeholders and other team members.
* Complete understanding the business process to determine the needs of the business.
* Assisted in the meetings with the technical team as well as the clients regularly to assess the current process and how it could be changed in making a better proposed process.
* Provide various strategies to **implement HIPAA 4010 in the new MMIS system** and ultimately move to **HIPAA 5010.**
* Performed **six-sigma** process during the project to eliminate any defects in the process.
* Conducted the **gap analysis** and analyze various gaps and develop actions to fill those gaps.
* Develop spike requirements solution for all the current problems and **UI prototypes** for capturing the requirements.
* Worked with FACETS edits and EDI HIPAA Claims (837/835/834) processing.
* Helped in developing test cases such as **test plans and test scenarios**.
* Utilize **Rational Unified Process (RUP)** and build different phases of software developmental cycle.
* Actively involved in designing **EDI transactions using the new HIPAA 5010 version and ICD -10 codes and analyzing HIPAA compliance and EDI transaction.**
* Recommending actions against the action plans during the ongoing progress of the project to the project manager.
* Knowledge of the **software system** and the programs.
* Creation of project management plans to manage timely delivery using **MS project**.
* Performed **Requirement Tractability Matrix (RTM)** to track and maintain stakeholders requested requirements and changes.
* Instrumental in capturing the requirements from the clients and publishing them into a requirements document.

**Environment:** MS Project, Requirement Traceability Matrix (RTM), Facets, Rational Rose Test, JAD, RUP, MS Visio, Windows OS, MS Office, SharePoint, Server, Quality Center, SQL Server.

**Client:** [**PPG Industries**](https://www.linkedin.com/company/4857?trk=prof-exp-company-name)

**Jan 2013-Jun 2014**

**Title:** [**Logistics Business Analyst**](https://www.linkedin.com/title/logistics-business-analyst?trk=mprofile_title)

PPG: WE PROTECT AND BEAUTIFY THE WORLD™ At PPG (NYSE:PPG), we work every day to develop and deliver the paints, coatings and materials that our customers have trusted for more than 130 years. Through dedication and creativity, we solve our customers’ biggest challenges, collaborating closely to find the right path forward. With headquarters in Pittsburgh, we operate and innovate in more than 70 countries and reported net sales of $14.8 billion in 2016. We serve customers in construction, consumer products, industrial and transportation markets and aftermarkets. To learn more, visit www.ppg.com and follow @PPG on Twitter.

**Specialties**

**Responsibilities**

•Led the design of back order process in SAP to meet the requirements for the newly acquired Homax business.  
• Collaborated with supply planning and quality managers to develop a rebalance, relabel and rework report as well as a process for excess inventory, which resulted into reducing excess inventory by 2.4 M gallons YTD.  
• Partnered with Deloitte on supply chain optimization study (Project Optima) by conducting data analysis/validation,what-if scenarios, cost benefit analysis and scenario validation.  
• As part of Project Optima implementation team, worked with key stakeholders to ensure successful  
implementation of above recommended changes with limited customer impact.  
• Collaborated with The Home Depot to develop a SKU pallet rounding list and KPI’s to keep PPG cost neutral as The Home Depot rolls out their SYNC program across US RDC’s.

**Environment:** MS Office, SQL, MS Project, MS Visio, UNIX, XML and Windows.

**Client: Johnson & Johnson, New Burnswick, New Jersey May 2011-2012**

**Title: Business Analyst**

Johnson & Johnson provides consumer products prescription medicines and medical devices and diagnostics impact the state of health care for patients, doctors, and nurses around the world.

As a Business Analyst, I was involved in a project for Interface enhancements to send delivery / Shipment related information to 3PL service providers.

**Responsibilities**

* Implemented **RUP** methodology for **iterative** and **incremental** development of the system.
* Planned **RUP** iterations and documented the artifacts throughout the various phases of the development process.
* Produced complete **data mappings** and **data conversion** documents needed for the enhancement
* Compiled the **Vision Document** and composed detailed **Use Case** Specification Documents in Rational RequisitePro.
* Created **UML class** diagrams, **use case** diagrams and **sequence diagrams** to view the system from different perspectives.
* Performed Functional and **GUI** Testing to ensure that the user acceptance criteria are met.
* Co-coordinated the **UAT** with the **SME**’s to make sure that all the Business Requirements are addressed in the application.
* Formed detailed **UAT** and **QA** test plans, managed system testing and preserving testing documentation.
* Developed strategic partnerships with the business unit to develop a solid knowledgebase of the business line, including the business plan, products and processes.
* Provided key project inputs by working with users in defining the project and system requirements.
* Assisted Test Lead, Testers understanding business process and help them successful  
  completion of Unit Testing, Integration Testing and Requirements Testing.
* Played a key role in the planning, testing, and implementing system enhancements and conversions.

**Environment:** MS Office, MS Project, MS Visio, SQL, Oracle, Test Director, Rational Unified Process (RUP), Rational Suite (RequisitePro, ClearQuest, ClearPro),Business Objects, Windows XP

**Client: HCA Healthcare, Nashville, TN June 2009-March 2011**

**Title: Business Analyst**

**HCA Inc.** has developed an application for Managing and processing Insurance Claims - **Claims Management and Reconciliation (CMR).** Patient's information, history about disease and medication is collected and stored in the CMR Health Information Management/Enterprise Document Management System. I worked for enhancements to this application with the various Business Owners.

**Responsibilities**

* Gathered Requirements from various Business Areas like Claims, Provider Relations, Enrollment, Finance and Benefits Administration for their updates to the Claim Processing Engine.
* Developed Use Cases using MS Visio, and a detailed project plan with emphasis on deliverables.
* Monitored Change Requests and documented requirements, integrating them with Use Cases.
* Developed and Implemented Test Strategies using the Test Director.
* Assisted QA team in testing phase by creating Test Plans and Test Cases documents.
* Followed the RUP methodology for the entire Software Development Cycles.
* Assisted the development team during the second and third iteration using the RUP model.
* Checked the data flow through the front end to backend and used SQL queries to extract the data from the database.
* Worked on Member Management, Eligibility, Claims, and Provider modules within FACETS
* Involved in project planning, coordination and implemented QA methodology.
* Developed the Requirements Traceability Matrix, prioritized and determined Impact of all applications.
* Identified the all applications and interviewed the application owners to recommend the process improvements.
* Provided overall project management to multiple projects successfully completing them on-schedule and on-budget.
* Defect Tracking and Bug Reporting was performed.

**Environment:** Oracle, SQL, PL/SQL, Facets, ASP.NET, Rational Requisite Pro, Microsoft Visio, HTML.

**Education**

**Bachelors in Business Administration**

**Reference**

**Available upon request**