**OBJECTIVE**

To achieve a business analyst position in one of the esteemed organizations in the industry and utilize my business skills and experiences.

**PROFESSIONAL SUMMARY**

* Analytical, enthusiastic and innovative Business analyst with information technology experience in business analysis.
* Comprehensive knowledge of software Development Life Cycles(SDLC), having thorough understanding of various phases like Requirements, Analysis/Design, Development and Testing.
* Extensive experience gathering, managing and documenting business and function requirements. Communicating effectively with upper management, developers and QA.
* Adapt at creating and transforming business requirements into functional requirement and designing business models using UML diagrams,- Context, UseCases, Sequences, MS VISIO and RationalRose
* Excellent facilitation skills in conducting walkthroughs, surveys, questionnaires, brainstorming and JAD sessions,
* Comprehensive knowledge of RUP, Waterfall, Agile methodology
* Strong experience in conducting UAT and documentation of test cases. Familiar in designing and developing manual and automation test cases and test scripts
* Proficient in different phases of testing like System Testing, User Acceptance Testing (UAT), etc.
* Created RTM to map requirement to test cases to validate all required requirements
* Have extensive knowledge of gap analysis and bug life cycle.
* Used QC extensively to handle bugs.
* Proficient in different phases of testing like System Testing, User Acceptance Testing (UAT), etc.
* Created RTM to map requirement to test cases to validate all required requirements
* Have extensive knowledge of gap analysis and bug life cycle.
* Used QC extensively to handle bugs.
* Well equipped with excellent communication and organizational skills to face clients.
* Exceptional problem solving and sound decision making capabilities, recognized by alternative solutions and confident, accurate, decisional-making coupled with excellent skills

**TECHNICAL SKILLS**

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| --- | --- |
| **Databases** | Oracle, SQL Server |
| **Change Management** | Rational Clear Quest |
| **Testing Tools** | HP Quality Center, Rational |
| **Operating System** | Windows |
| **Business Applications** | Microsoft Office Suit, MS VISIO, SharePoint, Outlook |
| **Project Methodologies** | SDLC, Agile, Rational Unified Process(RUP), UML |

**EDUCATION**

Bachelor of Liberal Arts and Science

University of Illinois at Chicago (UIC), Chicago, IL

**WORK EXPERIENCE**

**Client: GE Healthcare July 2019-current**

**Location: Arlington Heights, IL**

**Role: Business Analyst**

**Description:** GE HealthCare is a global medical technology company which focuses on manufacturing biopharmaceuticals. GE health care improves outcomes for healthcare providers globally by continuously communicating with physicians to provide biopharmaceuticals on a timely fashion. It takes in the responsibility to deliver productivity solution for its clients as well consulting with analytics disciplines such as data science.

**Responsibilities:**

* Created UseCase models using **Rational Rose**.
* Functioned as the primary liaison between the business line, operations, and the technical areas throughout the project cycle.
* Worked extensively through **Agile** development methodology by dividing the application into iterations.
* Participated and contributed in daily scrums, Sprint meeting and Sprint review meetings.
* Conducted JAD sessions to allow different stakeholders to communicate their perspectives, resolve issues, and reach agreements.
* Executed SQL queries for Data analysis, completeness and accuracy.
* Conducted monthly application review meetings with the operations groups to understand better the impact.
* Requirement gathering, Business Process flow development, and Business Analysis.
* Created Effective Use cases and Integrated High level Use case Scenarios in the Project and identification of Basic/Alternative flows.
* Involved in the **UAT** for the application process.
* Worked with PM to track projects' performance against baseline plan.
* Created customer training documentation.
* Responsible for the requirement-gathering phase and project plan.
* Responsible for the full HIPAA compliance lifecycle from gap analysis, mapping, implementation and testing for processing of Medicaid Claims.
* Used HIPAA 4010 transactions to support the analysis of current business processes and work with management to improve and implement enterprise solutions to ensure compliance and involved in designing future state processes transaction processing EDI’s 837, 835, and 834.
* Created Use Cases diagram and Activity diagram to depict the interaction between the various actors and the system in Rational Rose for the Business Use Case and System Use Case.
* Tested the changes for the front-end screens in FACETS related to following modules, test the FACETS batches (membership, Billing, Provider, etc.).
* Interacted with database developers for formulating the ER diagrams and data flow diagrams.
* Worked with a QA lead in validating Test Plan and Test Scenarios.
* Assisted Business User during deployment in formulating User Acceptance Testing (UAT) for customized application and getting confirmation for product Release

**Environment:** Agile, UAT, MS office (MS word, MS Excel, MS PowerPoint, MS Visio), FACETS, SQL Server, Rational Rose, JAD Sessions

**Client: United Healthcare July 2018- Febuary 2019**

**Employer: Srimatrix, Plano TX**

**Role: Business Analyst**

**Description:** United Healthcareis a provider of insurance products and related services in America and selects worldwide markets. It is a brand name for a family of health insurance products focused on providing a variety of affordable plan choices to consumers. The portfolio of health care products includes major medical, supplemental and fixed-benefit plans for individuals, families and employers.

**Responsibilities:**

* Conducted meetings with business process owners, SME (subject matter experts) and trading partners for requirement gathering during the definition stage.
* Involved in FACETS implementation, testing, involved end to end testing
* FACETS Billing, Claim Processing and subscriber/Member module
* Analyzed data/workflows and defined the scope
* Analyzed the data movement between systems to validate the business requirements.
* Worked on data mapping to bring data from one system and reside in another system.
* Ensured that EDI files where in compliance with new ICD-10 standards.
* Carried out forward backward mapping when necessary.
* Prepared documents such as project scope, project Vision, Project Success, Business Requirements, Functional Specification, Data Warehouse Process Flow (SQL queries and Crystal Reports) using MS Office (Word, Excel, Visio) and dashboards
* Submitted claims to insurances and processed payment from insurance companies.
* nvolved in testing the EDI transactions 834,837, 835. 270/271 & 276/277 conversion to Facets.
* Performed Gap analysis of short term business requirements with long term business requirements and reported the GAP to the management.
* Set claim processing data for different Facets modules
* Helped developers with the following list of HIPAA-EDI Transaction Code Sets: (837, 835, 834)
* Followed workgroup for EDI standards for testing that need to comply with the HIPPA guidelines.
* Conducted UAT (User acceptance testing). Used SharePoint for UAT bug tracking.
* Used SharePoint for document sharing and version control
* Facilitate daily scrum, sprint planning and sprint retrospectives meeting.
* Worked on release on multiple sprints after successful completion of sprints.
* Met with supervisors and business users and defined the scope of the project, gathered business requirements, and conducted gap analysis.
* Managing and Billing Medicare, Commercial HMO/PPO claims on a daily basis.
* Involved in the documentation of extraction, of the data from various tables in the Data warehouse.
* Worked closely with Business Team, SME’s, Infrastructure team, and coordinated with offshore team

**Enviornment:** Facets, Windows, MS Office, Oracle, MS-Visio, Microsoft Project

**Client: Capital District Physicians’ Health Plan, Inc. (CDPHP) Sept 2017- May 2018**

**Location- Albany, NY**

**Role: Business Analyst**

**Description:** CDPHP is a U.S-based insurance corporation ranked best company for Medicare Advantage. One of the world’s leading, innovative companies in the insurance domain. CDPHP’s main objective is to ensure high quality care with the addition of affordable, readily accessible financial benefits. CDPHP’s main attributes include, but are not limited to, allowing clients with the benefits of health plans, universal financial benefits, and allows for networking with top tier physicians in the U.S.

**Responsibilities:**

* Responsible for the requirement-gathering phase and project plan.
* Maintaining good relations with clients and analyzing their requirements and suggesting proper methods to satisfy their requirements.
* Developing functional and system design specifications for the client understanding their needs.
* Responsible for requirements analysis, design and developing technical requirements.
* Produced requested reports and ran analytics.
* Prepared slides using Microsoft PowerPoint and presented them at quarterly quality meetings.
* Manage documents from start to finish, publish reports and share information with others using SharePoint.
* Used RequisitePro for writing/analyzing project vision, goals, specifications and requirements.
* Conduced Joint Application Development (JAD) sessions and walk in interview with the business users to gather requirements.
* Defined terms, conducted stakeholder analysis, elicited business needs, conducted business process modeling, and facilitated JAD sessions. Elicited, documented requirements and use cases. Analyzed, validated & prioritized requirements; traced requirements to related project documentation (process models, designs, test scenarios & scripts).
* Responsible for loading, extracting and validation of client data.
* Writing **MySQL** scripts to manipulate data for data loads and extracts
* Advising on the suitability of methodologies and suggesting improvements.
* Carrying out specified data processing and statistical techniques.
* Conduct JAD sessions to gather and document requirements that enhance a wide range of functionalities including claims processing, eligibility and enrollment, provider networks, and electronic data interchange for our Facets core application.
* Identified testing scenarios and defined Test Cases for detailed functional testing and UAT.
* Facilitated claims processing while passing 837 claims for a compliance check and running through load processing.
* Created and maintained data mapping document(s) in reference to the HIPAA transactions: 270/271, 276/277, 837, and 835.
* Performed testing of the health benefit claims receiving and processing system to ensure that the system adheres to project standards, performance criteria, and functional specifications.

**Environment:** UAT, MS office (MS word, MS Excel, MS PowerPoint, MS Visio), FACETS, SQL Server, JAD Sessions, RequisitePro

**Client: Coventry Healthcare Inc, Jan 2016- August 2017**

**Location: Newark, DE**

**Role: Business Analyst**

**Description:** Coventry Health Care, Inc operates as a healthcare company in the U.S, providing commercial risk while also providing advantages in Medicare and Medicaid. Coventry’s Medicaid advancements benefits communities across the United States by gaining control over their health challenges. Tests were recently conducted to account for changes in HIPAA 5010 in account to upgrade the MMIS (Medicaid Management Information System) to comply with new HIPPA standards.

**Responsibilities**

* Analyzed Business Requirements and segregated them into high level and low level Use Cases, Activity Diagrams / State Chart Diagrams using Rational Rose according to UML methodology thus defining the Data Process Models.
* Supervised the content design and development of a web portal for reporting, analysis and navigation of financial data.
* Proficient in using content management systems for site navigation and content management.
* Leading discussions with vendors to determine the best methodology for different work streams of the project.
* Developed test plans, test cases and test scripts based on the functional specifications.
* Coordinated and Developed QA activities with team members to support the methodology.
* Written SQL queries to extract data from SQL Database for backend validations.
* Used FACETS Analytics for fast and easy retrieval, display and grouping of information for performing queries and generating reports.
* Tested the changes for the front end screens in FACETS related to following modules, test the FACETS batches (membership, Billing, Provider, etc).
* Interacted with database developers for formulating the ER diagrams and data flow diagrams.
* Held regular **JAD** meetings with the system architects, developers, database developers, quality testers during the entire project to assure that the critical as well as the minute details of the project were discussed and issues were resolved beforehand.
* Analyzed the mainframe reports for member/eligibility/claims and mapped the fields with **FACETS** batch jobs and reports.
* Compile SQL Queries to validate the data integration between the various Database tables.
* Assisted Business User during deployment in formulating User Acceptance Testing (UAT) for customized application and getting confirmation for product Release
* Review of high-level design document and low level design of classes and sequence diagrams.
* Analyzed HIPAA 5010 related to 837,835, 834. Transactions and performed gap analysis between the 4010 and 5010.

**Environment:** UAT, MS office (MS word, MS Excel, MS PowerPoint) FACETS, SQL Server, JAD Sessions