**Ankur Sharma**

**732-902-0886**

[**vipin@srimatrix.com**](mailto:vipin@srimatrix.com)

**SUMMARY**

* A results oriented individual with over 6 years of diversified experience in Healthcare, and Finance industry.
* Strong business analysis skills and thorough understanding of software development life cycle.
* Strong ability to understand and document critical data through effective data collection, data analysis and data interpretation.
* Experienced with the responsibility of encompassing Requirement Gathering, Decomposition and Analysis, in addition to Quality Assurance.
* Expertise in Project Planning, Project Design, creating functional specifications and data flow diagrams.
* Extensive knowledge and experience in Market Risk Analysis, Risk Management, Portfolio Diversification, Fixed Income Products and Services amongst others.
* Experience in configuration of claims adjudication systems QNXT.
* Expertise in translating user requirements into technical specifications and mapping the process design, work flows for SDLC with documenting and managing business requirements.
* Possess excellent organizational, interpersonal, communication and documentation skills with good process management skills along with a remarkable ability to gather requirements to bring out quality product.
* Possess strong analytical and problem solving skills with the ability to adapt to a new environment and meet stringent deadlines.
* Extensive knowledge of Rational Unified Process (RUP) methodology.
* Highly motivated worthy team player capable enough to work and lead within a team environment besides being capable to work independently.
* Ability to identify root causes and derive corrective actions to meet short and long term business requirements using resourceful approaches.
* Proficiency with various proprietary (home grown) claim payer systems as well as commercial products like QNXT
* Ability to identify and document critical requirements through analysis.
* Ability to successfully manage multiple deadlines and multiple projects effectively through a combination of business and technical skills.
* Facilitated JAD (Joint Application Design) sessions.
* Fairly experienced with SQL and database querying.
* Experienced in Rational Unified Process (RUP) software development process using Rational ClearCase and Rational Rose.
* Performed planning and development of Test Plans, Test Cases and Test Scenario to meet product’s business requirements.
* Professional expertise in MS Office, MS Access and MS Project Professional 2002.
* Analyzed Enhancement requests and Modification requests.
* Maintained the Requirements Traceability Matrix (RTM).
* Maintenance of Test Matrix and Traceability Matrix.
* Conducted User Acceptance Testing (UAT

**EDUCATION**

Master’s in business Administration

Bachelors in Management and Information Systems

**TECHNICAL SKILLS**

**OPERATING SYSTEMS:** Windows NT, Windows 95/98/00, UNIX and DOS.

**BUG REPORTING TOOLS:** Test Director, Rational ClearQuest

**RDBMS:** Oracle 7.0/8.0, SQL Server 2000 and MS-Access.

**WEB LANGUAGES:**  ASP, HTML, CSS and JavaScript.

**WEB SERVER CONCEPTS:** IIS 5.0, Apache and Jakarta Tomcat

**EXPERIENCE**

Bravo Health, Baltimore, MD Jan 2013 – Present

Business Analyst

Performed business analysis, support and conducted testing and data entry associated with configuration and maintenance of the QNXT managed care system. Acted as the primary support contact and coordinated all questions and issues that arise with the QNXT application. Ensured that the QNXT configuration was created and maintained in a manner that supports the departmental and overall business objectives in coordination with other system vendor products. Additional duties included responsibility for safeguarding the quality and integrity of all systems data and functionality. Adhering to a quality assurance discipline for on-going system operations and ensuring that a continuous testing loop was built for testing, error reporting, correction, and re-testing. Corrected production configuration problems, performed hands-on configuration work and established the change control procedures for the system. Involved in up-gradation of HIPAA ANSI X 12 4010 to HIPAA ANSI X12 5010 and ICD 9-CM to ICD 10CM/PCS.

**Responsibilities:**

* Studied existing business application and processes, collected end user requirements and suggested the improvised business process model.
* Gap Analysis of client requirements, generated workflow process, flow charts and relevant artifacts.
* Defined and documented the vision and scope of the project.
* Conducted one on one interviews with high level management team and participated in the JAD session with the SME’s.
* Used General Equivalence Mapping to convert ICD 9 to ICD 10. Involved in both forward mapping and backward mapping.
* Involved concurrently in enhancement 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).
* Performed impact analysis for conversion of ICD-10.
* Used GEM for forward and backward mapping to convert ICD 9 codes to ICD 10 codes and vice versa.
* Worked as a liaison between the business and technical side to convey the business needs to the system architects.
* Worked on QNXT Claims Software System, to convert data from their legacy system (LRSP) and add custom applications to satisfy in-house requirements.
* The process included importing claims into QNXT that had been adjudicated and setting them in a “PAY” status so that a payment cycle could be run to create checks on QNXT.
* Worked in association with RUP mentors to ensure fidelity to the standard RUP practices of the institution.
* Followed the RUP methodology for the entire SDLC.
* Involved in writing and implementation of the test plan, and various test cases.
* Initiated, proposed and implemented critical analytical and technical turnkey solutions extensively increasing the quantitative and qualitative value of the application
* Involved in project planning, coordination and implemented QA methodology.
* Developed the matrix, prioritized and determined QRT impact of all applications.
* Provided overall project management to multiple projects successfully completing them on-schedule and on-budget.
* Prepared the Business Workflow using MS-Visio with input, output, Pre and Post conditions
* Utilized technical flow charts, Network Diagrams and Gantt Charts to effectively map and manage critical paths and bottlenecks in conjunction with Project Tracking Reports and Project Data Sheets for Senior Management.
* Enhanced test cases and scripts by adding the required functionality as per the new business requirements.
* Defect Tracking and Bug Reporting was performed using Quality Center.
* Participated in weekly status meetings to present status and incorporate any digressions from the original scope.
* Designed Use Cases using UML and managed the entire functional requirements life cycle using RUP.
* Created and managed project templates, Use Case project templates, requirement types and trace-ability relationships in Requisite Pro.
* Carried out a thorough target organization assessment and risk analysis.
* Involved in cross-functional teams, developing new ways to boost efficiency and delivering results in a fast changing environment to achieve company goals.
* Provided the management with test metrics, reports, and schedules as necessary using MS Project and participated in the design walkthroughs and meetings.
* Analyzed the “As is” and “To be” system documents to show the current and proposed functionalities of the system using MS VISIO.
* Environment: J2EE, Java, UNIX, SQL, Siebel 7.7, Windows XP, MS Project, RUP, Rational ROSE, Req Pro, Rational Clear Case, UML, MS Visio.

Molina HealthCare, Boise, ID Aug 2011 – Dec 2012

Business Analyst

Idaho Base MMIS project is to provide the Base component of the MMIS, which receives and processes prior authorizations, referrals, claims, and remittance advices for medical and dental services. The project also manages provider enrollment for all Idaho Medicaid providers along with Idaho Medicaid Member. This includes the files and data conversion and migration of all application functionality from the legacy MMIS system to the client-server application (Health PAS system).

**Responsibilities:**

* Worked with a cross functional and diverse team of business users and developers to enable accurate communication of requirements and ensure consensus.
* Participated in review and analysis of business requirements, adding additional cases as needed, insuring they are complete and testable.
* While working on requirements of the 835 HIPAA project, jumped half way in the 820 report project, continued working on 835, 276 / 277 and HIPAA EDI Transactions across enterprise, meanwhile new project initiation of 4010 to 5010 migration began.
* Initiated with a comparison report of migration of 4010 to 5010. 270 Eligibility, Coverage or Benefit Inquiry (V4010X092A1) vs.270 Eligibility, Coverage or Benefit Inquiry(V5010X279)
* Tested the ANSI X12 Version 4010 / EDI transactions (HIPAA) like 270, 271, 276, 277, 837P, 837I, 837D,  835 remittances)
* Wrote Test scenarios and test cases for testing the migration of EDI 4010 to 5010 and the processing of member enrollment and benefits, batch jobs corresponding to the claims(837) and real time transactions like 270/271/276/277
* Did the forward and reverse data mapping between the fields in mainframe and QNXT.
* Tested the changes for the front end screens in QNXT related to following modules, test the QNXT batches (member load, Billing, Provider, etc).
* Worked with HIPAA Team for RIMS Companion Guide of X12 ANSI 270/271 and 276/277 Companion guides for Professional and Dental claims. Cross-functional team member in the implementation of the ANSI X12 involving 837 HIPAA compliance and 835 Remittance Advice.
* Analyzed the front end Customization requirements on QNXT applications(Member, Group/Subgroup application, Member maintenance, etc)
* Conducted extensive analysis on migration and conversion of Provider and Member data, Group configurations, plan codes, benefit set-ups, fee schedules, provider pricing, capitation set-ups, etc from Legacy system (AIM) to QNXT.
* Did gap analysis for HIPAA 4010 837P and 835 transactions and HIPAA 5010 837P and 835
* Involved in impact analysis of HIPAA 5010 835 and 837P transaction sets on different systems
* Performed GUI testing, Integration testing, Regression testing, Ad -hoc testing, Negative testing, End to End testing, Smoke testing Load testing, User Acceptance testing and Pilot testing
* Wrote Test Scenarios, Test cases in excel sheet and imported them to  Rational Manual Tester/Test Manager
* Logged defects in Rational Clear Quest, re-tested defects, analyzed defect with Users and Developers.

**Environment:** QNXT, MS SQl Server 2005, Rational  Reqpro, Rational Clearquest, Rational Manual Tester, Rational Test Manager, MS SQL Server Reporting Service(SSRS), Venetica Process Manager, Cincom Eloquence Letter Manager, MS Share Point, FlexiFinancial,

United Healthcare, Trumbull, CT Feb 2010 – Jul 2011

Business Analyst

United Healthcare, a UnitedHealth group company, is one of the leading providers of medical, dental, vision, and life insurance services. Company provides solutions to both individual and groups by providing broadest selection of leading health insurance plans. The project was creating totally new web service to replace the existing application. The customer can compare individual health insurance plans by providing zip code, date of birth and gender.

**Responsibilities:**

* Analyzed, revised and created test plans according to business requirements.
* Wrote Use cases and Activity Diagrams.
* Assisted the customer in defining the high-level Functional Requirements and needs.
* Gathered the requirements, developed process models and detailed Business Policies, and modified the business requirement document.
* Involved in the Data Movement between Systems, validated the Business Requirements.
* Wrote numerous test cases based on test strategies.
* Involved in Functionality and Regression testing during the various phases of the development.
* Utilized RUP to create use cases, activity, class diagrams and workflow process diagrams.
* Responsible for coordinating and performing functional and date-related testing.
* Prepared the Business Workflow using MS-Visio with input, output, pre/ post conditions.
* Analyzed team performance with the QA manager and implemented the changes if any with respect to raising the efficiency of the entire team.
* Participated in the team for User Acceptance Testing (UAT).
* Used Rational Clear Quest to report defects and test results.
* Conducted the Customer Acceptance Testing, System Acceptance and End-to-End testing.
* Detected defects communicated to the developers using bug-reporting tools and tracked the defects.
* Evaluated and implemented QA process improvements for ongoing testing.
* Conducted Back End Testing on the Oracle database using SQL.
* Defined transactions to measure server performance and creating rendezvous points to simulate heavy load on the server.
* Involved in maintaining the Test Matrix.
* Actively participated in enhancement meetings.
* Helped Test Engineers troubleshoot and problem solve any issues that would arise.
* Environment: Windows NT Server, Oracle, Web Logic, IIS, Java, WinRunner, LoadRunner and TestDirector.

Wachovia Mortgage Corp., Richmond, VA Dec 2007 – Jan 2010

Business Analysts

Wachovia Mortgage Corporation is a mortgage provider on the east coast. I worked as a Business Analyst on the enhancement done on their web application to include online application functionality for home loans. The application was designed to retain the data collected from the applicants and as well as maintain a database of the rejected applicants, including the basis of rejection so as to focus on that criteria on re-application by same applicants.

**Responsibilities:**

* Analyzed, created, and revised test plans according to business requirements.
* Developed Use cases and Activity Diagrams.
* Helped the Customer in defining the high-level Functional Requirements and needs.
* Gathered the Business Requirements, developed Process Model and detailed Business Policies, and modified the business requirement document.
* Wrote numerous test cases based on test strategies.
* Performed Functionality and Regression testing during the various phases of the development.
* Validated the system End-to-End Testing to meet the Approved Functional Requirements.
* Utilized RUP to create use cases, activity, class diagrams and workflow process diagrams.
* Hands-on Business Analyst responsible for coordinating and performing functional and date-related testing.
* Analyzed team performance with the QA manager and implemented the changes if any with respect to raising the efficiency of the entire team.
* Participated in User Acceptance testing.
* Used Test Director to report defects and test results.
* Conducted the Final Customer Acceptance Testing, System Acceptance and End-to-End testing
* Environment: Windows2000, WinRunner, Oracle, UNIX, IIS, TestDirector