**Anubhav Gollapally**

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**Professional Summary**

* 8+ years of professional experience in Business Analysis with exposure to Healthcare and Insurance Domain.
* Good understanding of Software Development Life Cycle (SDLC) methodologies like Waterfall, Agile such as Agile XP Agile Scrum and RUP.
* Experience in gathering requirements by conducting of JAD sessions (Joint Application Development), Interviews, Workshops and Requirement Elicitation sessions with end-users, clients, stakeholders and development team and converting them in to BRDs (Business Requirement Documents) and FRDs (Functional Requirement Documents) or NRFD (Non-Functional Requirement Document), Systems Design Specification, Business Continuity Plan and Workflows.
* Experience in business writing skills required for documenting Business Requirements Document (BRD), Functional Requirement Document (FRD), User stories and Use cases.
* Experience in performing GAP Analysis between AS IS and TO BE workflow models.
* Proficient in developing Data Flow Diagrams (DFD), Use Case Diagrams, Flowchart Behavior Diagrams (Sequence diagrams and Activity diagrams) based on UML methodology using Rational Rose and MS Visio.
* Knowledge on HIPAA standards 4010 & 5010, ICD-9, ICD-10, CMS, EDI, FACETS, HL7, HIX (Health Insurance Exchange), EMR/EHR, Health Care Reform and Patient Protection and Affordable Care Act (PPACA).
* Good Understanding of the Quality payment program implemented by CMS, which includes Merit based Incentive payment system (MIPS) and alternative payment models (APMs).
* Good working knowledge of Health Insurance Plans (Medicare, Medical, Commercial payers), and managed care concepts with through understanding of the claim’s life cycle.
* Claim processing experience with Medical with thorough understanding of processing rules, Fee schedules, COB rules and payment posting experience with through understanding of the EOB and Denial reason codes.
* Strong knowledge on the tracking process of the performance measurement of the healthcare metrics, also called the key performance Indicators (KPIs), which is crucial for achieving organizations strategic goals.
* Knowledge of HIPAA standards, EDI (Electronic data interchange) Transaction syntax such as ANSI X12.
* Worked on different EDI healthcare transactions like 837 for submitting Claims, 835 for Payments, 834 for Enrollment and Benefits, 270/271 for Healthcare Benefits and Enrollment Eligibility, 276/ 277 for Claim Status and 278 for Referral.
* Knowledge of Managed Care plans (HMO/PPO/POS), Medicaid Management Information Systems (MMIS)and Medicaid Information Technology Architecture (MITA).
* Good knowledge of SQL queries.
* Understanding of Data models and Data Marts that support the Business Intelligence Data warehouse.
* Experience in User Acceptance Testing, Back End and System Level Load and Stress Testing for many types of applications including web and client-server applications.
* Familiarity with White-Box and Black-Box testing techniques such as Load Testing, Regression Testing, Unit Testing, System Testing, and Performance Testing.
* Assisted QA team in writing test plans, defining test cases, test scenario and data sets.

**Technical Skills**

Operating Systems : Windows.  
Utility Tools : JIRA, Rally, MS Project, MS Visio.  
Testing Tools : Quick Test Pro (QTP), Win Runner, HPQC.  
Methodologies : Rational Unified Process (RUP), Waterfall, Agile/Scrum.   
Business Skills :  Business Process Analysis & Design, Gap Analysis, JAD/JRP Sessions.

MS Office tools : Outlook, MS Word, MS Excel, MS Visio, MS SharePoint, MS PowerPoint.

**Education**

MBA for ICFAI University, India.

**Certifications**

Six Sigma Green belt from Exemplar global

**Professional Experience**

**Regal Medical Group,CA April 2018 tocurrent**

**Business Analyst**

**Responsibilities:**

* Conduct JAD meeting with business owners, stakeholder as part of the requirements gathering process.
* Perform in-depth analysis to determined Business/Functional Requirements and created vision, scope and use case documents.
* Ensure that all artifacts complied with corporate SDLC policies and guidelines.
* Provide guidance to project managers, business owners, development team and subject matter experts to resolve the outstanding issue and action items are taken in the review meeting.
* Interface with end-users and project business sponsors to determine, document, and obtain signoff on business requirements. Created user stories and use cases.
* Executed SQL queries to test the database for records that detect and submit functional acknowledgement and remittance advice in the claims application.
* Verification of the data transitioned to EDI files for Open Enrollment and processing 837 and engaged in enrolment files to load them into Facets.
* Perform GAP Analysis and work with the Quality Assurance lead to develop detailed Test Plan and Test Cases to perform Smoke (Sanity) testing to test the basic functionality of the application.
* Verification of the data transitioned to Facets through 837 files for the company.
* Facilitate defect review meetings involving all stakeholders to review defects, identify severity and set priorities as per client requirements, ensuring accuracy and conform to deadlines.
* Performed enhancements and performance tuning of SQL stored packages reports.
* Create workflow diagrams to validate the Basic and Alternate flows in the various Business and Technical Use Cases.
* Capture quality attributes, external/internal constraints for functional/non-functional requirements.
* Participate in development of training materials for the new technology and organizing User Training.

**Environment:**MS Office, Excel, SQL, MS SharePoint.

**Global IT Experts, INC Jan 2018-March 2018**

**Business Analyst**

**Responsibilities:**

* Gathered, defined and documented highly complex business requirements.
* Experience in all phases of software development life cycle (SDLC), including Requirement gathering and documentation, Analysis and Design, Quality Assurance, Testing and End user support working as Business Analyst mainly in Healthcare sector.
* Successfully applied Agile development methodology to project from concept to release using a development cycle to rapidly meet changing requirements and time-based needs within client parameters
* Review and understand the claims process and complex requirements for the enhancement of the current system created under the Requirement Specification Documents after conducting interviews with End Users, JAD Sessions and analyzed their current systems.
* Analysis and Design of existing transaction sets, and modification of these transaction sets to ensure HIPAA compliance.
* Played a critical role in achieving higher status for an agile project using JIRA as a source document.
* Designed and developed Use Cases using UML and Business Process Modeling. Consulted with healthcare insurance company to develop conversion specifications for other insurance Coordination of Benefits (including Medicare).
* Did gap analysis between ICD 9 and ICD 10.
* Develop business requirements for new projects involving federal and state government initiatives regarding Health Insurance Exchanges (HIX).
* Documented complex Business requirements and made process flow diagram for the 837, 270/271, 276/277 & 835 Remittance transactions as per the 4010 to 5010 implementations for the Medicaid claim processing system enhancement.
* Work with technical staff and business users to problem-solve and identify workable solutions.
* Maintained Requirements Traceability Matrix (RTM) throughout the project.
* Conducted meeting and facilitate Joint Application Development (JAD) sessions with different users and internal stakeholders for defining business requirements and User Acceptance Testing (UAT) standards.
* Developed Companion Guides for the business users and managed User Acceptance Test (UAT) for business users to explain Mainframe CICS screens for claim processing.
* Worked on As-Is To-Be analysis of ICD 9 for the new qualifiers used in the 837 claims for the diagnosis and procedure/HCPCS codes.

**Environment:** Agile, MS Access, Oracle, HTML, XML, SOAP UI, TOAD, WSDL, MS Office, MS Project, MS Visio, HP Quality Center/ALM.

**Medcor Services, CA June 2016- March2017**

**Business Analyst**

**Responsibilities:**

* Created Vision, Scope, and Use Case documents, Business Process Models, System Models depicting software architecture and interaction of system components.
* As a Project Manager/Business Analyst, was responsible for all aspects of project management, including the development and management of the system requirements.
* Converted business requirement into functional requirements. Prepared detailed business specifications for development of systems.
* Extensively worked on EDI transaction like 837, 835,834, 820, 270, 271, 276, 277 and 278.
* Liaison between Business Stakeholders, and 820, 834, 835, 837, 277 and 999 Transaction Tower Leads.
* Involved in historical data fix and data recovery/replay operations for reporting clean-up of HIPAA Compliant EDI transactions 270/271, 276/277, 837, and 835.
* Created and maintained data mapping document(s) about the HIPAA transactions: 270/271, 276/277, 837, and 835.
* Provided services to the Center for Medicaid and Medicare Services (CMS) for the Affordable Care Act (ACA), assisting with the software implementation of the Federal Health Insurance Exchange.
* Assisted both Medicare and Medicaid programs with their NCPDP Standard use and modification request. Documented Medicare claims processing.
* Elicited, documented and managed Business and System requirements for HIPAA 5010 version 837, 834, 835, 270, 271, 276, 277 transactions through requirements gathering sessions with stakeholders.
* Worked on Healthcare transactions like 820 - Premium Payments and 834 - Enrolment and Dis-enrolment in Health Plan.
* Responsible for membership analytics, billing and enrolment, medical capitations, medical expense projections, risk pool development, and for developing and analysing other claims projects.
* Functioned as the liaison between Eligibility Medicare Operations and internal cross-functional partners including Product, Finance, Communication Fulfilment, Vendor Management, and other Client Services Teams.
* Responsible for identifying HIPAA 837 claim XML historical Hospital claim data to assist in the development of impact analysis and trending analysis.
* Worked on EDI transactions: 270, 271, 834, 835, and 837 (P.I.D) to identify key data set elements for designated record set. Interacted with Claims, Payments and Enrolment hence analysing and documenting related business processes.
* Involved in the full HIPAA compliance lifecycle from GAP analysis, mapping, implementation, and testing for processing of Medicaid Claims.
* Performed Business Process Mapping and performed AS IS and TO BE analysis.
* Involved in creating Project Management Documentation, followed PMBOK Standards.
* Tracked project related data/issues and report it to project management. Regular collaboration with PMO on project management, project delivery, process governance implementation, operational risk assessment; facilitated Vision workshops and JAD sessions.
* Involved in developing Business Requirement Document, System Requirement Specification document for application development.
* Maintained Requirement Traceability Matrix, Change Requests. Coordinated work plans between project manager and stakeholders using MS Project.
* Followed the UML based methods using MS Visio to create Use Case Diagrams, State Chart Diagrams and Sequence Diagrams.
* Coordinated Joint Application Development (JAD), Interview sessions with stakeholders throughout SDLC to resolve open issues.
* Worked with QA team to get technical designs developed by application and database developers validated against functional specifications.
* Wrote Business Requirements Documents (BRD) and Functional Requirements Specifications (FRS) documents.
* Facilitated meetings with product, compliance, operations, vendor and technology stakeholders to define, review and obtain sign-off for Scope Document.
* Defined Use Cases and Process flows for new functionality and documented them in Business Requirements Document
* Conducted Walkthroughs and User Acceptance Tests (UAT) and worked closely with the UAT personnel to both ensure that their needs are met.
* Communicated requirements through visually modelled UML diagrams to both management and development teams.

**Environment:** MS Project, MS Office, Rational Suite, project management, MS Visio, Requisite Pro, ClearQuest, RUP, UML

**Sutherland Healthcare Solutions | Jan 2010-December 2015**

**Business Analyst**

**Project Description:**The project was about development of the internal application called PCAS (Patient case administration software), which helped track the disbursement of the medicines to all the enrolled uninsured patients. The application kept track of all the prescriptions and health records of the patient as well as their provider information.

**Responsibilities:**

* Worked with client to determine user requirements and goals at requirement elicitation stage using Agile Methodology.
* Analyzed business requirements and created use cases to assist the development and QA/UAT team in design and testing.
* Reviewed and analyzed business requirements from user interviews and then convert requirements into technical specifications.
* Derived Functional Requirement Specifications (FRS) based on User Requirement Specification.
* Worked with the users and different teams involved in the application development for the better understanding of the business and IT processes.
* Conducted regular JAD sessions with the stakeholder, SMEs, 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.
* Analysis of HIPAA rules to incorporate in the development of PCAS application.
* Propose strategies to implement HIPAA 4010 in the new MMIS system & eventually move to HIPAA 5010.
* Followed a structured approach to organize requirements into logical groupings of essential business processes, business rules, and information needs, and ensured that critical requirements are not missed.
* Facilitated discussions between business partners, web portal development team, and vendor to ensure that proposed technical solutions adequately meet the business needs.
* Built and maintained close relationships with internal customers and retail systems vendor to ensure efficient development processes are being followed and that business priorities are met, and that projects/development are on schedule
* Designed and developed Activity Diagrams, Sequence Diagrams, Use Cases and other Process Flow Models using Visio.
* Coordinated data profiling/data mapping with business subject matter experts (SMEs), data architects, ETL developers, and data modelers.
* Used SQL queries for the retrieval and management of data.
* Developed and maintained sales reporting using in MS Excel queries, SQL and MS Access. Produce performance reports and implemented changes for improved reporting.
* Ensured applications are designed to support business objectives, business processes and will provide superior user and customer experiences.
* Working with the data warehouse teams to gather requirements and analyze all data elements needed for the data migration.
* Used MS Office suite (Word, Excel, Access, Visio, Power Point), for project tracking, documentation and presentation.
* Worked with the QA team for designing Test Plan and Test Cases for the User Acceptance testing (UAT).
* Performed Manual Testing and Involved in Functional, Black box, Usability and Regression Testing for UAT (User Acceptance Testing) and SIT (System Integration Testing).

**Environment**: MS Access, MS Excel, MS Word, RUP, UML, Rational Rose, Requisite Pro, Clear Case, Rational Clear Quest, MS Visio, SQL.