**BIPIN NEUPANE**

**PROFESSIONAL SUMMARY**

Over 6 years of proactive IT experience as a Business Analyst, I am passionate about supporting organizational solution software and analyzing organizational operations.I have an exceptional experience of Healthcare domain through exposure in business process analysis and valuable experience to support design, development, testing, integration and maintenance team. I have strong analytical and prioritization skills to furnish and assist in achieving the set targets by the stakeholders and accomplish the overall goals of the company.

* In-depth knowledge and experience in System Development Life Cycle (SDLC) with RUP, Agile and Waterfall methodologies
* Expertise in creating diagrams like Use Case, Cross-functional, Entity Relationship Diagram, and Data Flow Diagrams, prototypes, mock-ups and wireframes for user interface designs using Axure and MS Visio
* Clear understanding of ICD-9-CM and ICD-10-CM/PCS and well versed with HIPAA
* Experienced in performing UAT testing and Smoke-testing to identify usability issues
* Proficient with all phases of Requirement Management including eliciting, analyzing, and documenting requirements
* Hands on experience in writing SQL queries to generate reports, extract data from multiple databases for data mapping and analysis and for testing
* Highly knowledgeable in utilizing healthcare integration systems and applications including TriZetto FACETS and HIPAA Gateway
* Extensive experience in Healthcare/Claims and encounters adjudication with knowledge of industry compliance standards like HIPAA and EDI X12 transactions (834, 837, 835, 270/271, 276/277)
* Knowledge of Facets support systems used to enable inbound/outbound HIPAA EDI transactions supporting HIPAA 834, 835, 837, 270/271 transactions
* Expertise in HIPAA/EDI Medical Claims Analysis, Design, Implementation and Documentation
* Extensively worked with Members and Claims module in Facets application group
* Extensive knowledge of reporting tools such as SQL and ACCESS for underlying database tables and resolve data issues
* Excellent communication and writing skills and adept at facilitating walkthrough and training sessions.

**TECHNICAL SKILLS**

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| **Operating System** | Windows, macOS, LINUX |
| **Microsoft Application/Tools** | Microsoft Office Suite, Microsoft Project, Microsoft Front Page, Microsoft SharePoint, Microsoft SQL server, Visio |
| **Project Tracking Tools** | JIRA, HP ALM (Quality Center), Rally, Swift ALM, Rational Clear Quest |
| **Content Management Tools** | SharePoint, Decision Support System |
| **Claims Engine** | FACETS, KP Claims Connect |
| **Bug Tracking Tools** | JIRA, Rational Clear Quest, Bugzilla, Defect Module in QC |
| **Testing Tools** | HP QTP, SoapUI, Selenium IDE, Load Runner, Eclipse |
| **Databases** | SQL Server, MySQL, Oracle, TOAD, MS-Access |
| **Data Warehousing Tools** | Informatica, Sybase |

**PROFESSIONAL EXPERIENCE**

**Xerox Healthcare Solutions – Webster, NY Nov 2016 – Present**

**Business Analyst**

**Project:** This project involves in the migration of their existing EDI gateway from Amisys to Facets.

**Roles and Responsibilities:**

* Gathered business, system, and functional requirements by conducting detailed interviews with business users, stakeholders, and Subject Matter Experts (SME's)
* Conducted group (JAD) sessions with business units and stakeholders to define project scope and deliverables
* Used MS Visio to depict cross-functional diagrams and use case diagram
* Involved in writing Test plans and Test cases using HP Quality Center ALM Edition
* Involved in migration testing that involved data level validation and application level validation
* Involved in Validation of HIPAA/EDI for 270/271, 276/277, 837, and 835 claims used for professional, Institutional and Dental billings
* Good understanding of EDI 5010 Transactions, 837 Claims (institutional, professional and dental), 834 Enrollment, 270/271 Eligibility inquiry and Response, 835 Remittances and 276/277 Claims Status Inquiry
* Worked with solution architects, analysts and developers in creating and validating source to target mappings (STM)
* Involved in testing which included claims processing as per EDI/ANSI-X12 transactions standards
* Performed Smoke, regression, and system testing
* Involved in Data mapping to/from legacy to FACETS that will be used to populate the oracle database
* Documented Test Metrics and Test Logs on a weekly basis for senior management
* Wrote the High-Level Test cases, Low Level Test cases and Test Scripts for the login system
* Reviewed Test Strategy and Test Plans to ensure that they reflect and include all functional, Performance and Security requirements
* Performed Backend Testing by writing SQL statements to review the returned data to ensure that the correct data was retrieved
* Developed SQL Statements using TOAD to extract data from tables to verify the output data of the reports

**Environment**: TOAD, HP QC ALM, MS-Office Suite (Word, Excel, PowerPoint, Visio, MS Project, Outlook), FACETS

**Keiser Permanente – Honolulu, HI Jul 2015 – Oct 2016**

**Business Analyst**

**Project**: This was the Obama Care (Affordable Care Act) project which was aimed to keep the client informed about their options or anything that affects their coverage.

**Roles and Responsibilities**

* Facilitated requirements workshop to gather more information on the user requirements
* Performed Gap analysis by comparing ‘as-is’ and the ‘to-be’ state to illustrate business requirements
* Involved in the project charter (PC) creation by working with the project sponsor and the project manager.
* Developed Business Requirements Document (BRD) and Functional Requirements Document (FRD) as deliverables
* Developed Entity Relationship Diagrams, Data flow diagrams, Data dictionary (Data Definition Matrix), and User/Training Manuals
* Worked on the Claims Processing System and member configuration of Claims Connect
* Tested EDI 834 data in FACETS and tested real-time EDI
* EDI file Testing for checking the HIPAA 5010 (X12) compliance of the inbound 837 claims
* Provided guidance and support to business groups and testers to help them perform UAT
* Liaison between business users and development team to ensure accurate representation of business requirements and outcomes throughout the project development life cycle
* Developed Test plans and Test Scripts for eligibility application tool
* Identified and reported bugs
* Designed and implemented SQL queries for QA Testing and Report
* Supported the project after the deployment phase

**Environment:** Waterfall, MS Visio, SharePoint, HP Quality Center, TOAD, Rational Clear Quest, Sybase

**AvMed Health Insurance – Miami, FL Apr 2013 – Jun 2015**

**Business Analyst**

**Project:** The project aimed at fixing the Medicaid / Medicare membership to synchronize with State and the federal laws included fixing some calculations in adjudication system. Also, another project undertaken was migration of ICD 9 to ICD 10.

**Roles Responsibilities:**

* Gathered requirements by coordinating with the internal team and the subject matter experts (SME)
* Performed Gap Analysis of the ICD 9 CM and ICD 10 CM/PCA codes to identify and validate requirements
* Documented all the ICD 9 CM and ICD 10 CM/PCS codes listed in partnership with the providers and prioritized them to map them first.
* Coordinated JAD sessions with all the stakeholders to understand the impact of HIPAA 5010 on the existing system
* Gathered requirements for changes in the Core Adjudication System by conducting meetings and brainstorming sessions with end users and Subject Matter Experts (SMEs) and documented them using Requirement Traceability Matrix and later exporting them to HP Quality Center
* Prepared Business Requirement Documents (BRDs) after the collection of Functional Requirements from System Users that provided appropriate scope of work for technical team to develop prototype and overall system
* Organized requirements into Use Cases and modeled them into UC and Sequence Diagrams using MS Visio
* Assisted the QA personnel in the creation of Test Cases using HP Quality Center
* Defined and analyzed test cases, test scripts, bugs, interacted with QA/ development teams in fixing errors and conducted User Acceptance Test (UAT)
* Coordinated and prioritized outstanding defects, allowing sufficient time frame to ensure accuracy and consider deadlines
* Tracked the change requests
* Maintained and tracked the project plan using MS Project
* Daily and weekly status reporting to senior management

**Environment**: HP Quality Center, SQL, AGILE, MS Visio, MS OFFICE, MS Project

**Blue Cross Blue Shield – Detroit, MI Jan 2012 – Mar 2013**

**Business System Analyst**

**Project:** This project of BCBSM HIPPA EDI is a 4010 to 5010 conversion project which had two levels of compliance to validate the conversion.

**Roles and Responsibilities:**

* Worked with a cross functional and diverse team of business users and developers to enable accurate communication of requirements and ensure consensus
* Located the 837 transactions and reported error files and validated the data in the transactions.
* Provided audit and monitoring support of Medicare Part D claims to ensure the CMS compliance to the internal departments and to document those ongoing activities
* Worked with WTX (WebSphere Transformation Extender) mainframe to compare 4010 Reports with 5010 reports and transactions (277)
* Verified EDI file formats in compliance to the standards, analyzed trading partner’s specifications and created new EDI mapping guidelines
* Verified that that Patient’s name could be used situationally used in 837
* Created and maintained the Requirements Traceability Matrix (RTM)
* Managed relationships with the business units and interacted with the software vendors and consultants for the development and support
* Conducted requirement feasibility analysis with the developers to ensure the project was in scope with the timeline defined in the project plan
* Assisted in the data conversion and data mapping of the legacy data to new data base
* Designed and implemented complex SQL queries for QA testing and data validation

**Environment:** Waterfall, Validator, Rational Rose, WTX and JIRA

**EDUCATION**

* University of Louisiana at Monroe | Master of Business Administration