**Rakshya Bajgain**

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**Professional summary**

Over 5 years of Professional Experiences as Business Analyst with Expertise in Health care domain with Extensive experience in all phases of the Software Development Life Cycle and Business Process Reengineering with the claim adjudication. Good knowledge of FACETS, and member and Claim module involving Configuration, Customization, Reporting, Analysis and Enhancement.

**Area of Expertise**

* Comprehensive experience in different SDLC methodologies: Waterfall and Agile
* Proficient in conducting and facilitating Joint Application Development (JAD), interview and meetings with clients, end-users and development teams.
* Translated business requirements and user expectations into detailed specifications employing Unified Modelling Language (UML), Use Cases, Class, sequence diagrams and prototypes.
* Involved in GAP Analysis and Impact Analysis.
* Performed Functional testing, Integration testing, system testing, regression testing, UAT (User Acceptance testing) and performance testing
* Good understanding of RDBMS- Oracle, MySQL, MS SQL Server, DB2 And MS access.
* Proficient in writing SQL using MS SQL server management studio, Toad and Data studio
* Skilled in Mapping Business Requirement to test cases, maintaining traceability matrix
* Good knowledge of Pharmacy Benefit Management (PBM) adjudication and PDE reporting
* Thorough knowledge of Medication Therapy Management program and application
* Experience with Medicare, Medicaid and Commercial insurance in HIPPA ANSI X 12 4010/ 5010 Formats including 270, 271, 276, 277, 834, 835, 837 and 997/999
* In-depth Knowledge and extensive experience in Healthcare System: Mainframe, FACETS and Medicaid system (MMIS)
* Strong analytical skills, ability to identify problems, research issues, and provide solutions
* Detailed oriented with proven record of accomplishing assigned task in given timeframe.
* Good team player with an ability to work with minimal guidance as well

**Professional Experiences**

**Client: Comanche County Memorial Hospital, Lawton, OK**

**Duration: Feb 2017- Present**

**Role: Business Analyst**

**Environment: Share point, Rational Rose, Visio, RUP, UML, UAT, PowerPoint, HP QC, Quality Center**

**Project Summary:** The projects involved the development of the high priority Medicaid projects focusing on the implementation of the New Medicaid Management Information System (MMIS). My role in the projects was providing support throughout the life cycle. I was involved in writing the requirements, researching, analyzing the SoonerCare, Oklahoma’s Medicaid program for the state.

***Responsibilities:***

* Analyzed and collected business requirement identified system interfaces and created the requirement specification documents
* Organized the sessions with the QA teams to make them understand the requirements
* Conducted test case reviews
* Analyzed all medical ANSI X12 specification for processing electronic claims
* Experience with the EDI claim processes according to HIPPA Compliances
* Involved in HIPPA assessment and HIPPA X12 EDI transactions mapping and identified the requirements and involved in finalizing the system requirement
* Performed analysis on HIPPA-EDI transaction (270, 271, 275, 276, 278, 820, 834, 835 and 837)
* Identified Use Cases from the requirements and created the UML diagram including Use Cases, Activity/State chart, Sequence diagram, Data Flow Diagram using the Rational Rose and MS-Visio
* Performed requirement analysis by gathering both functional and non-functional requirements based on interactions with Users, Stakeholders, document analysis, interviews and documented through requirements in the BRD
* Consistently utilized MS-projects for planning and project tracking purposes
* Developed test plans and mapped them to requirements with the QA teams
* Developed and updated the requirement traceability matrix (RMT) using Rational Rose, Mapped the developed test case to the requirements to make sure that the requirements are fully addresses and implemented according to the specification.
* Experienced in developing, maintaining test plans, Detailed test cases, executing test cases, validating test results, logging defects, tracking defects and automated testing with experience in Quality centers
* Used Rational Unified Process (RUP) methodology for the projects
* Developed projects schedules, conducted project status meeting and managed resources during all phases of SDLC
* Created and Maintained the Requirement Traceability Matrix (RMT)
* Knowledge of Invoice Generation and payment process, both automatic and manual
* Developed projects schedules, conducted the project status meeting and managed resources during all phases of the SDLC
* Extensive knowledge of health, Medicare and Medicaid
* Performed unit testing with the developer
* Supported QA team in testing
* Used HP QC as the defect management tools and requirement gathering tools
* Involved in building Data Mart by reorganizing OLTP and OLAP
* Experienced in working in ANSI X12 270- 271 EDI Transaction
* Experience regarding conducting the assessment and impact/gap analysis concerning State Medical Management Information System (MMIS)
* Involved in the UAT testing of Web portal of MMIS system and conducted training users
* Performed Integration and regression testing along with testers
* Assisted with the test cases and developed strategies with Quality Assurance group to implement
* Efficiently responded client’s inquiries and resolved discrepancies
* Collaborated with the Quality Assurance Analyst to track defects
* Performed Gap Analysis to identify the deficiencies of the current system and to identify the requirement for the proposed system
* Assisted manager with the development of the projects schedules, project planning

**Client: Meridian Healthcare Warren, Ohio**

**Duration: Jan 2015- Dec 2016**

**Role: Business Analyst**

**Environment and tools: GEM, MS VISIO, ALM Quality Center, Quality Centers, MS Project**

**Project Summary:** Meridian Healthcare provides the healthcare facility when people need it the most. They offer a seamless array of acute, primary, tertiary, quaternary and preventive care backed by excellence in research and education. The main purpose of this assignment was to create an integrated solution to deliver quality health care, enhanced process flows, and increased patient flows to the clinic and give excellent experiences in all services provided. The project worked on HIPPA claims processing and ICD 10 readiness.

***Responsibilities:***

* Discussion with subject matter experts during gap analysis session to identify the areas of impact to gateway, Backend system and Frontend Systems for 5010 remediation
* Constructed the Business requirement documents and functional requirement documents for Inbound (837-I, P, D, and 834) and Outbound 835 transaction
* Worked closely with trading partner to make sure the requirements were met
* Performed impact analysis of the conversion of the ICD-10
* Involved with the Data Mapping between various source systems and staging area and data marts
* Maintained warehouse metadata, naming standards and warehouse standards for future application development
* Used GEM for forward and backward mapping to convert ICD 9 codes and vice versa
* Create best-practice requirements deliverables, such as use case, system process flow and context diagram
* Experienced in Software Development Life Cycle (SDLC) like Waterfall and project life cycle like Agile SCRUM, RUP methodologies
* Determined technical parameters for EDI by working with the development team for communication, security and privacy
* Responsible for integration and of data warehouse and reporting with other systems
* Extensively UAT Testing Manually
* Created test plans and test cases in ALM Quality Center
* Maintained Traceability Matrix and Test Matrix
* Acknowledged HIPPA rules and regulations during Electronic Data Interchange (EDI) and ensured that the development team kept up with it
* Used MS project regularly to monitor activities, schedules and communication during the project

**Client: Dignity Health, Sacramento, CA**

**Duration: Dec 2013- Dec 2014**

**Role: Business Analyst**

**Environment: FACETS 5.01, Agile, SQL 2012, SQL server, MS Office Tools, MS Visio, HP Quality center, QTP, SharePoint, PowerPoint**

**Project Summary:** Dignity Health is the prominent health care provider. This project was concentrated for the conversion of the ICD-9 CM and PSC codes to ICD-10 and conversion of the all HIPPA X12N-5010 version and prepare necessary supporting mapping/ crosswalk documents as the part of the project deliverables

***Responsibilities:***

* Test various change order of Medicaid applications received from System Engineer
* Conduct weekly meeting for deciding the policies and procedures to be followed while constructing new sites
* Worked on member management, Eligibility, claims and billing module within FACETS
* Conducted the complex documentation and user need analysis. Interface with team and staff to develop HL7 integration
* Assisted the JAD sessions to identify the business flows and determine the EDI X12 transaction, Code set and identifier aspects of HIPPA, impacts any current or proposed system
* Wrote test case for various Test scenarios, Documented UAT plan, helped the testing team to better understand the scripts and helped in management of defects and issues log during the testing phase
* Conducted business-impact assessment and results compared with new HIPPA 5010 standards to determine the current level of compliance and develop an action plan for approval by the project steering committee
* Develop the data feed and data mapping for integration between various system, including XML, to follow ICD 10 code set and ANSI X12 5010 formats
* Prepare and maintain Business Rules Spreadsheets (BRS) identifying rules, triggers and corresponding data fields from legacy to target CRM application
* Involve in gap analysis and implementation of HIPPA 5010, ICD 10 and claim Validations
* Conduct Gap analysis, and Gathered user requirements by interview, user meeting, JAD session, and Requirement Elicitation sessions.
* Reviewed and participated in defining the test strategies and coordinated the UAT efforts
* Store stakeholder’s conversation as part of CRM Activities in detail using ACT 5.0
* Extensively interacted with the stakeholders and the IT Department in finalizing the requirements according to the CMS compliances and HIPPA Regulations
* Assisted in Development of the test plan, test cases and test scenario to be used in testing based on business requirement, technical specifications and product knowledge
* Prepared the Graphical Depiction of the Use Case, Use Case diagrams, state diagram, activity diagram, sequence diagram, and collaboration Diagram using the MS Visio

**Client: Leapfrog Technology Nepal Pvt. Ltd., Kathmandu, Nepal**

**Duration: Nov 2012- Oct 2013**

**Role: Business Analyst Intern**

**Environment and tools: Agile methodology, MS office tools, MS Visio**

***Responsibilities:***

* Assisted in requirement gathering and documentation, client management and UAT.
* Worked closely with team on problem analysis and data gathering, driving conflict/issue resolution and helped in managing the communication of the status of significant business process issues.
* Attended clients calls and update weekly status report to all the stakeholders
* Reviewed business and system requirement with stakeholders and obtain the signoffs
* Ensured that the requirements are clear, testable, well documented and maintained

**Education**

**Master of Business Administration (MBA)**