**Syed Ameer**Software Quality Analyst

502-407-2778

**SUMMARY:**

Over 8 years of diversified experience in Sr. QA Analyst Health care IT. Proficient in system analysis, design, development. Experienced in developing test plans, test cases and automated test scripts using leading automation testing tools. Earned reputation in meeting deadlines when required, conforming to specific requirements and adhering to established plans.

* Excellent knowledge of industry standard methodologies like Software Development Life Cycle   
  (SDLC), Product Lifecycle Management (PLM), Iterative Software Development Life Cycle Process as per Rational Unified Process (RUP), Agile – Scrum. Extensively experienced in devising and implementing Software Testing Methodologies.
* Experience in requirements gathering, system specification analysis and Test Plan formulation.
* Good Knowledge in Health Care Transaction, EDI HIPAA X12 transactions (837,835,834,270/271,276/277) Inbound and Outbound 837 Institutional, Professional, Dental and Pharmacy Claims.
* Experience in EDI testing and Inbound/Outbound Claims testing.
* Expertise in Test Process, Test Scenarios, Test Scripts, Test Case Designing and Defect Tracking.
* Experience maintaining Test Cases, Scenarios and Requirements in Quality Center.
* Experience in Testing HIPAA X12 4010/5010.
* Strong data warehouse background with knowledge of ETL and data mining
* Excellent experience in Data migration ICD-9 to ICD-10 Projects
* Experience working with Healthcare industry applications such as FACETS, Trizetto Xpress Claim Test Pro (MDE)
* Involved in Smoke Testing, Integration Testing, System Testing, Regression Testing, API Testing, User Acceptance Testing (UAT), GUI Testing, Performance and Database Testing, Production Validation and Audit.
* Have Strong Knowledge of HIPAA 4010/5010 version and changes.
* Experience executing manual test case and doing Adhoc testing, Black Box and White Box testing.
* Hands on Experience Meditech.5.66 . SCH,REG,ADM,DIS,ABS and BAR.
* Experience with health care systems, Medicaid with prime focus on claims adjudication, Provider Eligibility and Prior authorization.
* Good skills in using HP testing tools such as Quality Center besides Quest and QTP.
* Experience in an Agile Methodologies with Scrum.
* Experience in creating Traceability Matrix between requirements and test cases using Mercury Quality Center.
* Have the ability to learn new concepts and applications quickly and to work independently.
* Team player with good communication and written skills and also a self-motivated individual with exemplary analytical and problem solving skills.
* Excellent verbal and written communication Skills.

**TECHNICAL SKILLS:**

Methodologies: Agile, MS Office Tools, Windows XP, Mercury Quality Center, Meditech 5.6,Meditech 6.0 ,sharepoint services, and WINDOWS 2000/XP and UNIX.

Languages: SQL, Java, XML and HTML, Mainframe, .NET, SQL, PL/SQL, HTML, XML, DHTML, T-SQL, VB.NET

Database Tool: SQL\*PLUS, TOAD, SQL DEVELOPER

Office Tools: Office 2002/XP/2003/ MS Word, Excel, PowerPoint

Testing Tools: HP ALM Quality Center 11, JIRA

Database: MS SQL Server 2000, MS SQL Server 2010, MS Access, Oracle, DB2

Operating System: Windows 98/NT/ME/XP/7, UNIX

Other Tools: BMC Service Desk, Tidal Enterprise Scheduler, Claims Data Validator, Ultra Edit, Rational Rose, Visio ERWIN, MS Office Suite, Biz Talk, Edifices—Engine and Spec builder

**EXPERIENCES:**

**Project: Catholic Health Initiatives. Nov 2014 – Present**

**Address:** 198 Inverness Dr W, Englewood, CO 80112

**Sr. QA Analyst**

**Catholic Health Initiatives** during HIX Exchange Open enrollment & also for special enrollment events. Users can choose various plans for Individual, Family and Child only based on the benefit information and premiums offered by providing the relevant Demographic information. Worked in Enrollment team very closely with developer and business people on multiple projects as Break fixes and enhancements.

**Responsibilities:**

* Extensive Experience in Core Claims System in a Managed Healthcare environment
* Created and maintained requirement document for business rules
* Worked with SMEs and stake holders to create different requirement template as per the business rules guidelines
* Created and maintained test plan document for our in house rules management application
* Strong functional and technical testing of Managed care Claims applications and experience with ICD 10 migration testing.
* Experienced with Test script prep, systems testing and UAT ideally in a Healthcare environment
* Did gap analysis for HIPAA4010 to 5010 and 837 transactions, and analyzed error.
* Wrote Test scenarios and test cases for testing the migration of EDI4010 to 5010 and the processing of member enrollment and benefits, (834) batch jobs corresponding to the claims (837).
* Tested the ANSI X12 Version 4010 /5010 EDI transactions (HIPAA) like (834, 837P, 837I, 835 remittances).
* Involved in forward mapping from ICD 9 to ICD10 and backward mapping from ICD10 to ICD9 using General equivalence Mappings (GEM).
* Experience with NetworX price-testing and figuring pricing for procedures and claims based on information inputted into NetworX.
* Involved in testing HIPAA Database, which incorporates all the HIPAA (Health Insurance Portability and Accountability Act) transaction sets.
* Automated Web Service tests using HP Service Test.
* Involved in end-to-end testing of FACETS Enrollment Claim Processing and Subscriber/Member module.
* Write many SQL queries in order to retrieve data/check data from different tables in TOAD for oracle data base
* Wrote test cases in Quality Center derived from the BRD and generated a Traceability Matrix for testing purposes.
* Created Traceability Matrix to ensure implementation of all functionalities, identify all test conditions and test data needs.
* Identify scope systems that will be modified by the ICD-10 project to accommodate ICD-10code and /or downstream impacts steaming from ICD-10 codes.
* Elicit requirement to be able to generate the tools and info needed to process the ICD-10.
* Tested the HIPPA EDI 834, 270/271, 276/277, 837/835 transactions according to test scenarios and verify the data on different modules.
* Involved in System testing, Regression Testing and User Acceptance Testing (UAT) manually and Automation tool.
* Experiences working in ANSI x12 837-835 EDI Transaction.
* Validated the data from EDI transaction using TOAD for oracle 10.6 version.
* Resolved issues with member attributes, enabling multiple rules associated with member lookup process in Facets.
* Managed defect tracking process, which include prioritize bugs, assign bugs and verifying bugs using QC.
* Handling/Tracking defect in the Quality center and export in to Excel by using filter.

Environment:

Agile, MS Office Tools, Windows XP, Mercury Quality Center, Facets, web services, MS SQL and UNIX. Testing Tools: HP ALM Quality Center 11, JIRA.

Database: MS SQL Server 2000, MS SQL Server 2010, MS Access, Oracle, DB2

Operating System: Windows 98/NT/ME/XP/7, UNIX

**Project: Care Source . Jan 2014 – Oct 2014**

**Address:** 230 N Main St Dayton, OH 45402

**Sr. QA Analyst**

**Responsibilities:**

* Analyzed the available artifacts such as BRDS, both functional and nonfunctional, Use cases, Data Flow Diagrams.
* Performed unit testing, System testing, Functional testing and Integration testing various actions of the integration utility.
* Prepare Test Data, Test scenarios, Test Scripts and executed Test Cases from Quality Center
* Creating several Test Cases and Test Conditions for testing various Claims, Membership, Billing and Provider reports.
* Extensively performing manual testing and defect reporting using Quality Center/ALM.
* Extensively involved in UAT support for their execution and Defect Triage
* Experienced in working on SCH (Schedule) Module using Meditech 5.66 application.
* Experienced in working on Pre-registration (Schedule) Module using Meditech 5.66 application.
* Experienced in working on REG (Registration) Module using Meditech 5.66 application.
* Experienced in working on ADM (Admission) Module using Meditech 5.66 application
* Experienced in working on ABS (Abstract) Module using Meditech 5.66 application.
* Experienced in working on BAR (Billing) Module using Meditech 5.66 application.
* Strong functional and technical testing of Managed care Claims applications and experience with ICD 10 migration testing
* Strongly experienced verifying ICD-9 PRE, ICD-10 POST and ICD-9/10 CROSS scripts.
* Executed test cases for different markets including Nebraska, Chattanooga, Kearney and Reading.
* In-depth experience in entire Quality Assurance life cycle including development of Test strategies, Test plans and Test cases in various system environments.
* Acquainted with the methodologies of Functionality Testing, Integration Testing.
* Compared and analyzed actual to expected results and reported all bugs in ALM
* Executed test cases manually ALM that were developed in pre testing phase
* Managed all types of change requests, including defects, enhancements, issues and documentation changes using ALM
* Built the testing team that would execute the UAT test cases, as the representation of the real time Meditech end user
* Participated in daily test case review meetings and Detail Design meetings for resolve roadblocks and issues.

Environment:

Agile, MS Office Tools, Windows XP, Meditech 5.66, web services, MS SQL and UNIX., HP ALM Quality Center 11, JIRA.

**Project: Presbyterian Health Plan. Oct 2012 – Dec 2013**

**Address:** 2501 Buena Vista SE

Albuquerque, NM 87106

**QA Analyst**

Presbyterian Health Plan, Inc currently uses the TriZetto FACETS to manage their web services. Because the current system is not meeting company needs, Presbyterian will be replacing their current system with a solution from HealthX, a web hosting and Design Company. Working on Single-Sign On (SSO) connector that will allow Members, Providers, Employer Groups, Brokers, and Internal users to seamlessly transfer to the HealthX site from the PresOnline Menu of Services (MOS). The user will be able to then access the Health X site from MOS without having to sign in again.

**Responsibilities:**

* Utilize Software to create and maintain enrollment data files for EDI transmissions to insurance carriers consisting of 834 transaction sets and employer proprietary layouts.
* Analyze EDI transmissions for effectiveness and efficiency to ensure successful data transfers.
* Identify opportunities for system enhancements and improved efficiencies.
* Collaborate with coordinators and analysts to maintain functionality of the EDI system and processes
* Managed all phases of end-to-end testing which includes User Acceptance testing, Functionality testing, negative testing, system testing, unit testing and Smoke testing of the Applications.
* Manually executed all test cases and recorded the actual results of testing.
* Performed manual testing of the application to test the system for both the functional and business requirements for positive and negative scenarios using Quality Center.
* Worked on SSO Connector will gather all the parameters, from multiple data sources, required by HealthX product for the following three HealthX user Categories: Members, Providers and Other Users (see Business Requirements sections for details), to enable Members, Providers, Employer Groups, and Internal Users to log into the HealthX website.
* Understood the code organization and code specification of ICD 10.
* Worked on FACETS to automate work, provide real-time delivery of claims and customer service items and reduce costs.
* Tested and delivered Inbound/Outbound FACETS interfaces.
* Experience working on entering Claims and Customer Service Tasks into the FACETS.
* Worked extensively with Inbound and Outbound of EDI 837 I and 837 P claims processing systems
* Generation of Report: Verify whether the Reports got generated accordingly with the transformed data.
* Performed backend testing of the SQL database and verified the EDI data transactions going fine in the database.
* Wrote Test scenarios and test cases for processing of member enrollment and benefits, batch jobs corresponding to the EDI claims (837) and real time transactions like 270/271/276/277
* Translating the TRDs (Technical Requirement Document) into UAT Test Scenarios for the Team members as Data is derived through complex calculations given in TRD's, referred by Developers, SIT and the UAT.
* Conducting and facilitating meeting and walkthroughs with the PBA's (Project Business Analyst) and BSA's (Business System Analyst).
* Worked on FACETS 5.01.
* Validated all the incoming/Outgoing data from EDI 837/835 interfaces.
* Worked on claim processing data for different FACETS Modules.
* Created different Providers and Members through FACETS 5.01.
* Extensively worked in preparing the EDI transmission files, dropping them in Inbound, Outbound Interfaces and validate the data according to our Test scenarios.
* Performed UAT to validate the Data populated into the Reports by comparing the SQL Server Database and the Reports against the Lotus Notes Database by writing SQL Queries on both ends (Lotus Notes Database and SQL Server Database).
* Reviewing the UAT deliverables (Test cases and Test Results) with the Business Owners, Project Director and getting their Sign offs.
* Coordinating with the Development Team and Release Management team for the smooth sail of Reports to go to Production.
* Planning the ETL job runs with the SIT team for loading of the Data into the UAT Environment.
* Strong experience in data validation and manipulation in SQL Server databases using SQL queries.
* Creating Training Presentations and scheduling Training sessions for the End Users

**Environment**: Windows, MS SQL Server, Oracle, Quality Center, HealthX, Trizetto FACETS, Quality Center, QuickTest Pro

**Employer: HCL Global Technologies**

**Project: Epsilon June 2012 – Oct 2012**

**Address:** 4445 Lake Forest Dr, Blue Ash, OH 45242

**Programmer Analyst/QA Analyst**

**Responsibilities:**

* Develop automated test script from the Functional Requirements and Test Cases.
* Enhance the efficiency of test scripts by using complex java programming, parameterization and logical statements techniques.
* Develop Java function libraries to create reusable and easy maintainable Rational Functional Tester Scripts.
* Involved in reviewing Business Requirement Documents and the Technical Specifications.
* Prepared **Test Scenarios and Test Cases** as per functional areas
* Performed Manual testing prior to automation­­­­­­­­­­­­­ testing on the application.
* Identified and developed automation process in MS Access and Oracle to manipulate data into database automatically.
* Analyze the application, reviewed System requirement documents, Functional Requirement document and formulated the Test plan based on the system/functional requirements
* Development of test case scenarios for Functional testing of web application developed in HTML and XML.
* Perform System, Software, Regression, User Acceptance and Load testing for new releases.
* Perform automated and manual GUI, Functionality and Integration testing on the applications.
* Conduct Smoke, Security and Functional testing of the various applications.
* Identify software errors and interacted with developers to resolve technical issues.
* Validate the back-end data by using SQL and PL/SQL extensively.
* Specifying testing requirements, planning tests, designing test steps, generating test templates, calling test with parameters, creating requirement coverage, executing tests using the Test Lab, and adding, matching, updating, prioritizing & mailing defects, monitoring the test process by generating the test reports & graphs using.
* Involve designing Java class libraries for automation projects.
* **Involve in weekly status updates showing progress of testing on various Operating systems and browsers**
* Involved in designing the **QTP scripts using Manual Test Cases.**
* Created and **ran automation scripts using QTP automation tool.**
* Involved in Testing Web Interfaces on Internet and also on Intranet
* Manually performed Backend testing by executing SQL queries and Conducted **Functional Testing using QTP.**
* Investigating software defects and interacting with developers to resolve technical issues using Test Director.

**Environment:** Quality Center, QTP, Windows XP/Solaris, Oracle9i, SQL Server, Siebel, Java.

**Employer: Soft tech Pvt. LTD.**

**Project: Soft Technologies. Feb’2005 – Jan ’2009**

**Address:** v.Mariner-Admin Block.Plot No: 17 Software

Unit layout Madhapur, Hyderabad-500081INDIA.

**System Analyst**

**Responsibilities:**

* Analyzed business use cases and design specification and created test plan, test cases and test scenarios.
* Ensuring test case creation and linking, test execution, aligning development support, defect management, and all status and reporting using **Quality Center.**
* Coordinated with the QA team and developers to prioritize defects and rectify them. Participated in the Release meetings to triage the Sev.2 bugs.
* Tested web services for the **web application using XML Spy**.
* Worked with Quality Center for executing test cases and reporting defects.
* Maintain requirements traceability matrix to trace the requirements with test cases.
* Created various reports like bug reports, weekly reports, monthly reports to present the progress of the testing process.
* **Performed Backend Testing by writing SQL statements** to review the returned data to ensure that the correct data was retrieved.
* Analyzed test results, generate test reports, file bugs and follow up on resolution with development & support team.

**Environment:** Java, HTML, XML, MS Visio, UNIX, Oracle 8.0, Test Director 8.