**Usman Ashraf**

**Summary:**

* Business Analyst experience in IT for 7+ years.
* Performed User Acceptance Testing (UAT) with business users.
* In depth understanding of Software Development Life Cycle (SDLC) starting with requirement gathering, analysis and documenting the requirements as various deliverables and validating output of each phase from the SME's and Project Manager.
* Proficient in creating UML Diagrams, including Use Case Diagrams, Activity Diagrams, Class Diagrams, Sequence Diagrams using various tools such as MS Visio, Rational Rose.
* Conducted communication between the client and IT department, involved in gathering, analyzing, and documenting Requirements. Understand the Business Rules and can effectively implement them in Business Process Flow.
* Excellent business writing skills in documenting existing process, analyzing business requirements, creating Business Requirements Document (BRD), Functional Requirements Document (FRD), Software Requirement Specifications (SRS) and working with requirements traceability matrix, reengineering business processes and designing.
* In depth understanding of Software Development Life Cycle (SDLC) starting with requirement gathering, analysis and documenting the requirements as various deliverables and validating output of each phase from the SME's and Project Manager.
* Experienced in GAP Analysis of HIPAA 4010 to 5010 with particular attention to qualifier, length and required field and situational rules.
* Performed gap analysis and data mapping for HIPAA X12 4010A1 to 5010 migration.
* Expertise in verifying and understanding EDI raw data, both in 4010 and 5010 format.
* Strong understanding of ICD 9 and ICD 10 structures and formats.
* Extensive experience in organizing and facilitating JAD sessions, interviews, workshops with users, SME's, and business stakeholders for project definition involving analyzing requirements, creating prototypes, user interface, database schema and system design.
* Deep understanding of Database management system, Data warehousing concepts, Business Intelligence technologies and Data mining.
* Experienced in writing SQL queries for data validation/scrubbing purposes and creating reports.
* Expertise in data mapping between systems and creating data mapping documents assimilating data from various sources.
* Expert in developing and managing MS access and SQL server database for data entry, storage and generation of reports to facilitate management decision making processes.
* Good experience in creating Test Plans and Test Cases from the Requirements document and conducting UAT (User Acceptance Testing).
* Excellent communication and analytical skills with strong problem solving capabilities to interface with end users, business representatives and development teams.

**Education:**

Operating Systems MS Windows, DOS, UNIX, XP, Vista, Mac OS

Database SQL, MS Access, Oracle

Tools and Applications MS Visio, MS Office Suite, MS Project, Excel, MS Word

Requirement Management Tools Rational Clear Quest, ReqPro, MS Project, VISIO, Mercury Quality Center

**PROFESSIONAL EXPERIENCE**

**Client: Regence Blue Cross Blue Shield, Portland, OR**

**Position: Business Systems Analyst**

**Duration: Jul 2015 - Present**

**Description:**

The Regence Group is the largest affiliation of health-care Plans in the Pacific Northwest/Mountain State region. It includes Regence BlueShield of Idaho, Regence BlueCross BlueShield of Oregon, Regence BlueCross BlueShield of Utah and Regence BlueShield (in Washington). Regence Group is implementing a set of projects under a common program called CP-SS (Common Process Single

System). CP-SS will bring individual four states legacy system affiliated with Regence group into a common Platform to deliver valuable experiences to its members. Participated in the implementation of Claims Processing, member enrollment, and Billing modules in the system.

**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 artefacts.
* 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.
* Compiled and analyzed Marketing statistical data to formulate reports using SQL and Crystal Reports
* Created data mapping documents based on client specifications which involved working with Facet claims, membership & plan data model.
* Worked as a liaison between the business and technical side to convey the business needs to the system architects.
* Worked in association with RUP mentors to ensure fidelity to the standard RUP practices of the institution.
* Validate EDI Claim Process according to HIPAA compliance.
* 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.
* Utilized Crystal Reports SQL COMMAND to manipulate data such as Select Distinct Union
* Mapped clearing house provided service codes to Facet by developing crosswalk tables.
* Provided the management with test metrics, reports, and schedules as necessary using MS Project and participated in the design walkthroughs and meetings.
* Worked with plan data model in Facets front end & backend.
* Documented the test plans and developed related documents.
* Analyzed the “As is” and “To be” system documents to show the current and proposed functionalities of the system using MS Visio.
* Joined and sub selected data to retrieve from stated SQL Server Performed a merge into Crystal Reports Also converted and merged into SQL Enterprise.
* Performed root cause analysis for errors found in facet for membership and claims status.
* Worked with the clients on the final signing process in the User Acceptance stages.
* Coordinate with Development and Business team to develop high level Business and Technical documents.
* Implemented Standardized and Unified process throughout the software Development Life Cycle (SDLC).

**Environment:** MS Excel, MS Word, MS Power Point, MS Visio, MS Project, MS Access, SQL Server, HP ALM, Agile, Rational Clear Quest, Rational Clear Case, Rational Requisite Pro, UML.

**Affinity Health Plans - New York, NY**

**Position: Business Systems Analyst**

**Duration: Jun 2014 - Jun 2015**

**Description:**

The project was to initiates the change of 834, 837 I/P/D, 835, and 271 EDI exchanges from 4010 to 5010. I was in charge of preparing requirement document for transformation of 834 4010 to HIPAA complaint 5010, making test documents, and testing and auditing the migration records. Worked on Facets, billing and EDI HIPAA 835 and 837 processing.

**Responsibilities:**

* 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.
* Followed the UML based methods using MS Visio to create Use Case Diagrams, State Chart Diagrams and Sequence Diagrams
* Enhanced test cases and scripts by adding the required functionality as per the new business requirements.
* Was responsible for Defect Tracking and Bug Reporting, which was performed in HP Quality Center.
* Verified data outputs and transformations between systems remained true and were not compromised as systems were integrated.
* Prepared detailed reports and presentations using SQL and MS Access
* Participated in various meetings and discussed enhancements and modifications request to resolve issues and expand capability of the systems.
* Interacted with stakeholders to get a better understanding of client business processes and gathered requirements.
* Experience in conducting scrum meetings and sprint planning.
* Collaborating with business partners and cross-functional teams and supporting system documentation.
* Enrolled members and provider in the Facets system.
* Created and modified queries utilizing Facets data tables.
* Experience with COB (coordination of benefits) application with in facets, testing of claims status for selected subscribers.
* Involved working with HIPPA-EDI ANSI X12 Transaction Code sets EDI 834, 835 and EDI 837.
* Involved in Testing (271, 277, 820, 834, 835 & 837) Transactions.
* Developed understanding of various transactions involved in transition from HIPAA 4010 to HIPAA 5010 like eligibility, benefit, claim submission transactions in Facets tables.
* Generated on-demand and scheduled reports for business analysis or management decision using SQL Server
* Organized and facilitated meetings with the management and development teams.
* Performed UAT, regression testing on EDI 835 and 837 X12formats in Facets.
* Conducted requirement gathering sessions with the purpose of creating and defining the Business Requirement Document (BRD) and the Functional Requirement Document (FRD) using Rational Requisite Pro..

**Environment:** SQL Server, HP ALM, Agile, MS Project, MS Access, Rational Requisite Pro, UML, MS Excel, MS Word, MS Power Point, MS Visio.

**United Health Group - Phoenix, AZ**

**Position: Business Systems Analyst**

**Duration: Apr 2013 - Apr 2014**

**Description:**

Acted as the primary support contact and coordinated all questions and issues that arise with the Facets application. I ensured that the Facets was created and maintained in a manner that supports the departmental and overall business objectives in coordination with other system vendor products. Gap Analysis was performed and changes were identified in HIPAA 5010 so as to upgrade the Medicaid Management Information System (MMIS) to comply with the new standards mandated by HIPAA.

**Responsibilities:**

* Conducted one on one interviews with high level management team and participated in the JAD session with the SME’s.
* Worked on Facets Claims Software System, to convert data from their legacy system (LRSP) and add custom applications to satisfy in-house requirements.
* Proposed FACETS claims adjudication procedures, standards and editing guidelines.
* Worked closely with developers and a variety of end users to ensure technical compatibility and user satisfaction.
* Worked on analysis of FACETS claims processing system and gathered requirements to comply with HIPAA.
* Responsible for gap analysis in changing old MMIS and Involved in testing new MMIS.
* Conduct JAD sessions to gather and document requirements that enhance a wide range of functionalities including claims processing, eligibility and enrollment, provider networks, and electronic data interchange for our Facets core application.
* Gap Analysis of client requirements, generated workflow process, flow charts and relevant artefacts.
* Designed Use Cases using UML and managed the entire functional requirements life cycle using RUP.
* Defined and documented the vision and scope of the project.
* Followed the RUP methodology for the entire SDLC.
* Responsible for attaining HIPAA EDI validation from Medicare, Medicaid and other payers of government carriers.
* Worked as a liaison between the business and technical side to convey the business needs to the system architects.
* Used SQL Queries in Oracle to pull out data from the databases for the data validation and routine report generation.
* The process included importing claims into Facets that had been adjudicated and setting them in a “PAY” status so that a payment cycle could be run to create checks on Facets.
* Worked in association with RUP mentors to ensure fidelity to the standard RUP practices of the institution.
* Studied existing business application and processes, collected end user requirements and suggested the improvised business process model.
* 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.
* Provided overall project management to multiple projects successfully completing them on-schedule and on-budget.
* Enhanced test cases and scripts by adding the required functionality as per the new business requirements.
* Participated in weekly status meetings to present status and incorporate any digressions from the original scope.
* 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:** SQL Server, JAD, BRD, FRD, HTML, XML, MS Access, MS Visio, BPMN (Visio), MS Office, MS Project.

**CVS Caremark - Somerset, NJ**

**Position: Business Analyst**

**Duration: Oct 2011 - Mar 2013**

**Description:**

The goal of the project was to implement the HIPAA 5010 standards to make enhancements to receiving, documenting, processing the claims including the eligibility verification. The project also involved tracking and addressing the problems on timely manner encountered by the providers, billers as well as vendor companies, health plan groups, Medicare Part(A, B, C, D) and State Medicaid while generating 837 Professional, Institutional, Claim Status Inquiry/Response 276/277, 834 Enrollment, and Remittance Advice 835.

**Responsibilities:**

* Performed extensive Gap Analysis in order to understand and to identify AS-IS processes of claims transactions of 4010/4010A standard and TO-BE processes of 5010 standard.
* Gathered Business Requirements in form of high level stories by interacting with the business users, designers and developers, SME's, Project Manager via formal interviews, Live Meetings and JAD sessions to get a better understanding of the Business Processes.
* Worked with Claims, enrollment, eligibility verification for members and providers, benefits setup, and backend payment cycle in Facets. Presented documentation on key elements of HIPAA compliance to ensure the development teams were on track.
* Facilitated all aspects of the scrum framework, including sprint planning sessions, backlog grooming sessions, daily scrums, product demos, sprint reviews and sprint retrospectives.
* As Scrum Master, supported and consulted product owner in developing, maintaining and grooming product backlog, capacity plan, iteration board, sprint backlog, velocity charts and burn down charts.
* Made business requirements document, change requests, and use cases available to all teams using MS Visio.
* Utilized SharePoint for submission, modification, and tracking change requests and defect tracking.
* Document all data mapping and transformation processes in the Functional Design documents based on the business requirements.
* Involved in configuration of Member and Provider Module in FACETS.
* Involved in creation of test plan, test scenarios, test cases for unit, system and system integration testing.
* Created Project management plans for managing on time delivery using Rally along with writing test cases, unit and systems integration test plans in Quality Center.
* Provided analytical solution to the customers for Facets Production Issues.
* Developed and maintained Use Cases, visual models including activity diagrams, logical Business process models, and sequence diagrams using UML.
* Carried out User Acceptance Testing and extensively used SQL to perform Backend Testing in order to verify data integrity and analyzed, and manipulated the SQL database.
* Helped requirement documentation for Data Warehousing needs including Data Extraction, Data Transformation, and Loading processes as part of the ETL process.
* Interacted with the QA team to performed Unit and Integration Testing for multiple transactions (837, 835, 276, 277, 270, and 271) and implemented Alpha Test in order to confirm the functionality of recent conversion.
* Ran reports using Excel and Business Objects to compare and verify data.

**Environment:** JAD, BRD, FRD, Windows, HP Quality Center, MS Word, MS Excel, MS Visio, Rational Requisite Pro, UML.

**Horizon BCBS, NJ**

**Position: Business Analyst**

**Duration: Feb 2009 - Sep 2011**

**Description:**

The objective of the project was to design an Automated Attribution engine that will use data to assign members to Value based programs through a process called "Attribution. Through complex algorithms, members are aligned with those providers with whom the member regularly contacts or engages the healthcare system. The system generates reports for these programs, creates Attribution history, and sends data to upstream and downstream systems. The project followed RUP methodology.

**Responsibilities:**

* Worked closely with client business leaders and end users to understand their business objectives and processes. Conducted sessions with business unit leaders and stakeholders globally to define project scope, gather requirements, to identify the business flows and perform impact analysis on existing systems as well as feasibility studies for the future process.
* Conducted Business validations for different FACETS modules Providers, Claims, enrolment and Membership
* Facilitated requirement gathering workshops and interviews to identify, translate and document business and user needs into detailed, testable and verifiable business, functional and system requirement specifications.
* Developed detailed Technical Requirements Document/User Stories/Document of Understanding used for envisioning the development effort.
* Involved in Backend Testing to verify data integrity by using SQL.
* Facilitated communications between solution architects, developers, quality assurance analysts and business users as required throughout the requirement analysis, design and testing phases to ensure the defined requirements are interpreted correctly.
* Collaborating with IT Data Modeling team to ensure data model design is consistent and accurate with the business requirements.
* Creating functional requirements and source-to-target mappings including data transformation rules to the development team for implementation.
* Performed data profiling and analysis on source systems to make sure data is in sync as per the requirements.
* Create and maintain requirement traceability matrices correlating the system requirements to functional requirements and then to test cases.
* Analyzed, manipulated and produced a pattern of fees and pricing from Database using SQL.
* Collaborated with the testing teams for test cases, test scripts planning, review and approval. Assisted testers in developing a variety of possible test scenarios and cases to ensure that the system being built is resilient.
* Co-ordinate and support business in defining and performing QA / User Acceptance Testing.

**Environment:** JAD, BRD, FRD, HP Quality Center, Windows, MS Office Suite, Rational Requisite Pro, Rational Rose, UML.

**Education:**

Bachelors in Commerce