**Professional Profile**

An application oriented senior business analyst skilled in logical and sequential methods for accomplishing customer’s goals. Provided leadership in facilitating and conducting information gathering, data analysis, documentation of information, and presentation of findings. Served as a SME (subject matter expert) assisting with IT projects, enhancements, and support items. Provided guidance to staff on user functionality of newly developed enhancements. Utilized strong code development, planning, and communication skills toward improving operational efficiency.

Experienced in programming and business analysis, testing and quality control. Strengths in the legacy Amisys application, including trouble shooting and adhoc solutions to daily issues.

Expert in business process engineering and software development life cycle, including analysis, design, development, testing and implementation of software applications.

**Business Skills**

* Systems analysis, design and programming for legacy systems
* Interfaced with business users to prepare and update Business Process Requirements (BPR) and Software System Requirements (SSR). Created test cases and test scripts
* Ensured all artifacts complied with corporate SDLC Policies and guidelines
* Performed GAP analysis of business rules, business and system process flows, user administration and requirements.
* Prioritized outstanding defects and system problems, ensuring accuracy and deadlines were met.
* Documented Software System Requirements (SSR) and Business Process Re-engineering (BPR).
* Updated System Change Request (SCR) forms for Product Data Management (PDM).
* Working within a Healthcare setting managed receiving and processing of EDI documents(X12) both in a 4010 and 5010 format.
* Comfortable in both systems development and maintenance environments

**Professional Experience**

**HealthPlus of Michigan, Flint, MI \* May 2014 – Nov 2014**

Surge Project As part of the Surge Project team responded to the user requests to update the Amisys surround code. This involved updating existing processes, creating new processes/reports and creating one time processes as required.

Systems Analyst:

* Create and maintain required documentation related to the changes to the Amisys Surround code. This included unit testing and user UAT documents.
* As required create and maintain required documentation related to new processes related to the Amisys Surround code. This included unit testing and responding to user UAT related comments.
* As required created / tested / implemented one time processes to meet user’s requirement. This included creating various Access databases to allow for the reviewing of various customer HRA questionnaires.
* Using PL/SQL in an Unix environment create reports as required. This involved creating working tables,queries and stored procedures to extract and format the data to fit the user’s needs.

**Highmark Blue Cross Blue Shield, Pittsburgh, PA \* Jan 2014 – May**

HighBar Individual Billing System As part of the Medicare Advance Group, manage updates to the system to allow for the accurate and efficient billing of current members at the client level.

Healthcare Business Analyst:

* Create and maintain required documentation related to the changes to the Highbar Individual Billing System (HIBS). Maintained this documentation within the Rational RequistePro management tool.
* Create and maintain required Test Plans/Test Cases related to the changes to the Highbar Individual Billing System (HIBS). Maintaining this documentation within the Rational RequistePro management tool.
* As required provide support for system change requests maintained in Clearquest.
* Using SQL created queries to validate changes to the HighBar Individual Billing System (HIBS)

**PharMerica, Louisville, KY \* May 2012 – November 2013**

Short Cycle Fill Analysis and Implementation of regulatory requirements as spelled out in the Patient Protection and Affordable Care Act.

Healthcare Business Analyst:

* Evaluation, recommendation and deployment of changes to PharMerica claims processing to meet upcoming CMS regulatory requirements as spelled out in the Patient Protection and Affordable Care Act (Short Cycle Dispense).
* Analysis and review of existing automated processes to ensure proper logic is being applied to meet upcoming CMS regulatory requirements (Short Cycle Dispense) and that said processes run in an efficient and coordinated manner.
* Analysis and review of existing automated reports to ensure required data is correctly being captured in support of the Short Cycle Dispense initiative.
* Create and manage UAT process to ensure system enhancements and break fixes are approved and implemented at all pharmacy sites (90 +)
* Using SQL created queries to validate changes were correctly made to the system.

**Dean Health Plan, Madison, WI \* October 2011 – March 2012**

5010/210 Project Internalization of HIPAA Transactions and Metavance Upgrade Initiative

Healthcare Business Analyst:

* Created mapping matrix for the inbound 837 Institutional and Professional claims
* Documented current business rules being applied on inbound claims
* Held exploratory meetings with stakeholders to validate upcoming Metavance Enhancements

**UCare, Minneapolis, MN \* April 2011 – October 2011**

Electronic Medical Billing Initiative Meet with the System Architect and the claims processing support group to gain a thorough understanding of the current electronic inbound claims process (837). Once the review was completed I created a process to reformat the incoming claims file to the new 838 (Amisys) format and performed regression testing against the current load process to ensure the new load process was delivering the expected results. This new load process will better position the client for the upcoming ICD10 upgrade.

Consultant/Business Analyst/Programmer

* Provided gap analysis between current and new load process. In addition reviewed and updated the Business and Functional requirements to ensure the required processes would be in place to meet the demands of the updated claims processing architecture and 5010 compliance.
* Described layout of the updated process flow and how the automated process will work. Identified redundant processes and recommended process consolidation where appropriate.
* Working in an Oracle/Cobol/Unix environment created process (stored procedures) to properly reformat the incoming claims file (837 I/P) to the new batch load format (838). Consolidated existing Microfocus Cobol processes and updated existing processes to properly update the newly created (using pl/sql) EDI acknowledgement tables. Reviewed and updated existing Unix scripts to use the new/consolidated processes
* Created historic data feeds for initial loads.  Monitored initial and daily loads to ensure extracts were correct, complete, and loaded successfully.  As required created/responded to reported defects and retested updated processes as required.

**CVS/Caremark, Chicago, IL \* Sept 2008 – April 2011**

Specialty Drug System Analyze and program processes to meet the clients business and regulatory requirements in support of their custom Specialty Drugs (CATS) system running on an Alpha System. These requirements took the form of functional specifications, user requirements and verbal direction.

Health Management Initiative Worked with the corporate data warehouse staff, report developers, reporting users, and off shore development team in creating specialty Rx data mart in enterprise data warehouse(EDW).   Participated in the requirements gathering, development, testing, and deployment phases of the project.

Professional Claim (837) Updated the CATS system to create and transmit medical claims files (837) to payers. In addition the CATS system was updated to receive and process the corresponding acknowledgement files (997/999) received from the providers.

Consultant/Business Analyst/Programmer

* Created record selection criteria, verified field selection, file formats and naming conventions.  Provided subject matter expert guidance on CATS data structures, logic, and data profiling.
* Created sample data feeds for data profiling and test data feeds for development and testing.  Worked with EDW Data Architect and off shore developers to automate data transfer and quality checks.  Provided subject matter expert knowledge to ensure that CATS data was correctly integrated with data from other CVS/Caremark specialty claims system.
* For deployment created historic data feeds for initial loads.  Monitored initial and daily loads to ensure extracts were correct, complete, and loaded successfully.  Worked with off shore resources to verify successful handoff of automated processes to production staff.  Continue to provide post deployment support.
* Reviewed CATS system to identify required database changes required for the creation of the 837 transmittal file. Assisted in design of required data structures and corresponding database change requests. Worked with database administrators to ensure changes and new tables performed as anticipated.
* Coding/Testing Created process to extract required information from the updated CATS system, create required 837 file and transmit file thru secure transport to the payer. Once created worked with business and external payers to ensure file(s) were received and processed without errors. Once completed created process to receive 997 file and updated corresponding records in the CATS system
* Monitored initial and daily transmittals to ensure files were correct, complete, and processed successfully. Worked with business resources to verify successful handoff of automated processes to production staff.

**DST, Harrisburg, PA \* July 2007 – Sept 2008**

AMISYS Conversion Working as a Business Analysis, reviewed/updated business requirements for user conversion to AMISYS Advance version 3.0.

Business Analyst

* These requirements included an EFT process and a conversion of the existing medical claims load (X12 – 4010) to a new proprietary load format(838).

**QVC, West Chester, PA \* Aug 2007 – May 2008**

International Shopping System Analyze and program user requirements to support the International Shopping System for the United Kingdom and Germany. These changes require reviewing user change specifications and making the required modifications using Microfocus Cobol running on a HP9000 (UNIX) system.

Consultant/Business Analyst/Programmer

* As required, performing regression testing on the International Shopping System to confirm the requested changes did not compromise the integrity of the system.

**Educators Mutual, Salt Lake City, UT \* April 2007 – July 2007**

AMISYS Payor System Provide subject matter expertise for the claims adjudication system (Amisys)

Consultant/Business Analyst/Programmer

* Updated and maintained custom membership loads(x12 – 824)
* Created/tested/maintained custom provider loads(x12 – 837)
* Accounts Payable – Created EDI process to automate the processing of payments to Providers. This involved creating an industry standard submission file (ACH B2B) and processing the resulting acknowledgement file.

**AvMeD Health Plan, Miami, FL \* Jan 2005 – Mar 2007**

AMISYS Payor System Analyze and program processes to meet the clients business and regulatory requirements in support of their Amisys(Version 11) system running on the HP3000. These requirements took the form of functional specifications, verbal direction and specifications from various federal/state organizations.

Migration Project Reviewed required changes to support migration from Amisys (Version 11) to Amisys Advance. Converted several processes from legacy system to Amisys Advance ( Version II/III) using the following tools MicroFocus Cobol, Unix Scripting, PL/SQL.

Consultant/Business Analyst/Programmer

* Maintained load processes from EDI process (x12 – 834) to AMISYS system.
* To meet member group requirements served as technical lead on member number conversion. This project entailed converting the member numbers from the member’s social security number to a sequential number.
* Created processes to load government supplied tables into the appropriate Fee Schedule tables in the AMISYS system.
* Responded to business and regulatory requirements related to claims processing. This included the receiving and processing of the ICD9 codes related to the claims.
* Converted existing Legacy processes to utilize PL/SQL. Involved creation of working tables, queries and stored procedures.

**EDUCATION AND ADDITIONAL INFORMATION**

University of New Brunswick Canada

- Bachelor of Science in Computer Science

Data General Framingham Mass.

- Cobol Infos. Interface

- System Users Course

Public Service Commission of Canada

- Structured Analysis and Design

Advanced Education and Labor

- Productivity Plus design

Perot Systems

- Diamond 8.01 Training (Boot Camp)

HP

- Introduction to UNIX