

PROFESSIONAL SUMMARY

Over 7 years of diversified experience as a Business Analyst with in-depth knowledge of Quality Assurance in HealthCare processes:

- Expert in all phases of Requirement Management, including gathering, analyzing, tracking requirements and quality assurance.
- Worked closely with project managers, SMEs, and staff to understand and brief the requirements and specifications for new applications along with re-engineering the existing applications.
- Strong understanding of various SDLC methodologies such as RUP, Waterfall and Agile with hands on experience in all of them.
- Experienced in writing and preparing business requirements documents (BRDs), system requirements specifications (SRS), system design specification (SDS), functional specifications, defining project plan and change request.
- Conducted JAD sessions, Gap analysis, and prioritized requirements using interviews, document analysis, and requirements workshops.
- Experienced in documenting requirement using Unified Modeling Language (Use Case and Activity Diagrams) and building business Process Flow Charts.
- Expert in organizing and managing all phases of the application testing process using Mercury Quality Center.
- Strong understanding of test plans, test cases, test scripts and defects tracking/reporting.
- Extensive knowledge of SQL queries and back end system integration testing.
- Conducted User Acceptance Testing (UAT) and verification of performance, reliability and fault tolerance issues for web based and client/server applications.
- Strong understanding of Functional, Integration, System, and Regression testing.
- Experienced in various Healthcare areas like Enrollment, Benefits, Claims, Medicare, and implementation of HIPAA key EDI (ANSI X12) transactions.
- Involved in HIPAA gateway transactions 997/999 and converting HIPAA 4010 messages into HIPAA 5010.
- Well versed experience in all EDI transactions like 834, 837 P, 835, 27x and conversion of 4010 to 5010.
- Dealt with the complexity of migrating from the ICD-9 set of diagnostic codes to ICD-10.
- Experienced on Medicaid Management Information System (MMIS) and Medicare Part A, B and D products and procedures.
- Excellent communication and writing skills and adept at facilitating walkthrough and training sessions.

TECHNICAL SKILLS

Defect Management Tools:	Quality Center, Rational Clear Quest
Testing Tools:	Quick Test Pro, Load Runner
Operating Systems:	MS Windows NT/98/2000/xP, UNIX
Databases:	Oracle, MS SQL Server, MS Access, DB2
MS Office Tools:	MS Office, MS Project, MS Visio, MS Outlook
Methodologies:	SDLC, RUP, UML, RAD, JAD
Languages:	Java (Basics), SQL, HTML/CSS/XML

Facets Claims Processing System Manual

Terry C. Jones



Facets Claims Processing System Manual:

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