

Muhammad Usman
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Sr. Business Analyst

PROFESSIONAL SUMMARY

- Qualified professional with 8+ years of experience as a Business Analyst in the Healthcare industry.
- Highly experienced in conducting JAD sessions, Brainstorming workshops, JRP sessions, market surveys, and one-on-one interviews with the business stakeholders, SME, end users, and technology team to gather the business needs, goals, and requirements.
- Experienced in gathering and analyzing quantitative & qualitative business data to compile and document BRD, FRD, and SRS/SDS, Use Cases, User Stories, Storyboarding and UAT testing plans.
- Expertise of Tracking, Documenting, Capturing, Managing, and Communicating the Requirements using the RTM which helped in controlling numerous artifacts produced by the teams across the deliverables.
- Highly experienced with all the phases of the project from planning to the implementation stage using SDLC methodologies, i.e., Agile Scrum methodology, Waterfall methodology, RUP, and RAD.
- Expertise in leveraging Asana's task management features to update Agile & Waterfall project methodologies.
- Highly experienced in performing Gap analysis to understand “AS IS” and compare it to “TO BE”, ROI analysis, SWOT analysis, Impact analysis, Feasibility analysis, Cost-benefit analysis, and Risk analysis.
- Highly experienced with crafting and utilizing UML diagrams (Process Flow, Use Case, Sequence, Swim Lane, Data Flow, and Entity-Relationship) to identify actors, map business processes, and support system design.
- Experienced in streamlining project workflows and enhanced team collaboration by effectively implementing project management tools like Jira, Asana, and MS Teams
- Extensive knowledge about the various types of health insurance programs such as Medicaid, Medicare (parts A, B, C, and D), PPO (Preferred Provider Organization), and HMO (Health Maintenance Organization).
- Hands-on experience in using HL7 coding standards in Medicare and Medicaid domains of the healthcare systems and industry for both inpatients and outpatients, Reimbursement methodology.
- Experienced with HIPAA transaction codes such as 270/271, 276/277, 470, 835, 837, and 834 with EDI.

- Experienced in Facets working with Provider Life cycle, Members Enrollment process, Claim processing, and other data models.
- Extensive knowledge and hands-on experience with a wide range of EDI transactions such as 850, 855, 860, 856, 810, 820, 875, and more, enabling seamless communication and data exchange with trading partners.
- Expertise in developing and upgrading EDI maps using Sterling B2B Integrator Map Editor for various transaction types, including 210, 211, 810, 850, 856, 860, and more, ensuring accurate data transformation and integration across different formats such as EDI, XML, and SQL.
- Highly experienced in working with Health and Human Services programs, Medicaid MMIS, Child Welfare, ACA, DHS, CMS, Managed Care, Life, Health Insurance Exchange HIX, Health Information Exchange HIE, HIPAA regulations, Medical Billing, EHR, EMR, EPR, and SHBP.
- Extensive understanding of FACETS and Facets Data Model working on the data model and data extracts.
- Proficient in conducting routing Internal inspections of regulated systems GXP Suite (GMP, GCP, GLP, GAMP4, GAMP5 & GDP) to ensure validation procedures have been followed in compliance with company, divisional, and departmental policies and predicated rules.
- Extensive knowledge about data quality with healthcare measures, preparing Statistical Enrollment data reports, and maintaining the (CHIP/SEDS), and CARTS applications.
- Proficient in leveraging IBM Sterling B2B Integrator to streamline B2B communication processes, ensuring seamless integration and data exchange across diverse partner networks.
- Expertise in developing and implementing mathematical models using IBM ILOG CPLEX to address resource allocation, scheduling, and network optimization challenges, delivering optimized solutions.
- Proficient in utilizing software tools like Rational Rose, PowerPoint, MS Excel, MS Word, and MS Visio, Asana enabling the creation of detailed Business/Data Process Models, Data Mapping, and Data Modeling.
- Highly experienced in defect tracking using Quality Center (QC) and JIRA and reviewed them in subsequent iterations of the application development process.
- Extensive understanding of Data services and data ETL using SQL query tools and applications.
- Proficient in evaluating SQL queries for data extraction, manipulation, analysis, and generating user reports.
- Extensive knowledge of Data warehouse, ETL, data analysis, data migration, data preparation, graphical presentation, statistical analysis, reporting, validation, and documentation.
- Experienced in Business Intelligence (BI) and Reporting technology, data analytics, and KPI to provide patterns, trends, and insights for decision-making.

- Expertise in leveraging HL7 and FHIR standards facilitates interoperability and integration between healthcare systems, enabling smooth data conversion and exchange across disparate platforms.
- Skilled in implementing OCM strategies ensures smooth transitions during healthcare system upgrades or implementations, minimizing disruptions and optimizing staff productivity.
- Proficient in leveraging MHK MarketProminence to analyze market trends and competitive landscapes, enabling data-driven decision-making and strategic planning.
- Highly experienced in the ability to define testing strategies, execute plans, and perform data mapping for efficient and effective testing processes.
- Extensive experience in executing comprehensive manual testing across all phases, including creating test plans, executing test cases, performing data-driven and backend testing, data integrity testing, and UAT.
- Experienced in conducting manual and automated batch testing for various business processes, including ad-hoc testing, integration testing, and retesting, functional testing, regression testing, and sanity testing.
- Excellent communication, presentation, and project management abilities. Strong team player and self-starter, proficient in both independent and collaborative work environments.

PROFESSIONAL EXPERIENCE

Northwell Health - New Hyde Park, NY

May

2022 – Present

Sr. Business Analyst

This project is on the implementation of Facets. It involves deploying a comprehensive healthcare management system. This includes configuring the software, training staff, migrating data, testing, and launching the system. The project goal is to streamline administrative processes, improve billing accuracy, and enhance provider network management for better healthcare service delivery.

Responsibilities:

- Conducted JAD, JRP, Brainstorming workshops, and One-on-one interviews that brought together Business Stakeholders, SME, developers, and end-users to ensure seamless alignment and mutual understanding among all participants, contributing significantly to the successful execution of project objectives.
- Conducted collaborative sessions for documentation of BRD, FRD, and SRS.
- Worked on creating User Stories, Use Case diagrams, Use Case Templates, UML Diagrams, Epics, and process flow diagrams using MS Visio.

- Utilized advanced tools like the RTM to ensure careful monitoring, thorough validation, and proactive communication, guaranteeing alignment with project requirements.
- Implemented SDLC methodologies, particularly Agile (SAFe), and prepared project plans and identified major milestones for each stage, also applied ARTs, PI Planning, and Scrum of scrums.
- Performed Gap analysis to understand “AS IS” and compare it to “TO BE”, ROI analysis, SWOT analysis, Impact analysis, Feasibility analysis, Cost-benefit analysis, and Risk analysis.
- Utilized Asana's reporting and analytics functionalities to track project progress and KPIs.
- Gathered and documented UX/UI (visual) requirements, and functional and non-functional requirements in Business Technical Requirement Document.
- Worked on project documentation defining the process requirements for implementing Facets, the end-to-end testing of FACETS, Claim Processing, payment job, and Subscriber/Member module while also ensuring timely logging and documentation of issues within the running application.
- Worked on different modules of Facets such as commissions, provider, billing, and plan.
- Worked on setting up Fee Definition and Fee Calculation in FACETS for QHP Individuals, Grandfathered/ Transitional Small Groups, QHP Small Groups, and Large Groups.
- Utilized a wide range of EDI transactions including 850, 855, 860, 856, 810, 820, 875, 880, 824, 864, 940, and 945, demonstrating proficiency in managing various stages of the order-to-cash and procure-to-pay cycles.
- Worked on EDI transactions such as 204, 210, 212, 214, 300, 304, 310, 315, 410, 810, 850, 855, 856, and 997, ensuring meticulous handling of transportation, logistics, and financial data exchange processes.
- Involved in entering Professional, Institutional, and Dental claims manually into Facets.
- Involved in managing FACETS Data tables, generating audit reports via queries, and manually loading data.
- Conducted extensive analysis on migration and conversion of Provider and Member data, Group configurations, plan codes, benefit set-ups, provider pricing, and capitation set-ups.
- Worked with the Development team to deal with 834-import member's lookup processes and resolved issues with member attributes, enabling multiple rules associated with the member lookup process in FACETS.
- Configured and customized IBM Sterling B2B Integrator to meet specific business requirements, including mapping data formats, defining trading partner profiles, and implementing secure file transfer protocols.
- Worked with tools such as Rational Suite of Tools, Azure, UML, MS Visio/Project/Office, and Access.
- Involved in utilizing Power BI to publish reports and dashboards, creating rich analytical visuals for business executives to facilitate informed decision-making.

- Leveraged IBM ILOG CPLEX's advanced algorithms and optimization techniques to solve large-scale optimization problems efficiently, reducing computational time and improving decision-making processes.
- Involved in utilizing facets, .Net, and SQL Server to manage requests, troubleshoot development tool and quote-related issues, and create SQL queries for resolving complex reports.
- Involved in using SQL to test various reports and ETL load jobs in development, QA, and production.
- Involved in validating the result using PL SQL in Oracle SQL Developer and TOAD.
- Worked with the requirement documentation used for Data Extraction, Data Transformation, and Loading processes as a part of data mapping procedures.
- Utilized MHK MarketProminence to track KPIs and benchmark performance against industry peers, identifying opportunities for growth and improvement.
- Integrated EHR with MMIS optimizes billing processes, reduces administrative overhead, and minimizes errors in medical coding, enhancing revenue cycle management and financial sustainability.
- Worked on performing data mapping, and logical data modeling, and created class diagrams using SQL.
- Worked with JIRA bug tracking tool to analyze & capture bugs, track and manage dashboard any type of updates for project release.
- Utilized ETL (Extract, Transform, Load) tools streamlines the data conversion of legacy data formats into standardized EHR systems, improving data accessibility and analysis capabilities.
- Involved in testing implemented systems and system changes including liaising with QA teams to develop test cases, test plans, test scenarios, and generating test data, and conducting manual testing.
- Worked closely with QA teams to define Test Cases and execute Test Plans.
- Worked with User Acceptance Testing of Systems (UAT) in developing and maintaining quality procedures, and ensuring that appropriate documentation is in place.
- Involved actively facilitating the complete UAT process – Creating UAT schedules, testing guidelines, managing feedback, follow-up, and resolving open issues.

Celtic Healthcare Inc. – Mars, PA

February

2020 – April 2022

Sr. Business Analyst

This project involves implementing EMR and EHR systems. It includes assessing needs, selecting a vendor, customizing the system, training staff, migrating data, testing, and launching the system. The project goal is to modernize record keeping, improve communication, and enhance patient care.

Responsibilities:

- Conducted JAD/JRP, and Brainstorming workshops, that brought together Business Stakeholders, SME, developers, and end-users to ensure seamless alignment and mutual understanding.
- Involved in utilizing advanced tools such as the RTM to ensure projects met specifications and stakeholder needs through careful monitoring.
- Worked on applying agile (Scrum) methodology within the Software Development Life Cycle (SDLC).
- Involved in comprehensive Gap analysis to assess the current state (AS-IS) and compare it to the desired future state (TO-BE).
- Worked on conducting collaborative sessions to document BRD and FRD, and created User Stories, Use Case diagrams, Use Case Templates, UML Diagrams, Epics, and process flow diagrams.
- Employed Asana's automation features to optimize workflow processes and increase team efficiency.
- Worked closely with stakeholders to gather and meticulously document a comprehensive range of UX/UI (visual) requirements, ensuring they align with user needs and preferences.
- Involved in organizing and managing daily scrum meetings, ensuring active participation from Business Stakeholders, Product Owner, and Scrum Master, to oversee project requirements throughout each sprint.
- Worked closely with the cross-functional teams to develop implementation guidelines and principles for practice-based clinical applications, encompassing various practice management, EMR, and EHR systems, and implemented change control policies and procedures for managing EMR template change requests.
- Involved in EPIC Medical software application (EMR, EHR) within hospital workflows and infrastructure setup for software implementation in clinic environments, currently leading and coordinating the iHelix Suite (EMR/EHR) implementation to achieve meaningful use stage 1.
- Worked as a liaison between software developers and users of EMR, and EHR systems to create better electronic medical records and electronic health record systems.
- Involved in designing and preparing application requirements and specifications for Celtic's EMR & HER.
- Used Sterling B2B Integrator Map Editor, adept at developing maps for EDI, positional, variable-length-delimited, XML, and SQL data formats, including the development of maps for transactions like 210, 211, 810, 812, 820, 824, 830, 850, 852, 855, 856, 860, 864, 875, 880, and 997.
- Incorporated OCM methodologies into clinical workflow redesign initiatives improves staff readiness and acceptance of new processes, leading to enhanced patient care delivery and operational efficiency.

- Communicated with trading partners to gather integration requirements, ensuring smooth collaboration and alignment of EDI processes with partner specifications and standards.
- Lead end-to-end integration utilizing IBM Sterling B2B Integrator, from initial scoping and requirements gathering to solution design, implementation, and deployment, ensuring successful outcomes.
- Worked on steps required to facilitate extraction of data from partner EMR and third party data vendors.
- Worked with healthcare providers and Cerner to support the validation of clinical EMR & EHR data.
- Worked on the Patient Management System is intended to remotely communicate with a compatible pulse generator from BSC CRM and transfer data to a central database (HIT EHR).
- Leveraged EHR functionalities such as clinical decision support systems and electronic prescribing improves medication management MMIS, enhances patient safety, and reduces medication errors, leading to better quality of care and regulatory compliance.
- Performed Defect Tracking and Change Control Procedures using Rational Clear Quest and Configuration Management and Version Control using Rational Clear Case, JIRA, and Quality Center.
- Integrated MHK MarketProminence with other data sources and business intelligence tools to enrich analysis and provide comprehensive insights into market dynamics and customer behavior.
- Worked with tools such as Rational Rose, UML, MS Visio, MS Project, MS Office, and MS Access.
- Integrated IBM ILOG CPLEX with existing systems and applications, such as ERP and SCM software, to automate decision-making processes and enhance overall system performance.
- Involved in creating and modifying SQL reporting services reports for use inside and outside Dynamics CRM.
- Involved in designing and implementing SQL Queries using joins, unions, outer joins, group by, and aggregate functions to extract data from databases (Oracle, SQL Server) for timely reporting and validation.
- Implemented data mapping techniques ensures accurate translation of clinical terminology and coding standards during the conversion process, enhancing data consistency and quality.
- Worked with managers in project planning and deliverables, requirements breakdown for testability, writing test plans for a high-level view of test script coverage and test execution cost estimates and test personnel numbers for meeting timelines, and also issued testing status reports and chair defect meetings.
- Worked with User Acceptance Testing of Systems (UAT) in developing and maintaining quality procedures, and ensuring that appropriate documentation is in place.

- Involved actively facilitating the complete UAT process – Creating UAT schedules, testing guidelines, managing feedback, follow-up, and resolving open issues.
- Conducted a daily review to assess testing progress, escalate any testing issues, and manage any technical decisions between development and management.

Coventry Health Care – Bethesda, MD

April 2018

– January 2020

Business Analyst

The primary goal of this project was to successfully implement and integrate the Medicare & Medicaid programs with the HIPAA and EDI transactions. This integration encompasses a comprehensive range of transaction sets, including the 835 for healthcare payment and remittance advice, 837 (P, D, I) for healthcare claims submissions, as well as the 276, 277, and 278 for healthcare eligibility, claim status, and prior authorization requests.

Responsibilities:

- Involved in conducting collaborative sessions such as Brainstorming workshops, JAD, and JRP sessions to gather the requirements.
- Involved in performing GAP analysis to understand the current “AS-IS” and compare it to “TO-BE”, and perform Impact, Feasibility, and ROI for facilitating informed decision-making and solution design.
- Worked on creating BRDs, FRDs, & SRS/SDS to capture the system functionalities, & project scope accurately.
- Involved in conducting individual consultations to gather comprehensive insights and ensure alignment between project objectives.
- Worked on utilizing the Requirement Traceability Matrix (RTM) to track and manage project requirements.
- Involved in implementing agile methodologies throughout the SDLC, fostering iterative development, continuous feedback, and adaptability to evolving requirements.
- Ensured adherence to data governance and security protocols within Asana for confidential project information.
- Created clear Use Cases and User Stories by utilizing JIRA to capture system requirements effectively.
- Involved in generating UML diagrams like process flow diagrams and swim lane diagrams to visualize system architecture and processes.

- Applied OCM principles to telemedicine program implementations fosters staff acceptance and patient adoption, promoting access to care and improving health outcomes in remote or underserved areas.
- Worked on the implementation of Medicare & Medicaid systems and its seamless integration with HIPAA EDI transactions 835, 837, 276, 277, and 278, ensuring meticulous oversight and adherence to industry standards.
- Involved in configuring EDI transactions 835, 837, 276, 277, and 278, aligning them with Medicare & Medicaid system data requirements and standards to ensure accurate data transmission and processing.
- Worked on ensuring adherence to HIPAA regulations for EDI transactions, maintaining compliance with data privacy protocols & transaction set requirements to safeguard healthcare data integrity & confidentiality.
- Involved in developing and executing comprehensive implementation plans delineating the strategic steps and timelines for integrating each HIPAA EDI transaction type with the Medicare & Medicaid systems.
- Worked on the monitoring and optimization of integrated systems and processes for each HIPAA EDI transaction type, proactively identifying and addressing any performance issues or bottlenecks.
- Worked on improving initiatives for B2B integration processes, leveraging IBM Sterling B2B Integrator's monitoring & analytics capabilities to optimize performance, and enhance overall operational effectiveness.
- Involved in aligning and collaborating across various functional teams including IT, operations, compliance, and legal departments to ensure cohesive integration efforts and seamless coordination of activities related to HIPAA EDI transactions 835, 837, 276, 277, and 278 with Medicare & Medicaid systems.
- Created test scenarios and developed test data to test EDI maps, ensuring accuracy and reliability in data transmission and processing for transactions like 850, 810, 855, and 856.
- Involved in leveraging Power BI to design and deploy reports and dashboards to facilitate data-driven decision-making processes.
- Collaborated with stakeholders to develop custom reports & dashboards in MHK MarketProminence, delivering actionable insights to sales, marketing, and product development teams.
- Involved in conducting thorough data conversion and validation and reconciliation procedures mitigates risks associated with data loss or corruption, ensuring completeness and accuracy of converted healthcare data.
- Involved in utilizing .Net, and SQL Server to oversee requests, troubleshoot issues with development tools and queries, and formulate SQL queries for resolving intricate report-related challenges.

- Worked on SQL to conduct testing on a variety of reports and ETL load tasks across development, quality assurance, and production environments.
- Enhanced interoperability between EHR and MMIS enables seamless data exchange and communication among healthcare providers, payers, and regulatory agencies, facilitating population health management and public health reporting initiatives.
- Provided training and support to stakeholders on IBM ILOG CPLEX usage and best practices, enabling them to leverage the software for solving optimization problems and achieving business goals.
- Involved in validating outcomes using PL SQL within Oracle SQL Developer and TOAD, ensuring data integrity and accuracy throughout the validation process.
- Worked on requirement documentation utilized for Data Extraction, Data Transformation, and Loading procedures, contributing to comprehensive data mapping strategies.
- Utilized testing tools like Test Director and JIRA to execute various software testing methodologies, including UAT, Performance, Load, Stress, Functionality, Regression, Sanity, Parallel, Positive, and Negative Testing.
- Worked in tandem with QA teams to define Test Cases and oversee the execution of Test Plans.
- Participated in UAT by contributing to quality procedures and ensuring the availability of necessary documentation for system development and maintenance.

Quest Diagnostics – Secaucus, NJ

January

2017 – March 2018

Business Analyst

To project scope was to spearhead the implementation of the CHIP, aimed at expanding access to affordable and comprehensive healthcare coverage for eligible children and families while ensuring compliance with federal regulations and fostering improved health outcomes within the community.

Responsibilities:

- Facilitated collaborative sessions like JAD, Brainstorming workshops, and JRP to align stakeholders and enhance project understanding.
- Involved in creating BRD, Functional Requirements Documents (FRD), and SRS, along with User Stories.
- Involved in utilizing the RTM to ensure project compliance.
- Involved in performing analyses including ROI, Risk, and GAP (AS-IS & TO-BE) for informed decision-making.

- Worked with the cross-functional team to adopt the SDLC methodology (Waterfall), ensuring sequential phases like requirements gathering, design, implementation, testing, and deployment.
- Involved in ensuring the seamless integration of CHIP within existing healthcare policies and systems, aligning program objectives with federal guidelines to optimize coverage and care delivery for eligible personal.
- Collaborated with healthcare providers to expand and contract the CHIP provider network, fostering partnerships to improve access to essential healthcare services, specialists, and pediatric care.
- Facilitated the team to led outreach campaigns to educate communities about CHIP eligibility and benefits, oversee enrollment processes, and verify eligibility status for efficient beneficiary enrollment.
- Involved in integrating OCM practices into healthcare quality improvement initiatives promotes a culture of continuous improvement, empowering staff to embrace change and drive positive patient experiences.
- Collaborated with state healthcare authorities and providers to integrate CHIP into the current healthcare system, optimizing coordination, data sharing, and interoperability for beneficiary benefits.
- Worked heavily on SQL Server database to extract data and build Business reports.
- Reviewed Stored Procedures for reports and wrote test queries against the source system SQL Server to match the results with the actual report against the Data mart Oracle.
- Involved in implementing robust security measures in EHR and MMIS systems ensures protection of sensitive patient information, compliance with HIPAA regulations, and mitigation of cybersecurity risks, safeguarding patient privacy and confidentiality.
- Worked with the development team on Data Requirement Analysis and Data Mapping for the ETL process.
- Facilitated the QA teams to create thorough test plans, and test cases aligning them with business requirements and regulatory standards for comprehensive testing coverage.
- Involved in aligning test cases with business needs & defined acceptance criteria for successful outcomes.
- Facilitated in coordinating UAT activities, acting as a bridge between business users and development teams.

Zynx Health – Los Angeles, CA

September 2015 –

December 2016

Business Analyst

The project scope was to implement the SHBP, emphasizing thorough process composition for comprehensive health coverage. It prioritized adherence to state regulations while promoting equitable access to high-quality healthcare services.

Responsibilities:

- Facilitated collaborative sessions such as Joint Application Development (JAD) and Joint Requirement Planning (JRP), ensuring alignment among stakeholders to enhance project goal achievement.
- Worked with the team in documenting various requirement artifacts including BRD, and FRD ensuring clarity and alignment with project objectives.
- Participated in conducting analyses such as Gap (AS-IS & TO-BE) for decision-making.
- Involved with the Sr. Business Analyst to apply the Waterfall methodology throughout the SDLC.
- Worked with the team in actively contributing to continuous improvement initiatives by providing feedback, proposing process enhancements, and sharing lessons learned to optimize project outcomes.
- Participated in ensuring strict adherence to state health regulations and guidelines throughout the implementation of the SHBP, mitigating legal risks and ensuring program legitimacy.
- Facilitated seamless collaboration between state health authorities, insurance providers, and stakeholders to integrate SHBP into existing healthcare systems, optimizing participant engagement.
- Supported enrollment procedures and participant outreach efforts for SHBP, ensuring smooth onboarding of eligible individuals and providing assistance to navigate enrollment processes and understand plan benefits.
- Participated with the cross-functional team to help with Data extraction and Data conversion using ETL tools from the application front-end with Oracle databases and validating the ETL processes
- Involved in checking the consistency of the data after the ETL process using SQL queries.
- Involved with the UAT team with resources and guidelines for effective testing aligned with business needs.
- Worked with the QA team, promoting continuous improvement and efficient testing practices.

Education: Bachelor's in Business Administration, University of the Punjab, Lahore Pakistan, 2012