**Navya Sri Kilaru**

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**Summary:**

* 9 years of hands-on experience as Healthcare Data Analyst with proficiency in gathering business requirements, Gap analysis, data quality assessment and ETL testing in the healthcare region.
* Strong knowledge of EDI Claims, member enrollment, Provider data, and billing transactions.
* Understanding of HIPAA Standards and Compliance issues, HIPAA Privacy policy, opt in/opt out policy.
* Requirements gathering in compliance with HIPAA 4010 and 5010 standards.
* Exposed to Medicare and Medicaid domains of the healthcare systems and industry for inpatients, outpatients, Reimbursement Methodology.
* Proficient in Working on different EDI healthcare transactions like 837-Institutional, 837-Professional, 837-Dental, 835-Claim Payment/Remittance Advise, 270/271-Eligibility Benefit Inquiry/Response, 276/277-Claim Inquiry/Response Transactions.
* Strong understanding of healthcare data standards and regulations, ensuring compliance with HIPAA and HITECH.
* Extensive experience in data analysis, specializing in leveraging Athena for Electronic Health Records (EHR) data Analysis.
* Worked with the Pharmacy department for managing and maintaining NDC Rx codes in the department database and data source.
* In-depth understanding of regulatory requirements, ICH/GCP guidelines, and the clinical drug development process, ensuring compliance and quality in data management activities.
* Strong understanding of configuring QNXT and FACETS for Medical Policies, Provider Contracts, Medical Coding in ICD 9 and ICD 10, Medicaid, and Medicare Services.
* Experience in validating the EDI transactions such as EDI 835, EDI837, EDI834, EDI276, EDI277, EDI270, EDI271 between the provider and Medicare, and or Medicaid entities to verify patient’s eligibility and benefits to enhance the accuracy of insurance coverage information.
* Experienced in maintaining data pipelines using AWS glue and GCP data flow to automate the ETL process from legacy systems to cloud platforms.
* Performed Data analysis and Data profiling using complex SQL on various sources systems including Oracle and Terradata.
* Strong programming skills in Python, able to develop and automate data analysis workflows, build predictive models, and create visualizations using popular libraries like pandas, NumPy, and matplotlib.
* Experienced in implementing data governance policies, managing data assets, and ensuring data quality and compliance with standards such as GDPR and CCPA.
* Expertise in SQL including the ability to write complex queries SQL table joins, DDL, DML, PIVOTS views, constraints, and functions to SQL server.
* Proficient in generating visual dashboards and reports to communicate insights to healthcare providers, payers, and regulatory agencies, utilizing visualization tools such as Tableau and Power BI.
* Experience with Amazon EC2, Amazon S3, Amazon RDS, VPC, IAM, Amazon Elastic Load Balancing, Auto Scaling, Cloud Front, CloudWatch, RedShift, SNS, SES, SQS and other services of the AWS family.
* Experienced in working with spark eco system using Spark SQL and Scala queries on different formats like Text file, Avro Parquet files.
* I have experience in various databases such as MySQL, SQL, DB2, Oracle, NoSQL- MongoDB, Cassandra, Dynamo DB, Red Shift, HBase.
* Hands on experience in Sqoop to migrate data between RDBMS, NoSQL databases and HDFS.
* Experienced in managing Hadoop clusters and services using Cloudera Manager.
* Experience in application development using Java, RDBMS, TALEND and Linux shell scripting and DB2.
* Experienced in creating and delivering essential data management documentation, such as eCRFs, CCGs, DMPs, and Data Transfer Specifications, while maintaining proper documentation within the Trial Management File (TMF).
* Proficient in Electronic Data Capture (EDC) platforms such as Rhapsody, ensuring efficient data capture and management processes.
* Expertise in EDC platforms such as Rave or InForm, including experience in overseeing EDC builds, migrations, and ensuring data integrity during data collection activities.
* Proficiency in SAS for data analysis and reporting, complementing strong Excel skills for data management tasks.
* In-depth understanding of regulatory requirements, ICH/GCP guidelines, and the clinical drug development process, ensuring compliance and quality in data management activities.
* Expert knowledge of Software Development Life Cycle (SDLC) and have hands on experience in all phases.
* Expertise in EDC platforms such as Rave or InForm, including experience in overseeing EDC builds, migrations, and ensuring data integrity during data collection activities.

**Technical skills:**

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| Programming | Java, JavaScript, Python, SQL, |
| BI Tools | Tableau, Informatica, PowerBI, SAS |
| Big Data Ecosystem |  MapReduce, HDFS, HBase, Spark, Scala, Hadoop, Zookeeper, Hive, Pig, Sqoop Cassandra, Oozie, MongoDB, Flume, Apache Spark, Kafka Cloudera,  |
| Healthcare Tools and Modules | FACETS, McKesson, QNXT configuration, Billing, Claims processing and submission,  |
| EDI transactions | EDI 835, EDI837, EDI834, EDI276, EDI277, EDI270, EDI271 |
| Healthcare Standards and Security | HIPAA 4010,5010 HL7, FHIR, ICD9,10, HL7 v2.x,  HL7 C-CDA,  |
| Healthcare Claims and Payers | FACETS, QNXT. |
| Operating systems | Windows, Linux, Mac OS |
| Databases | Oracle, MongoDB, MS SQL Server, MySQL, Redis, PostgreSQL, Neo4j,  |
| Methodologies  | Agile, UML, Waterfall, Scrum Kanban. |

**Certification & Education**

* AAPC Certified Professional Medical Coder-01546889 2017
* APPC Certified Registered Pharmacist-121038 2017
* Google Data Analyst Professional Certificate
* Master’s in Health Informatics, Sacred Heart University, Fairfield, CT.
* Bachelor’s in Pharmacy, KVSR Siddhartha College of Pharmaceutical Sciences, Vijayawada, India. 2015

**Professional Experience**

**Banner Health, Remote Feb/23 – Current**

**Sr. Healthcare Data Analyst**

**Responsibilities:**

* Spearheaded data analytics initiatives across clinical, financial, and operational domains, utilizing extensive expertise in advanced statistical analysis, machine learning models, and predictive analytics to drive data-informed decision-making and enhance patient outcomes.
* Designed, developed, and implemented large-scale data models to analyze key performance indicators (KPIs) across Banner Health’s diverse healthcare operations, uncovering opportunities for operational efficiency, cost reduction, and patient care improvements.
* Collaborated extensively with senior leadership, physicians, and cross-functional teams to provide strategic insights derived from complex data sets, including Electronic Health Records (EHR), financial data, and operational metrics, ensuring alignment with business objectives.
* Applied SQL, Python, R, and SAS to perform deep-dive analyses of healthcare trends, identifying actionable insights for process optimization and cost containment while improving quality of care and enhancing profitability.
* Led the creation and optimization of highly interactive Tableau and Power BI dashboards, transforming raw data into visually compelling, real-time reports that allowed executives, clinicians, and administrators to make data-driven decisions rapidly.
* Leveraged advanced predictive modeling techniques to forecast patient admission rates, optimize staffing levels, and anticipate resource needs, resulting in more efficient healthcare delivery and reduced operational costs.
* Directed the analysis of large, complex datasets, identifying patterns in patient outcomes and operational performance, providing high-impact recommendations that drove improvements in care delivery, resource allocation, and patient satisfaction metrics.
* Acted as a key liaison between clinical and IT teams, integrating clinical data from multiple sources into cohesive analytics projects, ensuring data integrity, accuracy, and compliance with healthcare regulations such as HIPAA.
* Delivered mentorship and training to junior analysts and cross-departmental teams, guiding them on advanced analytical techniques, data governance, and healthcare-specific data modeling, improving team capacity and project completion rates by 25%.
* Initiated and managed high-impact projects aimed at reducing hospital readmission rates, improving patient throughput, and optimizing the utilization of clinical resources, leveraging data to support organizational goals and enhance operational efficiency.
* Provided leadership in budgeting and cost control efforts for complex analytics projects, overseeing project timelines and deliverables while ensuring adherence to Banner Health’s financial guidelines and strategic objectives.
* Developed customized reports for monitoring key performance indicators (KPIs) related to drug efficacy, safety profiles, and patient outcomes, providing actionable insights for clinical and business teams.
* Provided business intelligence support by analyzing market trends, competitor data, and patient demographics, enabling informed strategic decisions and market positioning strategies.
* Conducted sensitivity analysis, scenario modeling, and Monte Carlo simulations for risk assessment and resource optimization, identifying potential areas for improvement and mitigation strategies.
* Ensured compliance with data privacy regulations and industry standards for data governance and security, implementing measures to safeguard sensitive information and mitigate data breaches.
* Collaborated with cross-functional teams to align data management with study objectives.
* Collaborated with cross-functional teams to define data requirements and align initiatives with business objectives, ensuring the relevance and effectiveness of data analytics solutions.
* Developed visually appealing and insightful reports and dashboards using Power BI and Tableau for data visualization and analysis.
* Utilized JIRA project management tool to track project progress, document issues and provided regular status updates to project team.

**Environment:** Clinical trials, EHR, regulatory filings, Tableau, Power BI, statistical models, machine learning algorithms, JIRA, FDA approvals, data governance, NLP, deep learning, Monte Carlo simulations, AI/ML, healthcare data sets, Python, R programming, TensorFlow, PyTorch, scikit-learn, Natural Language Toolkit (NLTK), Apache Spark, Hadoop, SQL, NoSQL databases, data visualization techniques Agile, KPI, Waterfall, S3, SAS, ETL, Informatica, snowflake schema, SQL server, power BI, tableau, UAT, JIRA.

**Sutherland (Aria Health, Temple, university hospital), India Jan/18– Jul/22**

**Healthcare Data Analyst (Claims)**

**Responsibilities:**

* Worked closely with healthcare providers and IT teams to ensure compliance with healthcare regulations, including Medicare and Medicaid throughout the data warehousing life-cycle.
* conducted regular audits and assessments of data assets, ensuring ongoing alignment with evolving data governance standards and industry best practices.
* Utilized expertise in HL7 and FHIR standards to extract, transform, and analyze healthcare data from diverse sources, including electronic health records (EHR), claims systems, and clinical databases.
* Implemented HL7 interfaces for exchanging healthcare data, encompassing admission/discharge/transfer (ADT), orders and results (ORU, ORM), clinical documents (CCD, CDA), and medical imaging (DICOM)
* Developed complex SQL queries to extract, transform, analyze healthcare data, ensuring data integrity and accuracy by identifying and resolving data inconsistencies, missing values, and outliers using SQL procedures and triggers.
* Performed ad-hoc data analysis to support strategic decision-making processes, providing insights on cost-saving initiatives, reimbursement optimization, and budget forecasting.
* Developed Tableau dashboards and reports to monitor and track the progress of data migration activities, providing stakeholders with real-time insights into the migration process.
* Worked in Network Development and Claims department conducting program operations, systems support and configuration, payment validation, claims adjudication, COB methodologies as per DMAS contract for Skilled Nursing Facilities-Part A and Part B, ARTS/CMHRS/EI population analysis, Claims Paid Denied Pend trends, dashboards, reports and quality audits and continuous improvement projects, vendor implementation and supporting leadership, mentoring.
* Utilized claims data insights to support quality improvement initiatives, enhancing the overall effectiveness of healthcare services.
* Designed and executed data transformation strategies to convert raw healthcare data into a standardized format, facilitating seamless integration and analysis.
* Analyzed and resolved high volume data issues by doing research and gathering data from multiple data sources like MIDAS, EDBO and Federal HICS portal.
* Helped in understanding data elements for data warehousing exercise by doing dimensional modeling
* Experienced working with Informatica to streamline data processing and improve accuracy.
* Conducted User Acceptance Testing (UAT) with quality assurance (QA) team to ensure the system’s functionality has met the user needs and quality standards.
* Utilized Tableau's data blending and aggregation capabilities to integrate data from multiple sources, such as electronic health records (EHRs), laboratory systems, and clinical research databases, for comprehensive analysis.
* Played a key role in the development and maintenance of testing documentation, ensuring clear and organized records of system testing activities and outcomes.

**Environment:** EHR, HL7, FHIR, EDI, CCD, CCA, DICOM, COB methodologies, UAT, Agile, Waterfall, SAS, Informatica, Snowflake schema, JIRA, ETL, SQL server, power BI, tableau.

**Reventics, India May/15 – Dec/17**

**Healthcare Data Analyst (Claims)**

**Responsibilities:**

* Conducted thorough audits of Medicare claims, identifying coding errors and discrepancies, resulting in a 15% increase in accuracy rates and a reduction of billing discrepancies by 20%
* Analyzed Medicare claims data, performing trend analysis and forecasting to support strategic business initiatives aimed at optimizing reimbursement processes.
* Used JIRA and ALM Quality Center as defect tracking tools.
* Worked closely on 837 I/P transaction code for Health care claims and was involved in Validation of HIPAA for 270/271(health care benefits and eligibility), 276/277(Claims Status),835(Payment/Remittance advice), 834(Benefits Enrollment) EDI transactions.
* Worked on Medicare/Medicaid claims processing in compliance with government compliant processes such as HIPAA/ EDI formats and accredited standards.
* Worked and supported EDI Translators to analyze EDI files submission for Professional, Inpatient, Outpatient, pharmacy claims and dental claims Errors with codes.
* Involved in the full HIPAA compliance lifecycle from GAP analysis, mapping, implementation, and testing for processing of Medicaid Claims.
* Worked on EDI transactions: 835, and 837 P.I to identify key data set elements for designated record set. Interacted with Claims, Payments and Enrollment hence analyzing and documenting related business processes.
* Worked on HIPAA Electronic Data Interchange (EDI)Transactions, HIPAA X.12, 837 medical claims, 835 Electronic remittances 270/271Elegibility inquiry and response.
* Responsible for ensuring HIPAA EDI Trading Partner transactions meet established standards and can be transmitted and processed.
* Developed HL7 messaging for bi-directional case and disease report exchange, in HTML and XML formats, in accordance with HL7 specifications.

**Environment:** JIRA, ALM Quality Center, EDI 835,837, HIPAA X.12,837, HL7, HTML,XML, Informatica, SQL, Medicaid, Agile, Waterfall, Medical claims.