Birzeit University

Department of Computer Science

COMP433: SOFTWARE ENGINEERING

Business Definition

Health insurance

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1.   Business Overview

The business provides a platform to buy health insurance plans with different levels of coverage across different hospitals. Customers can browse the available insurance options, compare coverage levels, and included services, and select the plan that best fits their needs.

2.   Services Offered

- **Insurance Plan Browsing:** Users can browse a wide range of health insurance plans with different coverage levels for individuals and plans for companies.
- **Coverage Comparison Tool:** The system allows users to compare multiple insurance plans based on features, so they can clearly understand differences in coverage, pricing, and included services.
- **Simple Policy Enrollment:** Once users find a suitable plan, they can complete the enrollment process online by providing the necessary personal information.
- **Add-on and Upgrade Options:** Users may enhance their insurance plan with optional add-on coverage, such as dental, or others depending on their needs.
- **Customer Support and Inquiry Handling:** online support assist users with questions regarding coverage details, hospital availability, policy terms.
- **Digital Document Management:** The platform provides digital access to policy documents, receipts, coverage summaries, and renewal notifications.
- **Flexible Payment methods:** Users can pay for their selected insurance plan using supported online payment methods such as visa card, bank transfer.
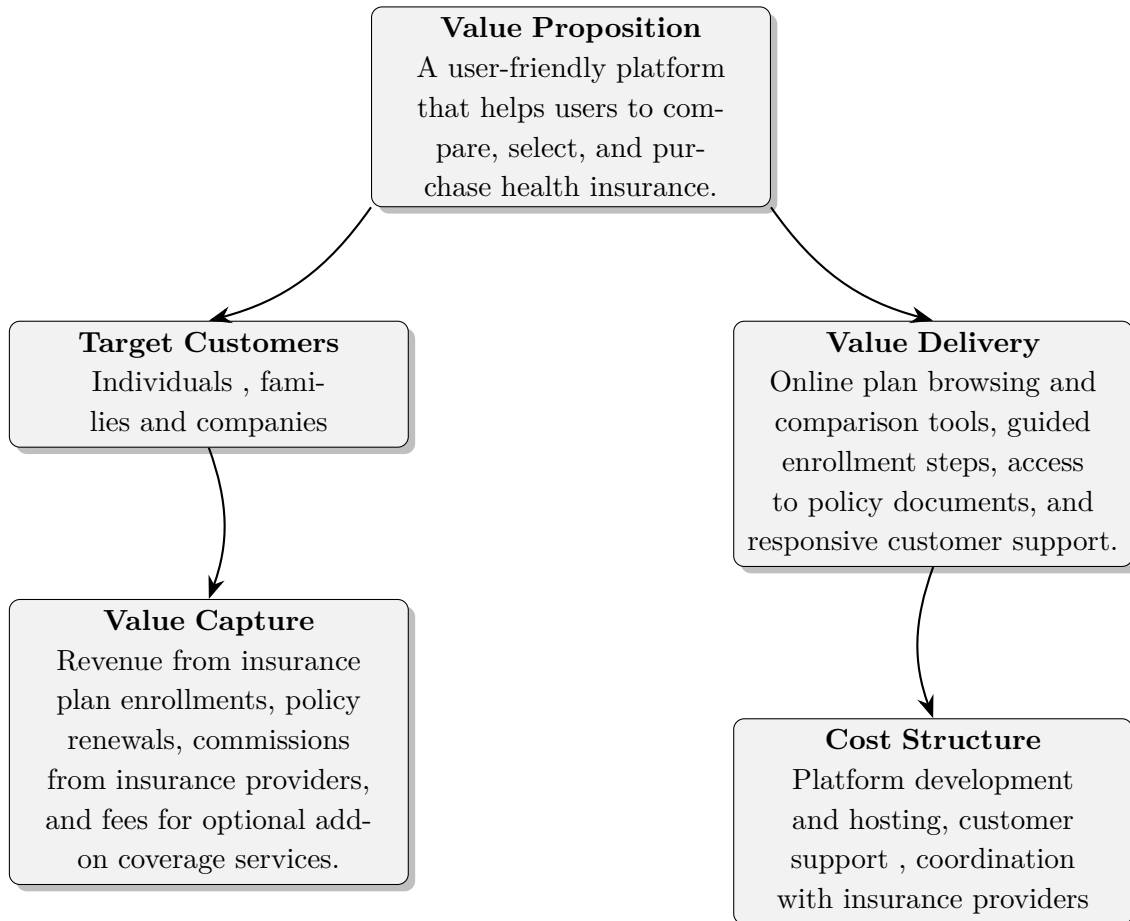
3.   Usage and Operations

- **Monthly Platform Activity:** The platform is expected to attract between 200 and 400 users each month. During busy periods as the start of the year or renewal seasons usage may rise, reaching up to 1000 users in a peak month.
- **Available Insurance Plans:** Users will be able to browse a selection of around 7 to 10 health insurance plans, each offering different coverage levels, hospital options, and add-on benefits to meet a wide range of needs.
- **Support and Operating Hours:** Customer support will be 24 hours daily, ensuring that users can receive help with browsing plans, understanding coverage, or completing their enrollment whenever needed.

4. Business Processes

- **Plan Browsing and Selection:** Users visit the platform to explore available health insurance plans. They can compare coverage levels, hospital networks, and costs before choosing the plan that best fits their needs.
- **Policy Enrollment Process:** After selecting a plan, users provide the required personal and medical information. The system guides them through the enrollment steps, and once submitted, the application is reviewed and forwarded for approval.
- **Add-on Coverage Management:** If users want additional benefits—such as dental, the platform allows them to request and apply these add-ons during or after enrollment.
- **Verification and Coordination Process:** Submitted applications are verified, documents are reviewed, and information is coordinated with insurance providers.
- **Customer Support and Inquiry Handling:** Support staff assist users with questions about coverage, plan differences, pricing, hospital options, or enrollment.
- **Policy Management and Updates:** Users can access their policy documents, view coverage details, manage renewals, request changes, or update personal information through the platform.

5. Business Model Overview

Value Proposition
A user-friendly platform that helps users to compare, select, and purchase health insurance.

Target Customers
Individuals , families and companies

Value Delivery
Online plan browsing and comparison tools, guided enrollment steps, access to policy documents, and responsive customer support.

Value Capture
Revenue from insurance plan enrollments, policy renewals, commissions from insurance providers, and fees for optional add-on coverage services.

Cost Structure
Platform development and hosting, customer support , coordination with insurance providers

6.   Employees & Roles

The health insurance platform is expected to begin operations with a team of 10–14 employees.

Role	Responsibilities
Business Owner / General Manager	Defines the overall vision and strategy of the platform, oversees partnerships with insurance providers, manages policies and pricing agreement.
Insurance & Provider Relations Manager	Builds and maintains relationships with insurance companies, negotiates coverage options, ensures plan details are accurate and up-to-date, and coordinates policy approvals.
Customer Support Agents (2–3 employees)	Assist users with plan information, enrollment steps, account issues, and general inquiries. Provide clear explanations of coverage, benefits, and policy terms.
Enrollment Processing Officers (2–3 employees)	Review submitted applications, verify documents, coordinate with insurers, and ensure policies are activated accurately and on time.
System Administrator	Maintains the platform's technical infrastructure, manages system updates.
Accountant	Manages financial transactions, tracks revenues and expenses, prepares financial reports.