

“Il semble que la perfection soit atteinte non quand il n’y a plus rien à ajouter, mais quand il n’y a plus rien à retrancher”

- Antoine de Saint-Exupéry

AAOS Project for ACME Insurance Solutions

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Executive Overview

The report encompasses detailed analyses of the business domain, including the healthcare industry landscape and the specific challenges faced by ACME Health Insurance. It delves into the client's requirements and the proposed solution, emphasizing the need for a streamlined and automated system to enhance time efficiency and resource utilization.

Key highlights include:

- Description of the Business Domain: Insight into the healthcare industry's dynamics, regulatory framework, and competitive landscape.
- Client Profile: Overview of ACME Health Insurance's operations and the target users' computer skills.
- Business Problem: Identification of the manual claim's submission process as a bottleneck and the rationale behind the web application solution.
- Open Questions: Exploration of critical areas requiring further clarification, such as claim eligibility verification and client contract management.
- Questionnaire: Formalized queries designed to gather essential information for addressing open questions and guiding the project forward.

Description of the Business Domain

ACME Insurance Solutions is part of the Canadian life and health insurance industry. In 2022 the industry provided coverage for 29 million Canadians and collected 145 billion dollars (about \$450 per person in the US) in premiums, paying out 114 billion dollars (about \$350 per person in the US) in benefits.

Description of the Business Environment

In the competitive landscape of insurance, ACME faces the challenge of maintaining operational efficiency while meeting customer expectations for prompt claim processing. With advancements in technology, there is an increasing reliance on digital solutions to streamline administrative tasks. ACME's competitors are already leveraging such solutions to gain a competitive edge.

Description of the Client

ACME Insurance Solutions values productivity and seeks technological solutions to enhance their operations. While the specific employees' computer skills vary, there is a

general willingness to implement modern technologies to improve systems and customer service.

Business Problem

The current manual process of claim submission and review is time-consuming and prone to errors, leading to delays in processing and customer displeasure. ACME needs a way to improve efficiency, while maintaining correctness, to enhance the customer experience.

Open Questions

While we understand the open challenges ACME faces in claim processing, there are several aspects we need further clarification on:

How are claims currently prioritized and assigned for processing?

What are the key pain points experienced by customers during the claims process?

Are there specific guiding requirements or fulfillment standards the new system needs to meet?

What is ACME’s internal process to handle communication with customers regarding claim updates and inquiries?

Questionnaire

How is the current claims submission process managed?

What are the primary challenges faced by the team in processing claims?

How do you prioritize and assign claims for review?

What criteria do you use to determine the validity of a claim?

How do you currently communicate with customers regarding claim updates?

Are there any specific features or functionalities you would like to see in the new web application?

How do you envision the new system integrating with existing processes and systems?

What level of training and support will be required for employees to transition to the new system?

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References

Canadian insurance data: <https://www.clhia.ca/facts>