Project: Claims Dashboard

1. What We Did

We built an **interactive dashboard** (Python/ipywidgets or Tableau) to manage and track insurance claims.

Key features implemented:

1. **Policy selection dropdown** – Choose a policy by ID and customer name.
2. **Policy details display** – Shows customer info, property/insurance details, claimable amount, and claim status.
3. **Submit Claim button** – Allows submission of a claim and updates status in the dataset.
4. **Dynamic filters** – Filter policies based on insurance type, amount range, or property location.
5. **KPIs** – Displays total policies, submitted claims, pending claims.
6. **Tables and Charts** – Visual summary of claims (submitted vs pending).

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2. Why This is Useful

- **Monitor claims in real-time** – Track which claims are submitted and which are pending.
- **Reduces manual tracking** – No need to check Excel sheets manually.
- **Improves efficiency** – Agents or managers can approve or submit claims quickly.
- **Provides insights** – Dashboards show trends, volumes, and potential bottlenecks.
- **Audit & reporting ready** – Easy to export current claim status for reporting.

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3. Where It Can Be Used (Current & Potential Use Cases)

- **Insurance companies** – To track claims for homeowners, flood, or hazard insurance.
- **Banks / Lenders** – For insurance payouts linked to loans (like hazard insurance) to ensure reimbursements to borrowers.
- **Risk management teams** – Track claim patterns and recovery trends.
- **Customer service teams** – Quickly check claim status for customers.
- **Management reporting** – Summarize recovery, pending claims, and high-risk regions.

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4. Deliverables / Outputs

1. **Interactive dashboard** showing policy-wise claim details.
2. **Submission mechanism** to update claims status.
3. **KPIs and charts** summarizing total, pending, and submitted claims.

4. **Filtered views** by insurance type, amount, or region.

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5. Benefits

- **Real-time claim tracking** without going through Excel sheets.
- **Error reduction** – avoids missed or duplicate claims.
- **Improved transparency** – managers and auditors can quickly see claim status.
- **Decision support** – helps in planning reimbursements, prioritizing high-value claims.