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Problem Statement

Health insurance systems often face issues such as inefficient claim processing, lack of transparency in policy details, and user dissatisfaction due to poor system design. This project aims to define and document the software requirements for a digital solution that addresses these challenges, focusing on clarity, efficiency, and scalability.

Project Scope

Develop requirements for a Health Insurance Management System that facilitates:

- Claim submission and tracking.
- Policy selection, purchase, and management.
- Notifications for renewals, approvals, and updates.

Stakeholders

Primary Stakeholders:

- **Policyholders (users who purchase and manage health insurance).**
- **Insurance company administrators (manage claims and policies).**

Secondary Stakeholders:

- Healthcare providers (manage cashless claims).
- IT support teams (maintain the system).

Roadmap for Project Development

Step1: Requirement Elicitation

> **Goal: Gather and analyze information from stakeholders to define the system's requirements.**

> **Methods:**
> 1. **Interviews: Conduct structured interviews with policyholders, insurance company administrators, and healthcare providers to understand their pain points and expectations.**
> 2. **Surveys and Questionnaires: Distribute surveys to a larger audience for additional feedback, focusing on common challenges like claim processing delays or policy misunderstandings.**
> 3. **Workshops: Organize workshops with stakeholders to collaboratively identify and prioritize system features.**