Ideation Phase
Define the Problem Statements

Date	31 January 2025
Team ID	SWTID-2026-5418
Project Name	Insurance Fraud Detection Using Maching Learning
Maximum Marks	2 Marks

Problem Statements: Insurance Claims Fraud Detection

This document outlines key problem statements across different perspectives related to identifying and managing fraudulent insurance claims.

1. Primary User Perspective: Insurance Claims Officer (PS-1)

Aspect	Details
I am	An Insurance Claims Officer.
I'm trying to	Accurately identify fraudulent claims while ensuring genuine claims are processed quickly.
But	I must manually analyze large volumes of claim data and complex patterns.
Because	Fraud indicators are often subtle, time-consuming to verify, and prone to human error.
Which makes me feel	Pressured, uncertain, and worried about approving fraudulent claims or delaying legitimate ones.

2. Organizational Perspective: Insurance Company (PS-2)

Aspect	Details
I am	An Insurance Company managing thousands of claims.
I'm trying to	Reduce significant financial losses caused by fraudulent claims.
But	Traditional rule-based and manual systems are ineffective at detecting sophisticated fraud patterns.
Because	Fraudsters continuously adapt their methods and exploit system weaknesses.
Which makes me feel	Vulnerable to significant financial loss and resulting reputational damage.

3. Customer Perspective: Genuine Policyholder (PS-3)

Aspect	Details
I am	A genuine policyholder.
I'm trying to	Receive my insurance claim quickly and fairly.
But	My claim may be delayed due to necessary fraud verification checks.
Because	The company struggles to efficiently differentiate between legitimate and fraudulent claims.
Which makes me feel	Frustrated and distrustful of the claims process.