

BPMN Seminar Day 1

Solutions to Exercises

12 May 2010



Queensland University of Technology

CRICOS No. 00213J

Task 1:

Claims Notification process at a car insurer

When a claim is received, it is first checked whether the claimant is insured by the organization. If not, the claimant is informed that the claim must be rejected. Otherwise, the severity of the claim is evaluated. Based on the outcome (simple or complex claims), relevant forms are sent to the claimant. Once the forms are returned, they are checked for completeness. If the forms provide all relevant details, the claim is registered in the Claims Management system, which ends the Claims Notification process. Otherwise, the claimant is informed to update the forms. Upon reception of the updated forms, they are checked again.

Do not yet model pools and lanes.

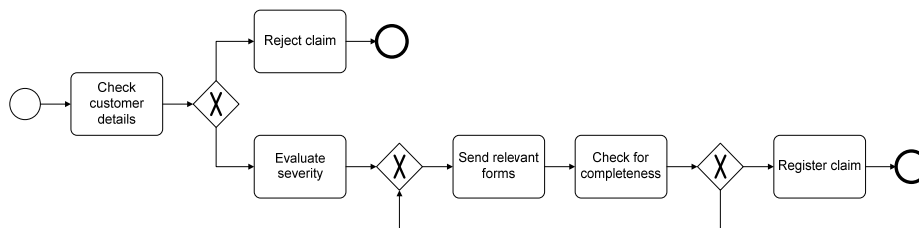


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Task 1: a potential modelling solution

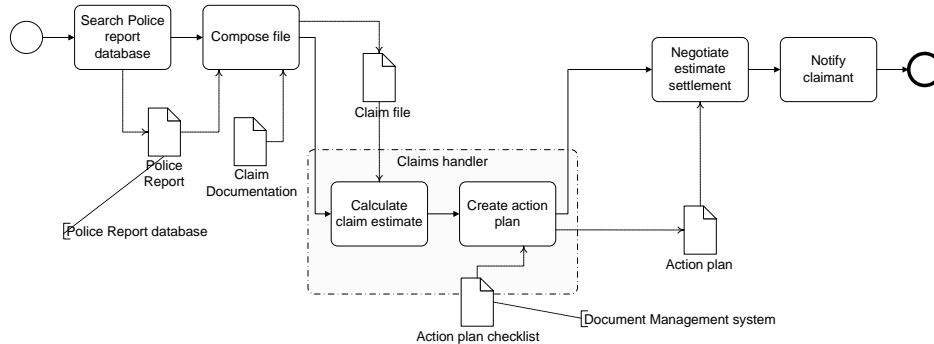


Task 2: Claims Creation process at a car insurer

The Police Report related to the car accident is searched within the Police Report database and put in a file together with the Claim Documentation. This file serves as input to a claims handler who calculates an initial claim estimate. Then, the claims handler creates an Action Plan based on an Action Plan Checklist available in the Document Management system. Based on the Action Plan, a claims manager tries to negotiate a settlement on the claim estimate. The claimant is informed of the outcome, which ends the process.

Depict all relevant documents in the model. Also visualize activities that are performed by the claims handler.

Task 2: a potential modelling solution



Let's now identify participants and messages...

Look at:

- Organisational charts, role/job descriptors
- Functional decompositions of the organisation
- Documents going out and coming in
- External events that trigger key activities.

Task 3: Claims Handling process at a car insurer

The process starts when a customer submits a claim by sending in relevant documentation. The Notification department at the car insurer checks the documents upon completeness and registers the claim. Then, the Handling department picks up the claim and checks the insurance. Then, an assessment is performed. If the assessment is positive, a garage is phoned to authorise the repairs and the payment is scheduled (in this order). Otherwise, the claim is rejected. In any case (whether the outcome is positive or negative), a letter is sent to the customer and the process is considered to be complete.

Find a way to visualize the different roles included in the process description.

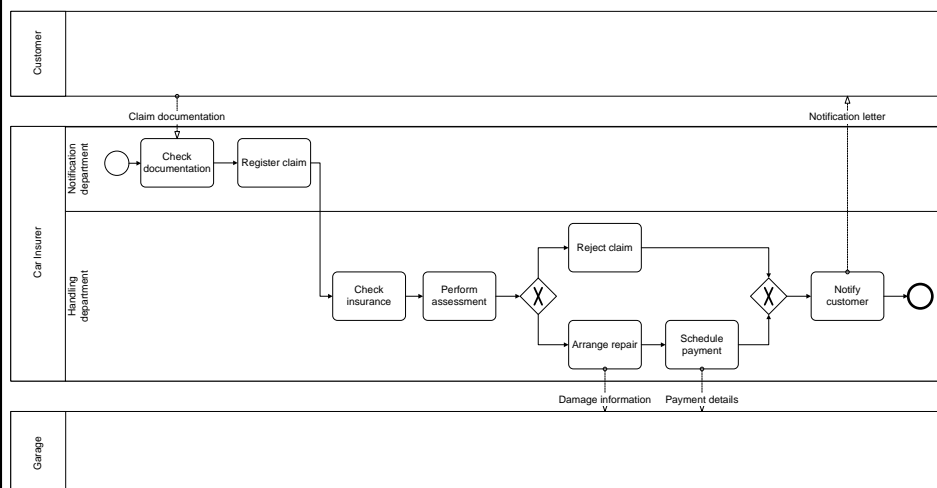


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Task 3: a potential modelling solution



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