



# REFERENCE CASE

Insurance Policy  
Comprehensive medical  
insurance policy information

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**M<sup>2</sup>Q**  
Test. Check. Go!

# The NIC organizes the consultation between the different mutual societies

The National Intermutualist College (CIN) is an association of mutual societies made up of representatives of the five Unions National mutual insurance companies as well as the Auxiliary Sickness and Disability Insurance Fund (CAAMI) and the Health Care Fund Health of HR Rail.

The CIN therefore brings together all Belgian insurance organizations and represents the entire Belgian population with social insurance, i.e. more than 11 million people.

The CIN's mission is to organize consultation between the different mutual societies on all problems of interest for compulsory and supplementary health and disability insurance and the mutual sector in general to take a position in relation to these problems taking into account the interests of all those covered by social security to encourage joint actions or organic cooperation in the management of insurance organizations.

These missions result from strong and frequent interactions with insurance organizations (OA).

Within the CIN, the coordination unit (a team of around 40 people) ensures, in collaboration with its IT partners, the design and implementation of IT projects common to all National Unions. The domain of activity covers in particular projects for the digitalization of information flows between mutual societies and other stakeholders in the social security via the NIPPIN platform. Other areas of activity have been added in recent years such as: portal health, management of integrated care projects.

The objective of this non-profit organization is to organize, coordinate and implement services shared by different organizations, insurers, as well as to make purchases for the benefit of its members in order to achieve economic management in this social sector by achieving economies of scale.

# Our role

The main objective of the mission being that the supervision, support and coaching of the team allows it to apply autonomously processes and best practices to ensure to achieve higher quality.

The first mission was to investigate the way of working as they are working today and then propose adjustments to the strategy with the aim to increase the quality.

At the same time the mission consists of leading a team of 4 people currently responsible for:

- Map test scenarios to automate for existing services and applications.
- Provide support for project testing and testing with our external partners.
- Plan and carry out test scenarios to automate.
- Carry out various tests with the following results:
  - Delivery of corresponding (automated) test reports
  - Bug tracking with relevant development teams.
- Deployment of automated test scenarios for automated regression testing on our environment of acceptance.
- Implement automated smoketests on the production environment with the following results:
  - Dashboard that shows the health and integrity of our services at a glance.
  - Automatic integration with Jira Service Management, ticketing tool, in place in case of smoketest failure.

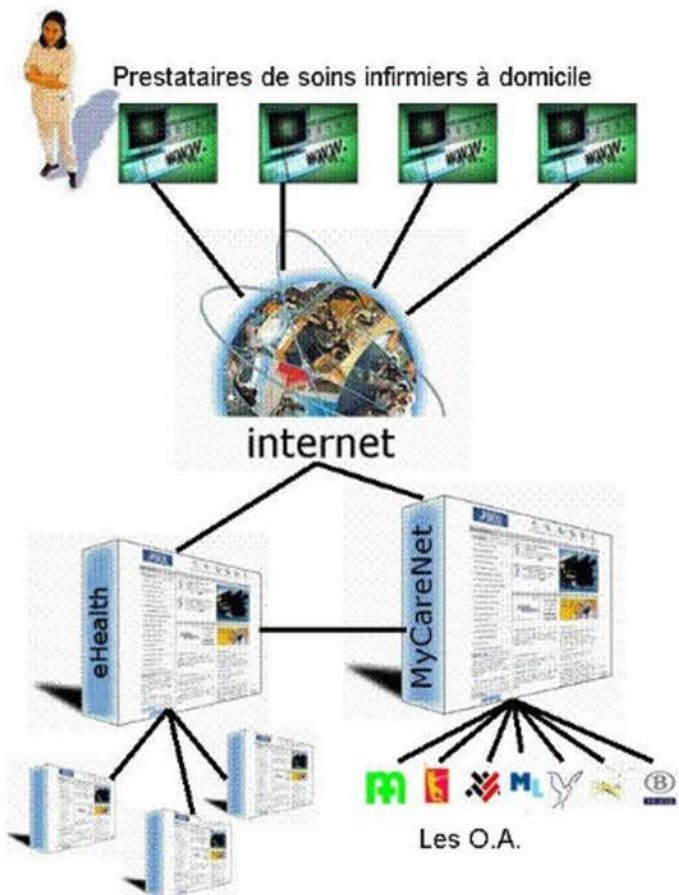
We had also a “coaching” role for team members to achieve the following results:

- Implementation of “Best practices”
- Good use of the tools available
- The team is capable of developing qualitative automated test scenarios
- Test data is collected and deployed in automated tests.

# Environment

The diagram below provides an overview of the architecture of the MyCareNet network and its main components and partners:

- **The telecommunication network:** The Internet, considering its widespread use, low cost, and existing techniques that enable securing communication and transmitted information.
- **The service provider's workstation:** It is the provider who, from their workstation, initiates all types of communication with the insurance organizations.
- **The e-Health portal:** Implemented by Public Health, it serves as the authentication point, offering the possibility to connect to various health care sector portals.
- **The MyCareNet portal:** Created and managed by the CIN, this portal, in addition to complex utility functions, allows connecting the provider and the insurance organization based on the patient's mutual affiliation.



# Challenges

The project faced several challenges:

- Setup a adequate Test process
- Proof of Concept (POC) with JMeter.
- POC with Selenium Grid.
- Creation of the Master test plan and strategy.
- Technical skills of the test team.
- Legacy test “robots” from Atos.
- Backend migration from Atos Origin to Cegeka





# OUR SOLUTIONS

We collaborated with the customer to ensure the solution met their needs and worked within their specific environment. The approach was based on best practices and executed through meetings. Key actions taken included:

- QA visibility & perception: To improve the visibility and general perception of the QA team and process, the following actions were taken:
  - Implementing a uniform way of logging defects.
  - Establishing a uniform way of working, including the tools in place (i.e., JMeter, Selenium).
  - Structured testing using test plans.
  - Defining clear roles and responsibilities.
  - Introducing test scenarios and test cases, including preconditions.
  - Providing guidelines on how to create automated test cases, detailing the content and the level of detail required for each test case.

## Methods and Techniques

- Agile-based principles.
- Testing best practices.
- Experience-based techniques.