

# Architectural Design: Medical Insurance System

Applying the 3-Tier Client-Server Architectural Style to ensure Security, Scalability, and Performance.

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## **01. System Analysis**

Defining the actors and core functional modules for a robust insurance ecosystem.

# | Key System Stakeholders



## Medical Providers

Hospitals and clinics responsible for verifying patient eligibility and submitting claims for services rendered.



## Insurance Agents

Front-line staff tasked with creating policies, onboarding new members, and managing renewals.



## Claims Adjudicators


Internal specialists who review, approve, or reject claims based on predefined business rules.




## System Administrators


Security-focused users managing access, configurations, and maintaining the overall system health.

# Core Functional Modules

 **Member Management:** Enrollment, history, and dependent handling.

 **Policy Administration:** Product definitions and premium renewals.

 **Claims Processing:** Adjudication rules engine and payment flows.

 **Provider Network:** Managing hospital contracts and credentials.

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## **02. Architectural Design**

Proposing the 3-Tier Model to decouple the user interface from critical data assets.

# | The 3-Tier Client-Server Model



## Presentation

Hybrid Client (Web/Desktop) rendering the UI. Performs basic validation to reduce server round-trips.



## Application

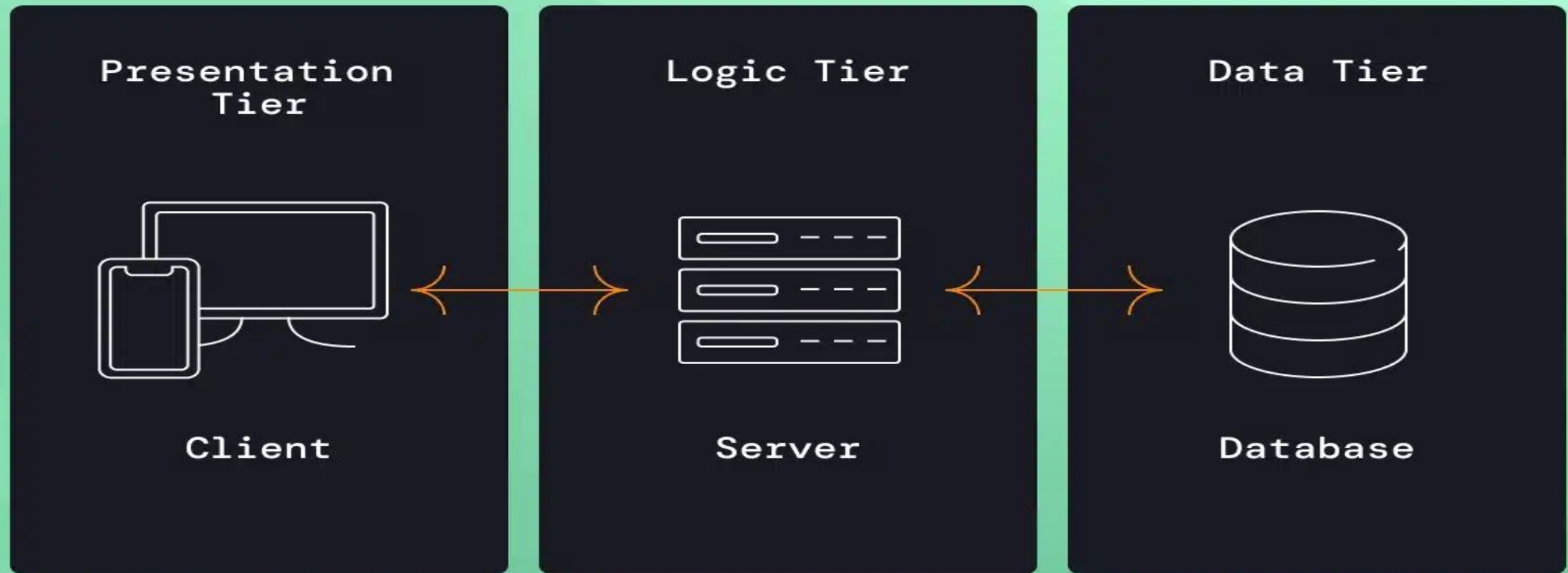
The "Logic Server." Hosts business rules, claims engines, and acts as the secure gatekeeper.



## Data

Persistent storage using RDBMS (Oracle/PostgreSQL) ensuring ACID compliance for financial integrity.

# The 3-Tier Client-Server Model



# Security: Attack Surface Reduction

In a 3-tier model, direct database access is impossible for the client. Even if a client machine is compromised, the attacker must bypass the Application Tier's validation and logic.




Centralized logging facilitates HIPAA compliance by tracking every request (Who, What, When) at the server level.



# | Performance Optimization

ACID

Compliance Standard

-  **Connection Pooling:** Eliminates overhead by maintaining open DB connections.
-  **Caching (Redis):** Frequently accessed drug formularies and hospital lists are stored in memory.
-  **Offloading Logic:** Complex premium risk assessments are executed on powerful servers.

# | Scalability Strategy

## Handling growth

- ↑ **Vertical Scaling:** Upgrading Database Server hardware (CPU/RAM) to handle larger datasets.
- ↔ **Horizontal Scaling:** Adding multiple Application Servers behind a Load Balancer to handle concurrent load.

Since the **Application Tier is stateless**, we can easily spin up multiple instances of the logic server to handle thousands of concurrent insurance agents without data loss.

# Data Design & Relationships

Entity Relationship	Type	Logic & Justification
Member ---- Policy	1 : N	A single member can hold multiple policies over time.
Policy ---- Claims	1 : N	A claim is strictly linked to a valid, active policy.
Claim ---- ClaimLines	1 : N	Hospital visits include multiple billable items (Pharmacy, Lab).
Schema Model	3NF	Normalization ensures consistency and reduces data redundancy.

# | Summary of Architectural Trade-offs



## Integrity

ACID-compliant RDBMS is used over NoSQL because financial payouts cannot accept "eventual consistency."



## Maintenance

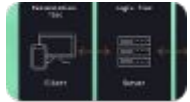
Thin Client (Web) approach ensures updates are deployed once to the server rather than 100s of hospital PCs.



## Availability

Active-Passive Failover ensures 24/7 processing if the primary Application Server fails.

# | Image Sources



<https://vfunction.com/wp-content/uploads/2024/05/blog-3-tier-application.webp>

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