



DATABASE DESIGN FOR HEALTH INSURANCE COMPANY

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Requirements

Health insurance:

Health insurance is a type of insurance coverage that covers the cost of an insured individual's medical and surgical expenses. Medical expenses can be very expensive and so health insurance covers the risk of incurring a medical expense and spreads the risk over a large number of people. The purpose of insurance, in general, is to protect people from financial losses and health insurance is a type of insurance which pertains to health related risks.

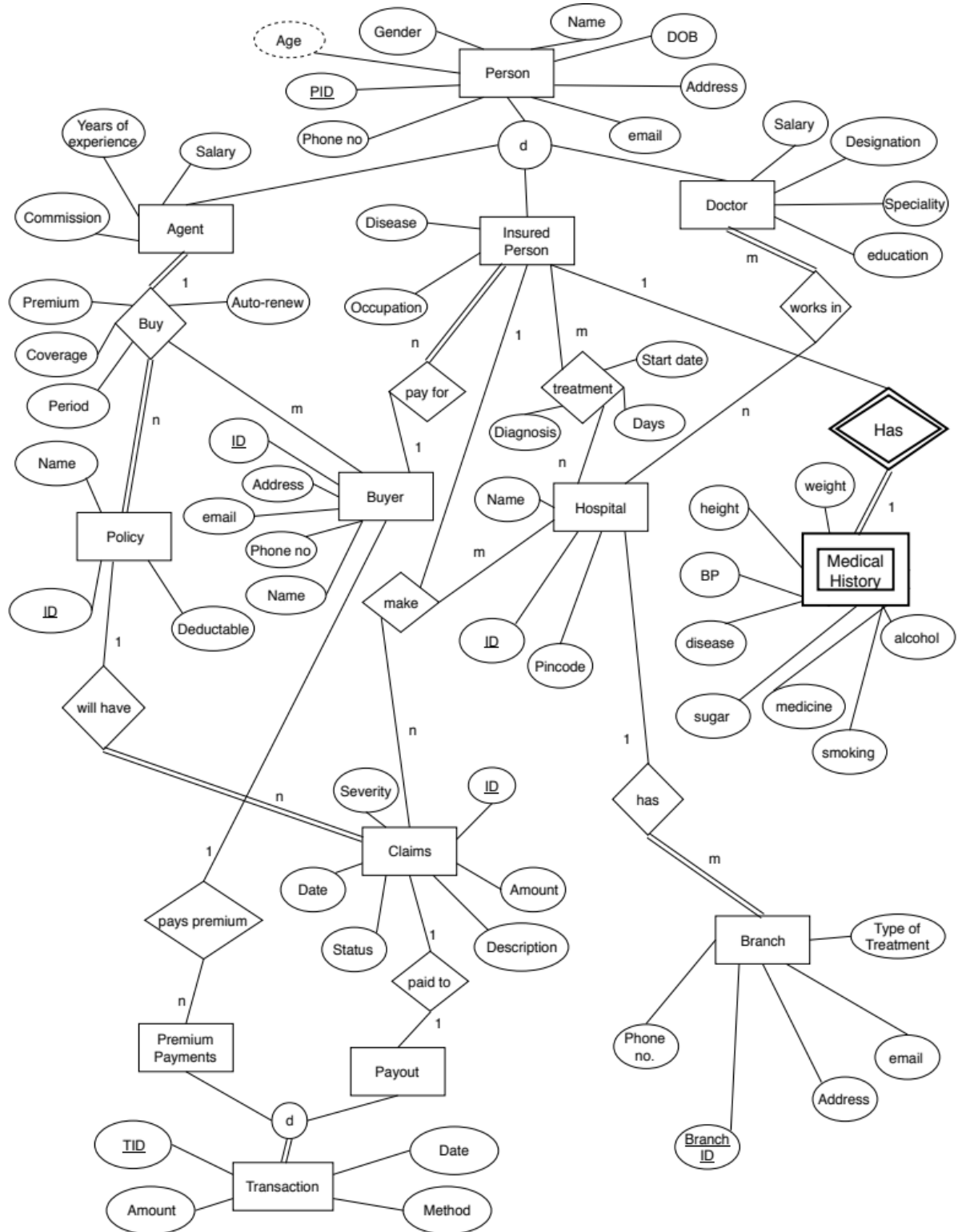
Important key words explained:

- **Deductible:** The amount you owe for covered health care services before your health insurance or plan begins to pay.
- **Co-payment:** An amount you pay as your share of the cost for a medical service or item, like a doctor's visit.
- **Co-insurance:** Your share of the cost for a covered health care service, usually calculated as a percentage (like 20%) of the allowed amount for the service.
- **Premium:** The amount you pay for your health insurance or plan each month.
- **Out-of-Pocket Maximum:** This is the most you'll pay toward your healthcare in a given year. Let's say you have an insurance plan with an out-of-pocket maximum of \$5,000, once you've reached that amount, the insurance company picks up 100% of the costs for the rest of the plan year (excluding co-pays).
- **Network:** The doctors, hospitals, and suppliers your health insurer has contracted with to deliver health care services to their members.
- **Annual Coverage Limit:** This is the maximum amount health insurance can pay for you in a given year. Any expenses above this limit should be paid by the individual person.

Working of Health Insurance Company:

Health Insurance Company has different types of policies for buyers. Each policy has specific benefits, conditions and coverage limit. Buyers buy these policies and for each policy pay certain amount per month as a premium. Company uses this money to pay medical expenses of insured persons. Each company has many policy agents to handle policies of buyers. These agents ask for medical history of insured persons, take their information and suggest suitable policies. If an insured person undergoes medical illness or accident, insurance company pays the amount after out of pocket maximum limit is reached. For amount to be paid by the company patient must get treatment only in a hospital which is in insurance company's network. These hospitals submit medical claims of patients to the insurance company. Medical claims have information of patient, detail description of illness, total expenses incurred and medical reports. Insurance company checks and approves medical claims. After approval of claims company pays medical expenses to the hospital.

EER Diagram:



The EER Diagram can be Summarized as –

- 1) There is a ternary relationship between Agent , Buyer and Policy where Agent(One) and Buyer(s) (1...N) are required to buy the Policy(1...N).
- 2) One Policy will have many claims and one claim will have only one buyer (1:N).
- 3) A buyer can pay many premiums and one premium can only be paid by one buyer (1:N).
- 4) One claim is paid to one Payout and one Payout refers to only one claim (1:1).
- 5) One buyer has many insured persons and one insured person pays for one buyer.(1:N).
- 6) There is a ternary relationship between Insured Person , Hospital and Claim where Insured Person (One) and Hospital(s) (1...N) are required to make the Claim(s) (1...N).
- 7) One Hospital has many Doctors and One Doctor works in many hospitals.(M:N).
- 8) One Hospital has many branches and One branch represents one hospital (1:1).
- 9) One Insured Person can get Treatment from many hospitals. One hospital can do treatment for many Insured Persons.
- 10) One Insured Person has a Medical History. One Medical history is of one person.(1:1).

MAPPING OF ERD IN RELATIONAL SCHEMA:

1. POLICY

<u>PolicyID</u>	Name	Co-insurance	Description	Deductible	Out of Pocket	Annual Coverage
-----------------	------	--------------	-------------	------------	---------------	-----------------

- **Primary Key** : PolicyID
- **Foreign Keys** : None

2. BUYER

<u>BuyerID</u>	Name	Address
----------------	------	---------

- **Primary Key** : BuyerID
- **Foreign Keys** : None

3. PERSON

<u>PersonID</u>	Name	Gender	Age	DOB	Address	IPflag	Agflag	Dflag	Salary
-----------------	------	--------	-----	-----	---------	--------	--------	-------	--------

Eductaion	Experience	Occupation	Designation	Commission	Married	BuyerID
-----------	------------	------------	-------------	------------	---------	----------------

- **Primary Key** : PersonID
- **Foreign Keys** : FOREIGN KEY (BuyerID) REFERENCES BUYER(BuyerID)

4. BUYER POLICIES

Auto-renew	Premium	Period	<u>Agent ID</u>	<u>BuyerID</u>	<u>PolicyID</u>
------------	---------	--------	-----------------	----------------	-----------------

- **Primary Key** : AgentID, BuyerID, PolicyID
- **Foreign Keys** : FOREIGN KEY (AgentID) REFERENCES PERSON(PersonID), FOREIGN KEY (BuyerID) REFERENCES BUYER(BuyerID), FOREIGN KEY (PolicyID) REFERENCES POLICY(PolicyID)

5. HOSPITAL

<u>HospitalID</u>	Name
-------------------	------

- **Primary Key** : HospitalID
- **Foreign Keys** : None

6. BRANCH

<u>BranchID</u>	Address	HospitalID
-----------------	---------	-------------------

- **Primary Key** : BranchID
- **Foreign Keys** : FOREIGN KEY (HospitalID) REFERENCES HOSPITAL(HospitalID)

7. WORKS-IN

<u>HospitalID</u>	<u>DoctorID</u>
--------------------------	------------------------

- **Primary Key** : HospitalID, DoctorID
- **Foreign Keys** : FOREIGN KEY (HospitalID) REFERENCES HOSPITAL(HospitalID), FOREIGN KEY (DoctorID) REFERENCES PERSON(PersonID)

8. MEDICAL HISTORY

<u>InsuredPersonID</u>	Height	Weight	Smoking	Alcohol consumption	Injuries	Disease
-------------------------------	--------	--------	---------	---------------------	----------	---------

Sugery Birth place

- **Primary Key** : InsuredPersonID
- **Foreign Keys** : FOREIGN KEY (InsuredPersonID) REFERENCES PERSON(PersonID)

9. TREATMENT

<u>PersonID</u>	<u>BranchID</u>	Days	Start date	Diagnosis
------------------------	------------------------	------	------------	-----------

- **Primary Key** : PersonID, BranchID
- **Foreign Keys** : FOREIGN KEY (PersonID) REFERENCES PERSON(PersonID), FOREIGN KEY (BranchID) REFERENCES BRANCH(BranchID)

10. CLAIM

<u>ClaimID</u>	Date	Description	Amount	Status	Severity	<u>PolicyID</u>
-----------------------	------	-------------	--------	--------	----------	------------------------

- **Primary Key** : ClaimID
- **Foreign Keys** : FOREIGN KEY (PolicyID) REFERENCES POLICY(PolicyID)

11. CLAIM-SUBMISSION

<u>ClaimID</u>	<u>HospitalID</u>	<u>InsuredPersonID</u>
-----------------------	--------------------------	-------------------------------

- **Primary Key** : ClaimID, HospitalID, InsuredPersonID

- **Foreign Keys** : FOREIGN KEY (ClaimID) REFERENCES CLAIM(ClaimID), FOREIGN KEY (HospitalID) REFERENCES HOSPITAL(HospitalID), FOREIGN KEY (InsuredPersonID) REFERENCES PERSON(InsuredPersonID).

12. TRANSACTION

<u>TransactionID</u>	Amount	Date	Method
----------------------	--------	------	--------

- **Primary Key** : TransactionID
- **Foreign Keys** : None

13. PREMIUM-PAYMENTS

<u>TransactionID</u>	<u>BuyerID</u>
----------------------	----------------

- **Primary Key** : TransactionID, BuyerID
- **Foreign Keys** : FOREIGN KEY (TransactionID) REFERENCES TRANSACTION(TransactionID), FOREIGN KEY (BuyerID) REFERENCES Buyer(BuyerID)

14. CLAIMS-PAYMENT

<u>TransactionID</u>	<u>ClaimID</u>
----------------------	----------------

- **Primary Key** : TransactionID, ClaimID
- **Foreign Keys** : FOREIGN KEY (TransactionID) REFERENCES TRANSACTION(TransactionID), FOREIGN KEY (ClaimID) REFERENCES Claim(ClaimID)

15. BUYER CONTACT

<u>BuyerID</u>	<u>Phone</u>	<u>Email</u>
----------------	--------------	--------------

- **Primary Key** : BuyerID, Phone, Email
- **Foreign Keys** : FOREIGN KEY (BuyerID) REFERENCES Buyer(BuyerID)

16. PERSON CONTACT

<u>PersonID</u>	<u>Phone</u>	<u>Email</u>
-----------------	--------------	--------------

- **Primary Key** : PersonID, Phone, Email
- **Foreign Keys** : FOREIGN KEY (PersonID) REFERENCES Person(PersonID)

17. HOSPITAL CONTACT

<u>BranchID</u>	<u>Phone</u>	<u>Email</u>
-----------------	--------------	--------------

- **Primary Key** : BranchID, Phone, Email
- **Foreign Keys** : FOREIGN KEY (BranchID) REFERENCES
BRANCH(BranchID)

NORMALIZATION:

The following Functional Dependencies exists in the relational schema –

- **POLICY** {PolicyID -> Name, Co-insurance, Description, Deductible, Out of Pocket, Annual Coverage}
- **BUYER** {BuyerID -> Name, Address}
- **PERSON** {PersonID -> Name, Gender, Age, D.O.B, Address, IPflag, Agflag, Dflag, Salary, Education, Experience, Occupation, Designation, Commission, Married, BuyerID}
- **BUYER POLICIES** {AgentID, PolicyID, BuyerID -> Auto-renew, Premium, Period}
- **HOSPITAL** {HospitalID -> Name }
- **BRANCH** {BranchID -> HospitalID, Address, Street, City, PinCode, State, Country}
- **MEDICAL HISTORY** {BranchID -> Height, Weight, Smoking, Alcohol consumption, Injuries, Disease, Medicines, Sugery, Birth Place}
- **TREATMENT** {PersonID, BranchID -> Days, Start Date, Diagnosis}
- **CLAIM** {ClaimID -> Date, Description, Amount, Status, Severity}
- **TRANSACTION** {TransactionID -> Amount, Date, Method}

The above functional dependencies are in third normal form since there is no partial dependency, transitive dependency.

SQL statements to create tables in database and add constraints:

```
CREATE TABLE "RSK180001"."BOUGHT_POLICIES"  
(  
    "POLICY_ID" NUMBER(20,0) NOT NULL ENABLE,  
    "BUYER_ID" NUMBER(20,0) NOT NULL ENABLE,  
    "AGENT_ID" NUMBER(20,0) NOT NULL ENABLE,  
    "AUTO_RENEW" VARCHAR2(3 BYTE) DEFAULT 'NO',  
    "PREMIUM" NUMBER(5,0),  
    "PERIOD" NUMBER(3,0),  
    CONSTRAINT "BOUGHT_POLICIES_PK" PRIMARY KEY  
    ("POLICY_ID", "BUYER_ID", "AGENT_ID")  
    USING INDEX PCTFREE 10 INITRANS 2 MAXTRANS 255  
    TABLESPACE "USERS" ENABLE,  
    CONSTRAINT "FK1_POLICY_ID" FOREIGN KEY ("POLICY_ID")  
    REFERENCES "RSK180001"."POLICY" ("POLICY_ID") ENABLE,  
    CONSTRAINT "FK2_BUYER_ID" FOREIGN KEY ("BUYER_ID")  
    REFERENCES "RSK180001"."BUYER" ("BUYER_ID") ENABLE,  
    CONSTRAINT "FK3_AGENT_SSN" FOREIGN KEY ("AGENT_ID")  
    REFERENCES "RSK180001"."PERSON" ("SSN") ENABLE  
);
```

```
CREATE TABLE "RSK180001"."BUYER"  
(  
    "BUYER_ID" NUMBER(10,0) NOT NULL ENABLE,  
    "NAME" VARCHAR2(200 BYTE),  
    CONSTRAINT "BUYER_PK" PRIMARY KEY ("BUYER_ID")  
    USING INDEX PCTFREE 10 INITRANS 2 MAXTRANS 255  
    TABLESPACE "USERS" ENABLE  
);
```

```
CREATE TABLE "RSK180001"."BUYER_ADDRESS"  
(  
    "ADDRESS_ID" NUMBER(10,0) NOT NULL ENABLE,  
    "ADDRESS" VARCHAR2(200 BYTE),  
    "STREET" VARCHAR2(200 BYTE),  
    "CITY" VARCHAR2(200 BYTE),  
    "STATE" VARCHAR2(200 BYTE) NOT NULL ENABLE,  
    "PINCODE" NUMBER(10,0) NOT NULL ENABLE,  
    "COUNTRY" VARCHAR2(200 BYTE) NOT NULL ENABLE,  
    "BUYER_ID" NUMBER(10,0) NOT NULL ENABLE,  
    CONSTRAINT "BUYER_ADDRESS_PK" PRIMARY KEY  
    ("ADDRESS_ID", "BUYER_ID")  
    USING INDEX PCTFREE 10 INITRANS 2 MAXTRANS 255 COMPUTE  
    STATISTICS  
    TABLESPACE "USERS" ENABLE  
);
```

```

CREATE TABLE "RSK180001"."CLAIM"
(
  "CLAIM_ID" NUMBER(20,0) NOT NULL ENABLE,
  "SUBMISSION_DATE" DATE,
  "AMOUNT" NUMBER(10,0),
  "STATUS" VARCHAR2(20 BYTE),
  "SEVERITY" VARCHAR2(20 BYTE),
  "DESCRIPTION" VARCHAR2(100 BYTE),
  CONSTRAINT "CLAIM_PK" PRIMARY KEY ("CLAIM_ID")
  USING INDEX PCTFREE 10 INITRANS 2 MAXTRANS 255
  TABLESPACE "USERS" ENABLE
);

```

```

CREATE TABLE "RSK180001"."CLAIM_SUBMISSION"
(
  "CLAIM_ID" NUMBER(20,0) NOT NULL ENABLE,
  "HOSPITAL_BRANCH_ID" NUMBER(10,0) NOT NULL ENABLE,
  "INSURED_PERSON_ID" NUMBER(20,0) NOT NULL ENABLE,
  CONSTRAINT "CLAIM_SUBMISSION_PK" PRIMARY KEY
  ("CLAIM_ID", "HOSPITAL_BRANCH_ID", "INSURED_PERSON_ID")
  USING INDEX PCTFREE 10 INITRANS 2 MAXTRANS 255
  TABLESPACE "USERS" ENABLE,
  CONSTRAINT "FK1_CLAIM_ID" FOREIGN KEY ("CLAIM_ID")
  REFERENCES "RSK180001"."CLAIM" ("CLAIM_ID") ENABLE,
  CONSTRAINT "FK2_HOSPITAL_BRANCH_ID" FOREIGN KEY
  ("HOSPITAL_BRANCH_ID")
  REFERENCES "RSK180001"."HOSPITAL_BRANCH" ("BRANCH_ID")
  ENABLE,
  CONSTRAINT "FK3_PERSON_ID" FOREIGN KEY
  ("INSURED_PERSON_ID")
  REFERENCES "RSK180001"."PERSON" ("SSN") ENABLE
);

```

```

CREATE TABLE "RSK180001"."HOSPITAL"
(
  "ID" NUMBER(20,0) NOT NULL ENABLE,
  "NAME" VARCHAR2(100 BYTE),
  CONSTRAINT "HOSPITAL_PK" PRIMARY KEY ("ID")
  USING INDEX PCTFREE 10 INITRANS 2 MAXTRANS 255 COMPUTE
  STATISTICS
  TABLESPACE "USERS" ENABLE
);

```

```

CREATE TABLE "RSK180001"."HOSPITAL_BRANCH"
(
  "BRANCH_ID" NUMBER(10,0) NOT NULL ENABLE,
  "HOSPITAL_ID" NUMBER(20,0),

```

```

"ADDRESS" VARCHAR2(200 BYTE),
"STREET" VARCHAR2(200 BYTE),
"CITY" VARCHAR2(100 BYTE),
"PINCODE" NUMBER(10,0) NOT NULL ENABLE,
"STATE" VARCHAR2(100 BYTE) NOT NULL ENABLE,
"COUNTRY" VARCHAR2(100 BYTE) NOT NULL ENABLE,
CONSTRAINT "HOSPITAL_BRANCH_PK" PRIMARY KEY
("BRANCH_ID")
USING INDEX PCTFREE 10 INITRANS 2 MAXTRANS 255
TABLESPACE "USERS" ENABLE
);

```

```

CREATE TABLE "RSK180001"."MEDICAL_HISTORY"
(
  "PSSN" NUMBER(20,0) NOT NULL ENABLE,
  "NAME" VARCHAR2(50 BYTE),
  "WEIGHT" NUMBER(3,0),
  "SMOKE" VARCHAR2(3 BYTE),
  "ALCOHOLCONSUMPTION" VARCHAR2(3 BYTE),
  "MEDICINES" VARCHAR2(100 BYTE),
  "BIRTHPLACE" VARCHAR2(100 BYTE),
  "INJURIES" VARCHAR2(100 BYTE),
  "DISEASE" VARCHAR2(100 BYTE),
  CONSTRAINT "MEDICAL_HISTORY_PK" PRIMARY KEY ("PSSN")
  USING INDEX PCTFREE 10 INITRANS 2 MAXTRANS 255
  TABLESPACE "USERS" ENABLE,
  CONSTRAINT "FK1_PERSON_SSN" FOREIGN KEY ("PSSN")
  REFERENCES "RSK180001"."PERSON" ("SSN") ENABLE
);

```

```

CREATE TABLE "RSK180001"."PERSON"
(
  "SSN" NUMBER(20,0) NOT NULL ENABLE,
  "NAME" VARCHAR2(200 BYTE) NOT NULL ENABLE,
  "GENDER" VARCHAR2(10 BYTE),
  "AGE" NUMBER(3,0),
  "DOB" DATE NOT NULL ENABLE,
  "SALARY" NUMBER(10,0),
  "EDUCATION" VARCHAR2(20 BYTE),
  "OCCUPATION" VARCHAR2(20 BYTE),
  "COMISSION" NUMBER(10,0),
  "MARRIED" VARCHAR2(3 BYTE),
  "YEARS_OF_EXPERIENCE" NUMBER(3,0),
  "IPFLAG" NUMBER(1,0),
  "DFLAG" NUMBER(1,0),
  "AFLAG" VARCHAR2(1 BYTE),

```

```

"BUYER_ID" NUMBER(10,0),
CONSTRAINT "PERSON_PK" PRIMARY KEY ("SSN")
USING INDEX PCTFREE 10 INITRANS 2 MAXTRANS 255
TABLESPACE "USERS" ENABLE,
CONSTRAINT "FK1_BUYER_ID" FOREIGN KEY ("BUYER_ID")
REFERENCES "RSK180001"."BUYER" ("BUYER_ID") ENABLE
);

CREATE TABLE "RSK180001"."PERSON_ADDRESS"
(
  "ADDRESS_ID" NUMBER(10,0) NOT NULL ENABLE,
  "ADDRESS" VARCHAR2(100 BYTE),
  "STREET" VARCHAR2(100 BYTE),
  "CITY" VARCHAR2(50 BYTE) NOT NULL ENABLE,
  "PINCODE" NUMBER(10,0) NOT NULL ENABLE,
  "STATE" VARCHAR2(50 BYTE) NOT NULL ENABLE,
  "COUNTRY" VARCHAR2(50 BYTE) NOT NULL ENABLE,
  "PERSON_ID" NUMBER(20,0) NOT NULL ENABLE,
  CONSTRAINT "PERSON_ADDRESS_PK" PRIMARY KEY
  ("ADDRESS_ID", "PERSON_ID")
  USING INDEX PCTFREE 10 INITRANS 2 MAXTRANS 255 COMPUTE
  STATISTICS
  TABLESPACE "USERS" ENABLE
);

CREATE TABLE "RSK180001"."POLICY"
(
  "POLICY_ID" NUMBER(20,0) NOT NULL ENABLE,
  "NAME" VARCHAR2(50 BYTE),
  "DESCRIPTION" VARCHAR2(100 BYTE),
  "DEDUCTIBLE" NUMBER(10,0),
  "OUTOFPOCKET" NUMBER(10,0),
  "CO_INSURANCE" NUMBER(10,0),
  "ANNUAL_COVERAGE" NUMBER(10,0),
  CONSTRAINT "POLICY_PK" PRIMARY KEY ("POLICY_ID")
  USING INDEX PCTFREE 10 INITRANS 2 MAXTRANS 255
  TABLESPACE "USERS" ENABLE
);

CREATE TABLE "RSK180001"."WORKS_IN"
(
  "HOSPITAL_ID" NUMBER(20,0) NOT NULL ENABLE,
  "DOCTOR_ID" NUMBER(20,0) NOT NULL ENABLE,
  CONSTRAINT "WORKS_IN_PK" PRIMARY KEY ("HOSPITAL_ID",
  "DOCTOR_ID")
  USING INDEX PCTFREE 10 INITRANS 2 MAXTRANS 255
  TABLESPACE "USERS" ENABLE,
  CONSTRAINT "FK1_HOSPITAL_ID" FOREIGN KEY ("HOSPITAL_ID")

```

```

REFERENCES "RSK180001"."HOSPITAL" ("ID") ENABLE,
CONSTRAINT "FK2" FOREIGN KEY ("DOCTOR_ID")
REFERENCES "RSK180001"."PERSON" ("SSN") ENABLE
);

CREATE TABLE "RSK180001"."TREATMENT"
(
  "PERSON_ID" NUMBER(20,0) NOT NULL ENABLE,
  "HSP_BRANCH_ID" NUMBER(10,0) NOT NULL ENABLE,
  "DAYS" NUMBER(3,0),
  "START_DATE" DATE,
  "DIAGNOSIS" VARCHAR2(100 BYTE),
  CONSTRAINT "TREATMENT_PK" PRIMARY KEY ("PERSON_ID",
  "HSP_BRANCH_ID")
  USING INDEX PCTFREE 10 INITRANS 2 MAXTRANS 255 COMPUTE
  STATISTICS
  TABLESPACE "USERS" ENABLE,
  CONSTRAINT "FK1_PERSON_ID" FOREIGN KEY ("PERSON_ID")
  REFERENCES "RSK180001"."PERSON" ("SSN") ENABLE,
  CONSTRAINT "FK2_BRANCH_ID" FOREIGN KEY
  ("HSP_BRANCH_ID")
  REFERENCES "RSK180001"."HOSPITAL_BRANCH" ("BRANCH_ID")
  ENABLE
) SEGMENT CREATION DEFERRED
PCTFREE 10 PCTUSED 40 INITRANS 1 MAXTRANS 255
NOCOMPRESS LOGGING
TABLESPACE "USERS" ;

```

```

CREATE TABLE "RSK180001"."TRANSACTION"
(
  "TRANSACTION_ID" NUMBER(20,0) NOT NULL ENABLE,
  "AMOUNT" NUMBER(20,0),
  "TRANSACTION_DATE" DATE,
  "PAYMENT_METHOD" VARCHAR2(20 BYTE),
  CONSTRAINT "TRANSACTION_PK" PRIMARY KEY
  ("TRANSACTION_ID")
  USING INDEX PCTFREE 10 INITRANS 2 MAXTRANS 255 COMPUTE
  STATISTICS
  TABLESPACE "USERS" ENABLE
) SEGMENT CREATION DEFERRED
PCTFREE 10 PCTUSED 40 INITRANS 1 MAXTRANS 255
NOCOMPRESS LOGGING
TABLESPACE "USERS" ;

```

```

CREATE TABLE "RSK180001"."PREMIUM_PAYMENTS"
(
  "TRANSACTION_ID" NUMBER(20,0) NOT NULL ENABLE,
  "BUYER_ID" NUMBER(20,0) NOT NULL ENABLE,

```

```

CONSTRAINT "FK1_TRANSACTION_ID" FOREIGN KEY
("TRANSACTION_ID")
REFERENCES "RSK180001"."TRANSACTION" ("TRANSACTION_ID")
ENABLE,
CONSTRAINT "FK2_PAID_BY" FOREIGN KEY ("BUYER_ID")
REFERENCES "RSK180001"."BUYER" ("BUYER_ID") ENABLE
) SEGMENT CREATION DEFERRED
PCTFREE 10 PCTUSED 40 INITRANS 1 MAXTRANS 255
NOCOMPRESS LOGGING
TABLESPACE "USERS" ;

```

```

CREATE TABLE "RSK180001"."CLAIMS_PAYMENT"
(
  "CLAIM_ID" NUMBER(20,0) NOT NULL ENABLE,
  "TRANSACTION_ID" NUMBER(20,0) NOT NULL ENABLE,
  CONSTRAINT "CLAIMS_PAYMENT_PK" PRIMARY KEY
("TRANSACTION_ID", "CLAIM_ID")
  USING INDEX PCTFREE 10 INITRANS 2 MAXTRANS 255 COMPUTE
  STATISTICS
  TABLESPACE "USERS" ENABLE,
  CONSTRAINT "FK1_CLAIM_PAYMENT" FOREIGN KEY
  CLAIM_ID")
  REFERENCES "RSK180001"."CLAIM" ("CLAIM_ID") ENABLE,
  CONSTRAINT "FK2_TRANS_ID" FOREIGN KEY
  ("TRANSACTION_ID")
  REFERENCES "RSK180001"."TRANSACTION" ("TRANSACTION_ID")
  ENABLE
) SEGMENT CREATION DEFERRED
PCTFREE 10 PCTUSED 40 INITRANS 1 MAXTRANS 255
NOCOMPRESS LOGGING
TABLESPACE "USERS" ;

```

```

CREATE TABLE "RSK180001"."HOSPITAL_CONTACT"
(
  "HOSPITAL_BRANCH_ID" NUMBER(20,0) NOT NULL ENABLE,
  "PHONE" NUMBER(10,0),
  "EMAIL" VARCHAR2(20 BYTE),
  CONSTRAINT "HOSPITAL_CONTACT_PK" PRIMARY KEY
("HOSPITAL_BRANCH_ID")
  USING INDEX PCTFREE 10 INITRANS 2 MAXTRANS 255 COMPUTE
  STATISTICS
  TABLESPACE "USERS" ENABLE,
  CONSTRAINT "FK_BRANCH_CONTACT" FOREIGN KEY
  ("HOSPITAL_BRANCH_ID")
  REFERENCES "RSK180001"."HOSPITAL_BRANCH" ("BRANCH_ID")
  ENABLE
) SEGMENT CREATION DEFERRED
PCTFREE 10 PCTUSED 40 INITRANS 1 MAXTRANS 255
NOCOMPRESS LOGGING

```

TABLESPACE "USERS" ;

```
CREATE TABLE "RSK180001"."PERSON_CONTACT"  
(  
    "SSN" NUMBER(20,0) NOT NULL ENABLE,  
    "PHONE" NUMBER(10,0),  
    "EMAIL" VARCHAR2(20 BYTE),  
    CONSTRAINT "PERSON_CONTACT_PK" PRIMARY KEY ("SSN",  
    "PHONE", "EMAIL")  
    USING INDEX PCTFREE 10 INITRANS 2 MAXTRANS 255 COMPUTE  
    STATISTICS  
    TABLESPACE "USERS" ENABLE,  
    CONSTRAINT "FK_PERSON_CONTACT" FOREIGN KEY ("SSN")  
    REFERENCES "RSK180001"."PERSON" ("SSN") ENABLE  
) SEGMENT CREATION DEFERRED  
PCTFREE 10 PCTUSED 40 INITRANS 1 MAXTRANS 255  
NOCOMPRESS LOGGING  
TABLESPACE "USERS" ;
```

```
CREATE TABLE "RSK180001"."BUYER_CONTACTS"  
(  
    "BUYER_ID" NUMBER(20,0) NOT NULL ENABLE,  
    "PHONE" NUMBER(10,0),  
    "EMAIL" NUMBER(10,0),  
    CONSTRAINT "BUYER_CONTACTS_PK" PRIMARY KEY  
    ("BUYER_ID", "PHONE", "EMAIL")  
    USING INDEX PCTFREE 10 INITRANS 2 MAXTRANS 255 COMPUTE  
    STATISTICS  
    TABLESPACE "USERS" ENABLE,  
    CONSTRAINT "FK1_BUYER_CONTACT" FOREIGN KEY  
    ("BUYER_ID")  
    REFERENCES "RSK180001"."BUYER" ("BUYER_ID") ENABLE  
) SEGMENT CREATION DEFERRED  
PCTFREE 10 PCTUSED 40 INITRANS 1 MAXTRANS 255  
NOCOMPRESS LOGGING  
TABLESPACE "USERS" ;
```


PL/SQL - Triggers:

- 1) Once claim is approved and payment is made to the buyer, status of the claim is updated to "PAID".

```
create or replace TRIGGER CLAIM_STATUS
AFTER INSERT ON CLAIMS_PAYMENT
FOR EACH ROW
BEGIN
update claim C set status = 'Paid ' where C.claim_id = :NEW.CLAIM_ID;
dbms_output.put_line('Status updated');
END;
```

Before

	CLAIM_ID	SUBMISSION_DATE	AMOUNT	STATUS	SEVERITY	DESCRIPTION	POLICY_ID
1	10	12-12-10	10000000	Submitted	(null)	(null)	1
2	16	12-12-10	100000	Submitted	(null)	(null)	1
3	1	18-01-01	50000	Paid	null	(null)	1
4	2	28-02-11	50000	Submitted	null	(null)	1
5	3	11-10-17	50000	Paid	null	(null)	1
6	4	10-08-18	50000	Processing	null	(null)	2
7	5	17-03-00	50000	Paid	null	(null)	2
8	9	12-12-10	1000	Paid	(null)	(null)	1

After

```
insert into claims_payment values(2, 1);
select * from claim;
```

	CLAIM_ID	SUBMISSION_DATE	AMOUNT	STATUS	SEVERITY	DESCRIPTION	POLICY_ID
1	10	12-12-10	10000000	Submitted	(null)	(null)	1
2	16	12-12-10	100000	Submitted	(null)	(null)	1
3	1	18-01-01	50000	Paid	null	(null)	1
4	2	28-02-11	50000	Paid	null	(null)	1
5	3	11-10-17	50000	Paid	null	(null)	1
6	4	10-08-18	50000	Processing	null	(null)	2
7	5	17-03-00	50000	Paid	null	(null)	2
8	9	12-12-10	1000	Paid	(null)	(null)	1

- 2) If amount of the claim submitted by the hospital is greater than the annual coverage of the policy, database trigger gives warning message.

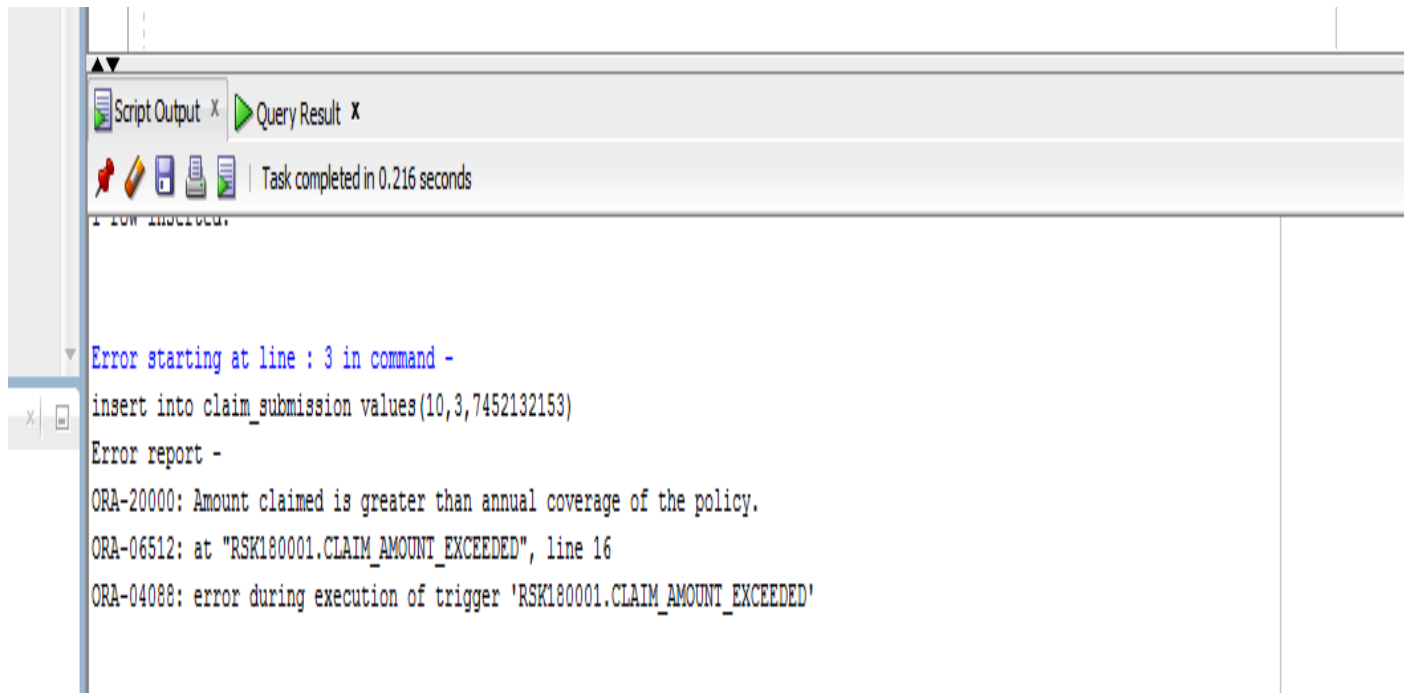
```
CREATE OR REPLACE TRIGGER CLAIM_AMOUNT_EXCEEDED
AFTER INSERT ON CLAIM_SUBMISSION
FOR EACH ROW
DECLARE
claimAmount CLAIM.AMOUNT%TYPE;
COVERAGE POLICY.ANNUAL_COVERAGE%TYPE;

BEGIN
SELECT AMOUNT INTO claimAmount
FROM CLAIM WHERE CLAIM_ID = :NEW.CLAIM_ID;

SELECT P.ANNUAL_COVERAGE INTO COVERAGE FROM POLICY P JOIN
CLAIM C ON C.POLICY_ID = P.POLICY_ID
where C.CLAIM_ID = :NEW.CLAIM_ID ;

IF (claimAmount > COVERAGE) THEN
RAISE_APPLICATION_ERROR(-20000, 'Amount claimed is greater than annual
coverage of the policy. ');
END IF;

END;
```

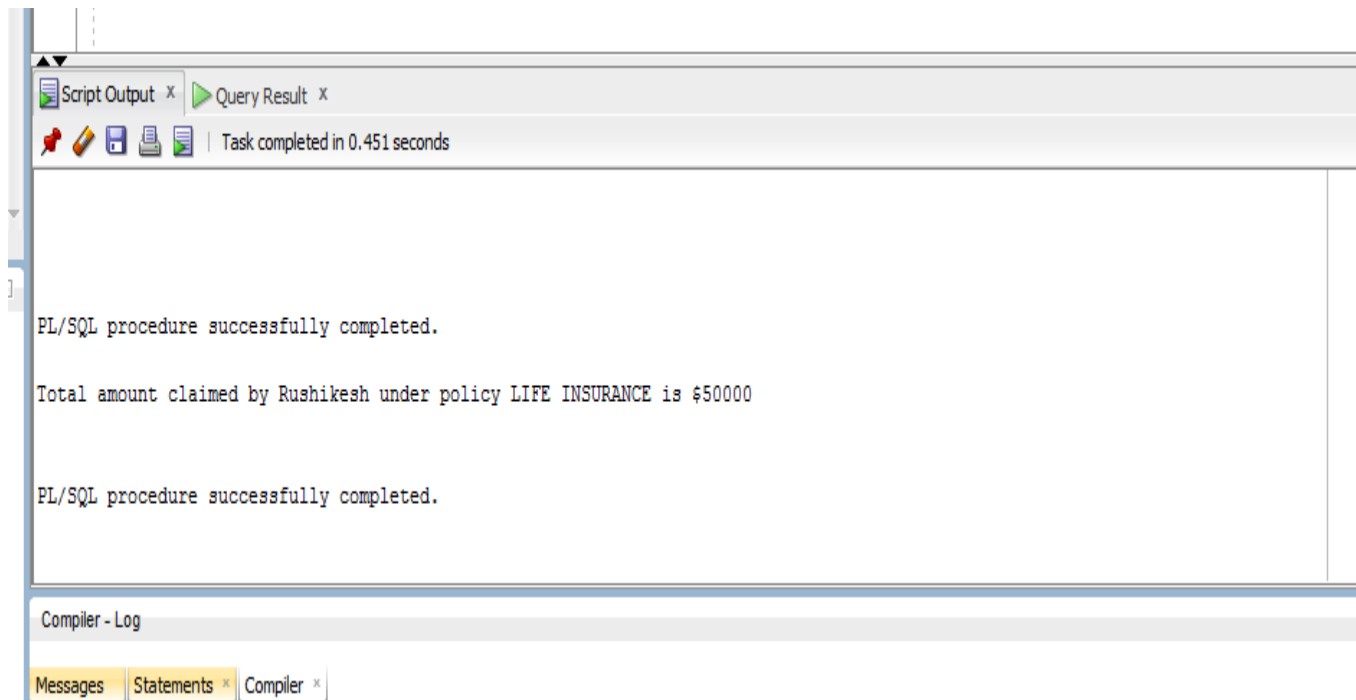


PL/SQL - Procedures:

- 1) Finding the total Claim Amount Paid to each person.

```
CREATE OR REPLACE PROCEDURE TOTALAMOUNTCLAIMED (PERSONID IN
PERSON.SSN%TYPE , POLICYID IN POLICY.POLICY_ID%TYPE) AS
TOTALAMOUNTCLAIMED CLAIM.AMOUNT % TYPE;
PERSONMNAME PERSON.NAME % TYPE;
POLICYNAME POLICY.NAME % TYPE;
BEGIN
    SELECT SUM(C.AMOUNT) INTO TOTALAMOUNTCLAIMED FROM CLAIM C JOIN
    CLAIM_SUBMISSION CS ON CS.CLAIM_ID = C.CLAIM_ID
    WHERE C.POLICY_ID = POLICYID AND CS.INSURED_PERSON_ID = PERSONID AND
    C.STATUS = 'PAID';
    SELECT P.NAME , PO.NAME INTO PERSONMNAME , POLICYNAME FROM PERSON P ,
    POLICY PO WHERE SSN = PERSONID AND PO.POLICY_ID = POLICYID;
    IF TOTALAMOUNTCLAIMED IS NULL THEN
        DBMS_OUTPUT.PUT_LINE('TOTAL AMOUNT CLAIMED BY PERSON = ' || 0);
    ELSE
```

```
DBMS_OUTPUT.PUT_LINE('TOTAL AMOUNT CLAIMED BY ' || PERSONMNAME || '  
UNDER POLICY ' || POLICYNAME || ' IS $' || TOTALAMOUNTCLAIMED);  
END IF;  
END;
```



The screenshot shows a SQL IDE interface. At the top, there are tabs for 'Script Output' and 'Query Result'. Below the tabs, a status bar indicates 'Task completed in 0.451 seconds'. The main output area displays the following text:

```
PL/SQL procedure successfully completed.  
  
Total amount claimed by Rushikesh under policy LIFE INSURANCE is $50000  
  
PL/SQL procedure successfully completed.
```

At the bottom, there is a 'Compiler - Log' section with tabs for 'Messages', 'Statements', and 'Compiler'.

- 2) Based on the number of policies sold, the agent's salary is increased.

```
CREATE OR REPLACE PROCEDURE SALARY_INCREASE
AS
POLICYCOUNT INT;
AGENT PERSON.SSN%TYPE;
SALARYINCR PERSON.SALARY%TYPE;
CURSOR AGENTCUR IS
SELECT COUNT(POLICY_ID) , B.AGENT_ID, P.SALARY FROM BOUGHT_POLICIES B JOIN
PERSON P ON
P.SSN = B.AGENT_ID GROUP BY B.AGENT_ID,P.SALARY;

BEGIN
OPEN AGENTCUR;
LOOP
    FETCH AGENTCUR INTO POLICYCOUNT, AGENT, SALARYINCR;
    EXIT WHEN (AGENTCUR%NOTFOUND);
    DBMS_OUTPUT.put_line(SALARYINCR);
    IF POLICYCOUNT < 3 THEN
        SALARYINCR:= SALARYINCR * 1.1;
    ELSIF POLICYCOUNT < 5 THEN
        SALARYINCR:= SALARYINCR * 1.2;
    ELSIF POLICYCOUNT < 10 THEN
        SALARYINCR:= SALARYINCR * 1.3;
    ELSE
        SALARYINCR:= SALARYINCR * 1.5;
    END IF;
    DBMS_OUTPUT.put_line(SALARYINCR);
    UPDATE PERSON SET SALARY = SALARYINCR WHERE SSN = AGENT;
END LOOP;
CLOSE AGENTCUR;
END;
```

Salaries of Agents before increment.

The screenshot shows a SQL Query Builder window with two tabs: 'Worksheet' and 'Query Builder'. The 'Query Builder' tab is active, displaying the following SQL code:

```

INSERT INTO BOUGHT_POLICIES VALUES ( 1,2,7452132163,'Y',500,5);
INSERT INTO BOUGHT_POLICIES VALUES ( 2,2,7452132163,'Y',500,5);
INSERT INTO BOUGHT_POLICIES VALUES ( 1,2,7452132162,'Y',500,5);
INSERT INTO BOUGHT_POLICIES VALUES ( 4,2,7452132162,'Y',500,5);
INSERT INTO BOUGHT_POLICIES VALUES ( 4,2,7452132164,'Y',500,5);
INSERT INTO BOUGHT_POLICIES VALUES ( 1,2,7452132164,'Y',500,5);
INSERT INTO BOUGHT_POLICIES VALUES ( 2,2,7452132164,'Y',500,5);
INSERT INTO BOUGHT_POLICIES VALUES ( 3,2,7452132164,'Y',500,5);

SELECT COUNT(POLICY_ID) , B.AGENT_ID, P.SALARY FROM BOUGHT_POLICIES B JOIN PERSON P ON
P.SSN = B.AGENT_ID GROUP BY B.AGENT_ID,P.SALARY;

```

Below the query editor, the 'Query Result' tab is active, showing the results of the query. The status bar indicates 'All Rows Fetched: 3 in 0.162 seconds'. The results are displayed in a table with three columns: COUNT(POLICY_ID), AGENT_ID, and SALARY.

	COUNT(POLICY_ID)	AGENT_ID	SALARY
1	6	7452132162	90000
2	2	7452132163	90000
3	4	7452132164	90000

Salaries incremented.

	COUNT(POLICY_ID)	AGENT_ID	SALARY
1	6	7452132162	117000
2	2	7452132163	99000
3	4	7452132164	108000