



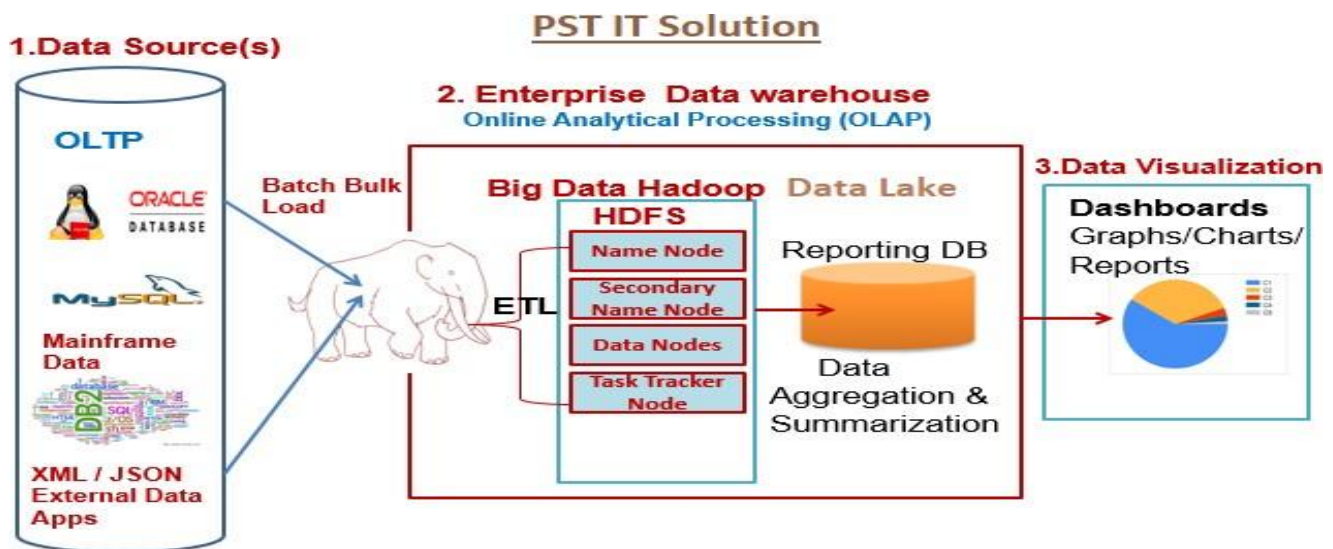
# **HEALTH CARE SYSTEM ANALYSIS**

**PST**  
**IT SOLUTIONS**

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## Data Migration Process :-



I have around 3 years of IT experience. 2 years of working in Hadoop Big Data from work In Company Name(currently working). I am working for client name and the project was Data Ingestion into Data Lake. So client name as Hadoop vendor they are using Cloudera that is own premises. As of now the Hadoop cluster is not on cloud so the cluster is on own premises, So we have migrated data from n number of sources of client-name into data lake.

Client-name having 100s of data source and multiple datasets are there, so that we build a data ingestion framework. And that data ingestion framework support 3 ingestion pattern which are

1. Data Base Ingestion
2. File Based Ingestion
3. CDC(Change Data Capture) or we can say Incremental data load

My role was a Developer, and also involved in the 1<sup>st</sup> part of the project this is called data acquisition. We have to meet with the client and requester who needs to inject their data so we have to provide a solution based on that source system.

Like :-

1. What type of source system is this.
2. What type of data they are having and    ii
3. How much data is there

So based on these we are advising that which type of data ingestion pattern we have to use.

So mainly

1. In data base ingestion we are using the sqoop.
2. In the file based ingestion we are using Hadoop commands and shell scripting.
3. And 3<sup>rd</sup> one is CDC(Changed Data Capture) In that we are using one 3<sup>rd</sup> party tool i.e. Attunity.

- I. So in database ingestion we are like directly connecting the source database and we are importing the data into data lake.
- II. In the file base ingestion or in some sources, they are not providing the read access of their databases for that they are extracting a data into file and they are sending a file into our edge node in the landing area.

So there are two ways we set up this framework or environment to transfer a file.

1. One is SFTP and
2. Connect Direct Gateways.

So in a file based there are one more category like they can send

1. Fixed length file
2. Delimited file
3. JSON or XML file

So once the data is in our landing zone, we are team is like we are preparing a code for that and then we are creating the DDL and configuration and we are creating a table. Ultimately, we are ingesting all data into a hive table only.

So this is all the phases like we have to go through the UAT development and then in production.

The first production activity we have to do manually like the first ingestion we have to perform manually and then we have to setup a **control-M** based on that ingestion frequency agreed on this data acquisition part with the source team.

So in data lake, This is the central repository and there nobody is allow to transform, update or change the data in data lake.

So for consumption purpose, we are propagating the data into some other cluster, those are also physical or separate cluster for business wise and as it is like we are propagating the data in the consumer cluster.

## Business Challenge / Requirement

A Health Care insurance company is facing challenges in enhancing its revenue and understanding the customers so it wants to take help of Big Data Ecosystem to analyze the Competitors company data received from varieties of sources, namely through scrapping and third-party sources. This analysis will help them to track the behavior, condition of customers so that to customize offers for them to buy insurance policies and also calculate royalties to those customers who buy policies in past, this in turn will enhance their revenues.

### 1. The goal of the project

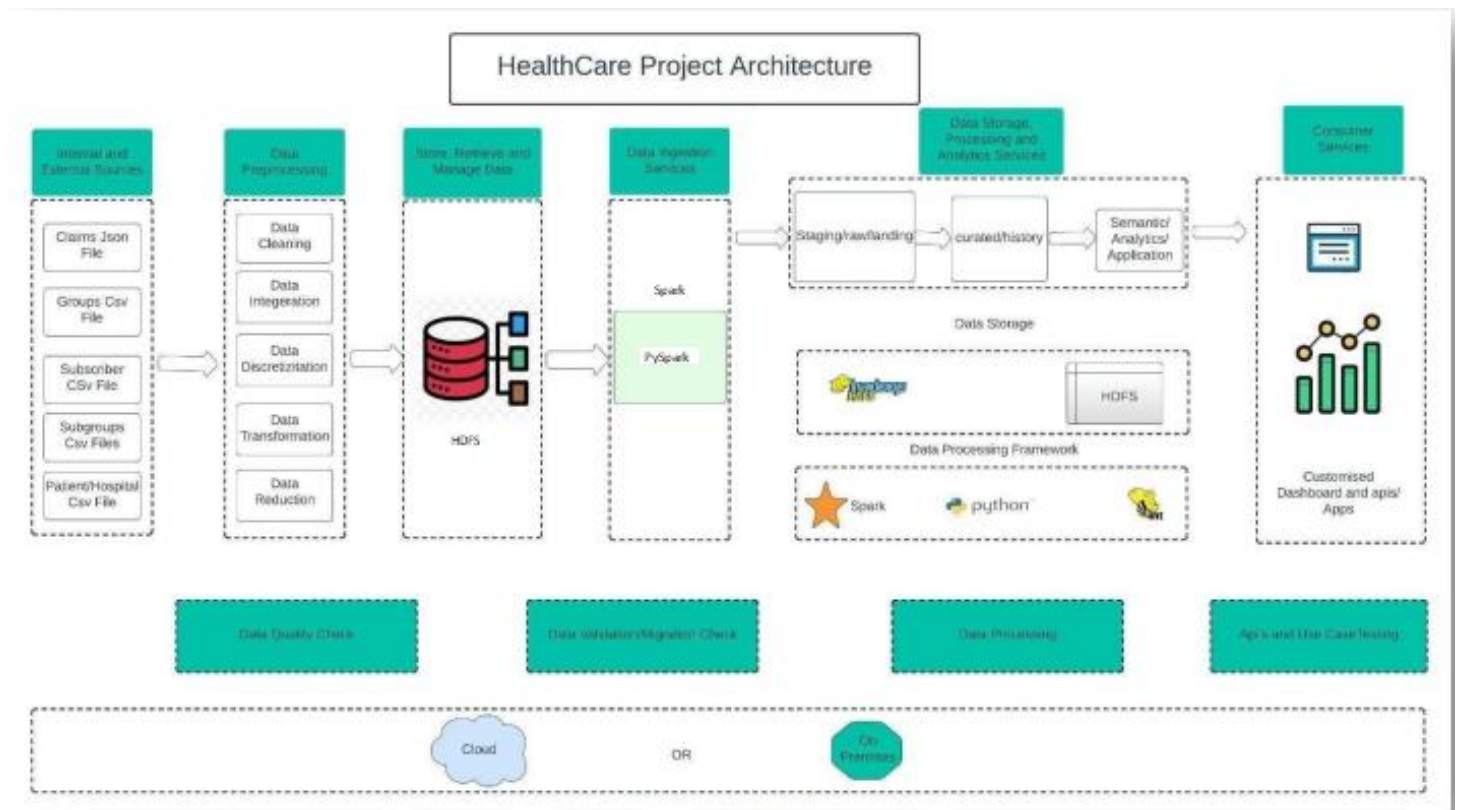
The goal of the project is to create data pipelines for the Health Care insurance company which will make the company make appropriate business strategies to enhance their revenue by analyzing customers behaviors and send offers and royalties to customers respectively.

### 2. Data Flow Architecture / Process Flow

1. Multiple Data base sources and Edge node receives data files in form of json ,csv and XML. These files are coming from the sources based on user interaction methodology.
2. The files data is validated, enriched and processed before loading into HDFS System.
3. After validated the files data, we are creating the data model for HDFS in HIVE so that we can store the files data into the HDFS.
4. After storing the data into the HDFS, we now transform according to our business requirements.
5. Finally, data landed to again HDFS needs to be analyzed by some analytical queries.
6. After analytics queries, we test the result and use the result to enhance the company revenues.

A schematic flow of operations with the best suited components is shown below





### 3. Dataset Explanation & Schema

Data coming from third-party sources reside in local directory and has csv and json format.

#### Fields present in the data files and tables-

Data files contain the below fields.

#### Column Name/Field Name Column Description/Field Description

##### Json File Fields

- CLAIM\_ID
- PATIENT\_ID
- DISEASE\_NAME
- SUB\_ID
- CLAIM\_DATE
- CLAIM\_TYPE
- CLAIM\_AMOUNT
- CLAIMED\_OR\_REJECTED

##### CSV File 1 Fields (Patient.csv)

- PATIENT\_ID
- PATIENT\_NAME
- PATIENT\_GENDER
- PATIENT\_BIRTHDATE

- PATIENT\_PHONE
- HOSPITAL\_ID
- DISEASE\_NAME
- CITY

**CSV File 2 Fields (Subscriber.csv)**

- SUB\_ID
- FIRST\_NAME
- LAST\_NAME
- STREET
- BIRTH\_DATE
- GENDER
- PHONE\_NO
- COUNTRY
- CITY
- ZIP\_CODE
- SUBGRP\_ID
- ELIG\_IND
- E\_DATE
- T\_DATE

**CSV File 3 Fields (Group.csv)**

- GRP\_ID
- GRP\_NAME
- PREMIUM\_WRITTEN
- GRP\_TYPE
- PIN\_CODE
- CITY
- COUNTRY
- ESTABLISHMENT\_YEAR

**CSV File 4 Fields (disease.csv)**

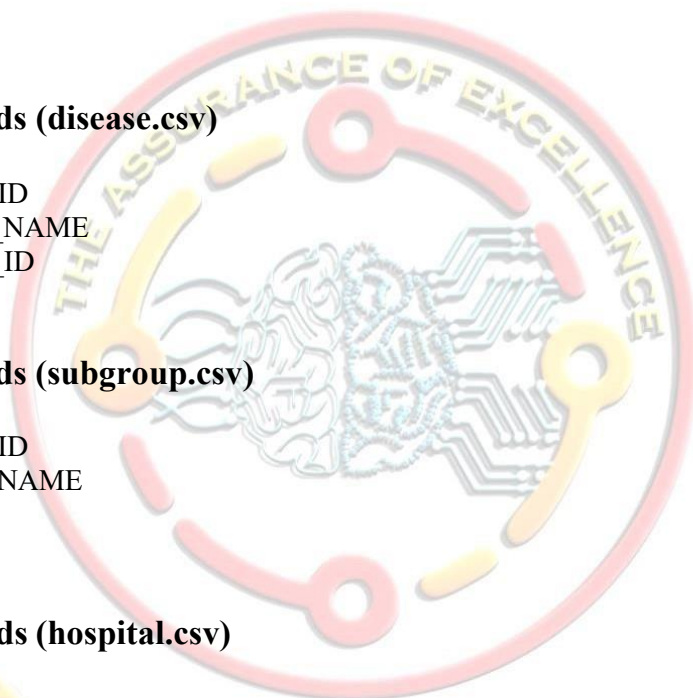
- SUBGRP\_ID
- DISEASE\_NAME
- DISEASE\_ID

**CSV File 5 Fields (subgroup.csv)**

- SUBGRP\_ID
- SUBGRP\_NAME
- GRP\_ID

**CSV File 6 Fields (hospital.csv)**

- HOSPITAL\_ID
- HOSPITAL\_NAME
- CITY
- STATE
- COUNTRY



## 4. Problem Statements / Tasks

### 5.1 Problem 1- Data Pre-processing, Enrichment and Load into Database

- Parse and Infer schema of the given xml and csv formats data is ingested.
- We are expected to do general data cleaning steps like empty string replacements with actual NULL, data type checks (including date format) and corrections/ rejections, file name checks, empty file checks, malformed record checks and rejection etc.

Learners must apply below rules for data enrichment process:

Validate the data from the input file and load only valid records into the target table according to the constraints mentioned in the target table.

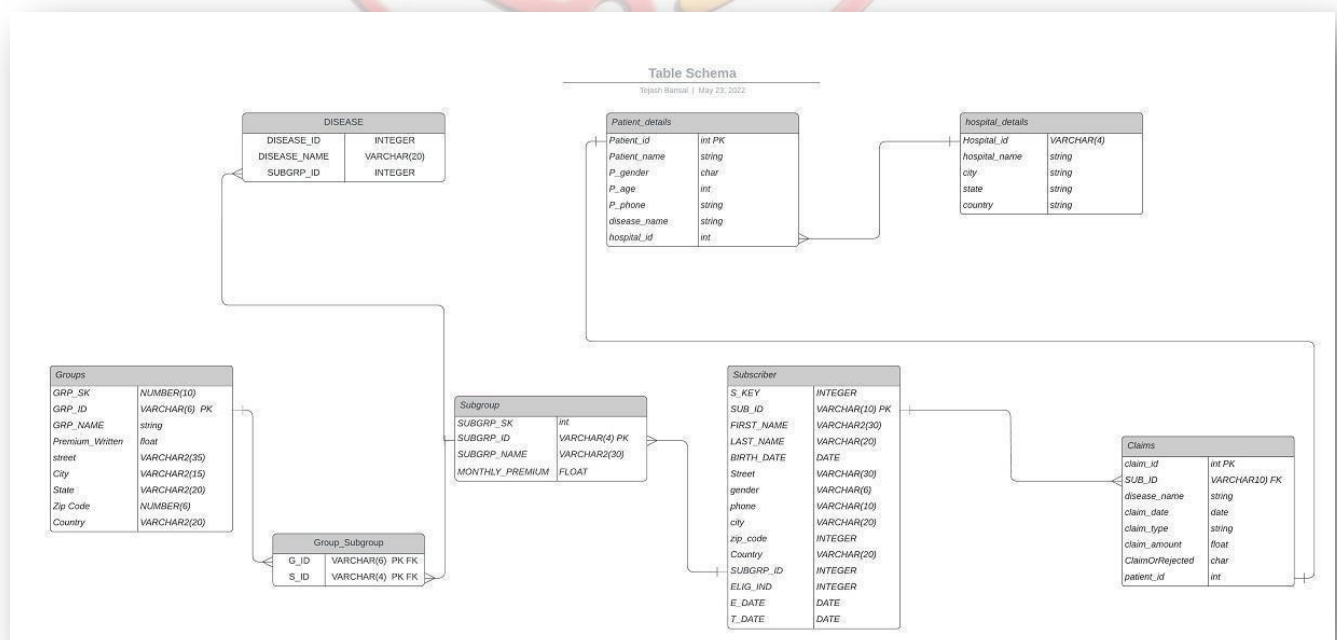
Load only the members who are currently effective. (i.e.) SYSDATE BETWEEN EFFT\_DT AND TERM\_DT

Reject records if the Subscriber\_Id has less than 9 characters.

Populate leading zeroes in the fields GROUP\_ID and SUBGRP\_ID while populating data into the Target table.

Also validate the Group Id and Subgrp\_Id against the Subgrp table and load only matching data into the target table

### Schema Design for SQL Database





## 5.2 Problem 2 - Data Analysis (Spark/Hive)

Once we have made the data ready for analysis, we have to perform below analysis on a batch basis.

1. Find those Subscribers having age less than 30 and they subscribe any subgroup. The output can be in form of a file with columns.

COUNT\_OF\_SUBSCRIBER

2. Which groups of policies subscriber subscribe mostly Government or private. The output can be in form of a file with columns.

GRP\_TYPE,  
COUNT(GRP\_ID)

3. List female patients over the age of 40 that have undergone knee surgery in the past year. The output can be in form of a file with columns.

PATIENT\_NAME

4. Give the Most Profitable subgroup which subscribe the greatest number of times. The output can be in form of a file with columns.

SUBGRP\_NAME,  
COUNT

5. Give out which groups has maximum subgroups (Policies Groups). The output can be in form of a file with columns.

G\_ID,  
SUBGRP\_COUNT

6. Give the result from where most of the claims are coming (city). The output can be in form of a file with columns.

CITY,  
MAX\_CLAIM

7. List all the patients whose age is below 18 and who admit for cancer in the hospital. The output can be in form of a file with columns.

PATIENT\_ID,  
PATIENT\_NAME,  
AGE

8. List patients who have cashless insurance and have total charges greater than or equal for Rs. 50,000. The output can be in form of a file with columns.

PATIENT\_NAME,  
PATIENT\_GENDER,  
PATIENT\_BIRTH\_DATE

9. Find out total number of claims which were rejected by the groups (insurance companies). The output can be in form of a file with columns.

CLAIM\_OR\_REJECTED,  
COUNT\_CLAIM\_ID)

10. Give out which disease having maximum number of claims. The output can be in form of a file with columns.

DISEASE\_NAME,  
COUNT\_CLAIMS

Store the above analyzed results as a separate dataset in HDFS.

### Approach to Solve

Below steps can be taken to start solving the project problem statements:

- Start by generating Raw Data files in Gateway node location
- Problem 1: Write code to clean & transform data according to the use cases and saved inside the /Processed Data/files folder. After that perform some EDA on top of the cleaned data. Write code and run to take data from /processed data /files and stores all the files in the SQL database using the python and MySQL connector.
- After that we have to write some Sqoop scripts for importing the data from RDBMS System to the HDFS directory /user/hive/warehouse/HEALTHCARE.DB/files
- Write code and run to take data from /user/hive/warehouse/HEALTHCARE.DB/files and solve Problem 2 in a PYSPARK Batch
- Write code and run to take data from '/spark output/files' and perform some visualization on that output files.
- At the end we test all use cases according to the business.

## 6. Coding/Code Templates:

### 6.1 Data Processing

#### 6.1.1 Conversion of raw data to processed data:

For each raw file we have checked null values, duplicate values and other parameters and then converted into

processed dataset. here are some samples of codes.

```
[ ] # Count the total Null values
df.isnull().sum()

Patient_id      0
patient_name    0
patient_gender  0
patient_birth_date 0
patient_phone   0
disease_name    0
city            0
hospital_id     0
dtype: int64

[ ] # Check the duplicates
df.duplicated()

[ ] # Drop duplicates
df.drop_duplicates(subset=None, keep='first', inplace=False, ignore_index=False)
```

|     | Patient_id | Patient_name | patient_gender | patient_birth_date | patient_phone  | disease_name   | city         | hospital_id |
|-----|------------|--------------|----------------|--------------------|----------------|----------------|--------------|-------------|
| 0   | 187158     | Harbir       | Female         | 1924-06-30         | +91 0112009318 | Galactosemia   | Rourkela     | H1001       |
| 1   | 112766     | Brahmdev     | Female         | 1948-12-20         | +91 1727749552 | Bladder cancer | Tiruvottiyur | H1016       |
| 2   | 199252     | Ujjawal      | Male           | 1980-04-16         | +91 8547451606 | Kidney cancer  | Berhampur    | H1009       |
| 3   | 133424     | Ballari      | Female         | 1968-09-25         | +91 0106026841 | Suicide        | Bihar Sharif | H1017       |
| 4   | 172579     | Devnath      | Female         | 1946-05-01         | +91 1868774631 | Food allergy   | Bidhannagar  | H1019       |
| ... | ...        | ...          | ...            | ...                | ...            | ...            | ...          | ...         |
| 65  | 191132     | Dipesh       | Female         | 1948-04-01         | +91 5851958964 | Glaucoma       | Kochi        | H1016       |
| 66  | 105686     | NA           | Male           | 1930-09-01         | +91 7061843400 | Hepatitis      | Kolhapur     | H1008       |

Here we are checking for SUB\_ID if is it length of 9 or not

```
[ ] # Check Subscriber Id not less than 9 digit
count = 0
for i in df['sub_id'].values:
    if len(i)<9:
        df.drop([count], axis=0, inplace=True)
    elif len(str(i))>10:
        df.drop([count], axis=0, inplace=True)
    count = count+1

[ ] # Check the Elig_ind types
df['elig_ind'].unique()
array(['Y', 'N'], dtype=object)

[ ] # Check always eff_date is greater than term_date
count = 0
for x,y in df[['eff_date','term_date']].values:
    dob1 = datetime.strptime(x,'%Y-%m-%d').date()
    dob2 = datetime.strptime(y,'%Y-%m-%d').date()
    if dob1 > dob2:
        df.drop([count], axis=0, inplace=True)
    count = count + 1
```

## 6.1.2 Processed Dataset

Some snippets of processed dataset which is further used to create RDBMS.

|    | A      | B          | C      | D          | E              | F                | G                   | H     |
|----|--------|------------|--------|------------|----------------|------------------|---------------------|-------|
| 1  | 187158 | Harbir     | Female | 1960-02-24 | +91 0112009318 | Galactosemia     | Rourkela            | H1001 |
| 2  | 112766 | Brahmdev   | Female | 1955-05-30 | +91 1727749552 | Bladder cancer   | Tiruvottiyur        | H1016 |
| 3  | 199252 | Ujjawal    | Male   | 1965-12-31 | +91 8547451606 | Kidney cancer    | Berhampur           | H1009 |
| 4  | 133424 | Ballari    | Female | 1979-06-11 | +91 0106026841 | Suicide          | Bihar Sharif        | H1017 |
| 5  | 172579 | Devnath    | Female | 1982-02-22 | +91 1868774631 | Food allergy     | Bidhannagar         | H1019 |
| 6  | 171320 | Atasi      | Male   | 1980-02-21 | +91 9747336855 | Whiplash         | Amravati            | H1013 |
| 7  | 107794 | Manish     | Male   | 2010-01-26 | +91 4354294043 | Sunbathing       | Panvel              | H1004 |
| 8  | 130339 | Aakar      | Female | 1990-04-24 | +91 2777633911 | Drug consumption | Bihar Sharif        | H1000 |
| 9  | 110377 | Gurudas    | Male   | 1981-07-16 | +91 1232859381 | Dengue           | Kamarhati           | H1001 |
| 10 | 149367 | NA         | Male   | 1955-06-03 | +91 1780763280 | Head banging     | Bangalore           | H1013 |
| 11 | 156168 | NA         | Male   | 2010-02-17 | +91 5586075345 | Fanconi anaemia  | Rajkot              | H1004 |
| 12 | 114241 | NA         | Female | 2001-04-30 | +91 4146391938 | Breast cancer    | Ghaziabad           | H1015 |
| 13 | 146382 | Dhamadaas  | Male   | 1964-10-25 | +91 6345482027 | Anthrax          | Bhalswa Jahangir Pu | H1019 |
| 14 | 132748 | Brahmvir   | Male   | 1944-04-04 | +91 7316972612 | Cystic fibrosis  | Ambala              | H1018 |
| 15 | 167340 | NA         | Female | 1953-04-04 | +91 2960004518 | Galactosemia     | Surendranagar Dudh  | H1003 |
| 16 | 135184 | Bhagvan    | Female | 2011-02-26 | +91 0297693485 | Dengue           | Bhimavaram          | H1018 |
| 17 | 179662 | Amritkala  | Female | 1992-04-29 | +91 0537157280 | Smallpox         | Meerut              | H1018 |
| 18 | 184479 | Bandhu     | Male   | 1981-05-04 | +91 0695289163 | Pollen allergy   | Chinsurah           | H1010 |
| 19 | 156988 | Bhagavaana | Female | 1950-07-31 | +91 6071745855 | Breast cancer    | Shahjahanpur        | H1012 |
| 20 | 132870 | NA         | Female | 1959-01-06 | +91 8906694405 | Glaucoma         | Jabalpur            | H1017 |
| 21 | 148137 | Umang      | Female | 2017-02-26 | +91 9485838770 | Pet allergy      | Haridwar            | H1002 |
| 22 | 113280 | Darsana    | Male   | 1951-09-11 | +91 7676311811 | Rett Syndrome    | Dibrugarh           | H1019 |
| 23 | 134184 | Prakash    | Female | 1998-06-26 | +91 9268324471 | Flu              | Kottayam            | H1001 |
| 24 | 122592 | Vaijayanti | Male   | 1969-04-06 | +91 9358851649 | Cholera          | Mira-Bhayandar      | H1009 |

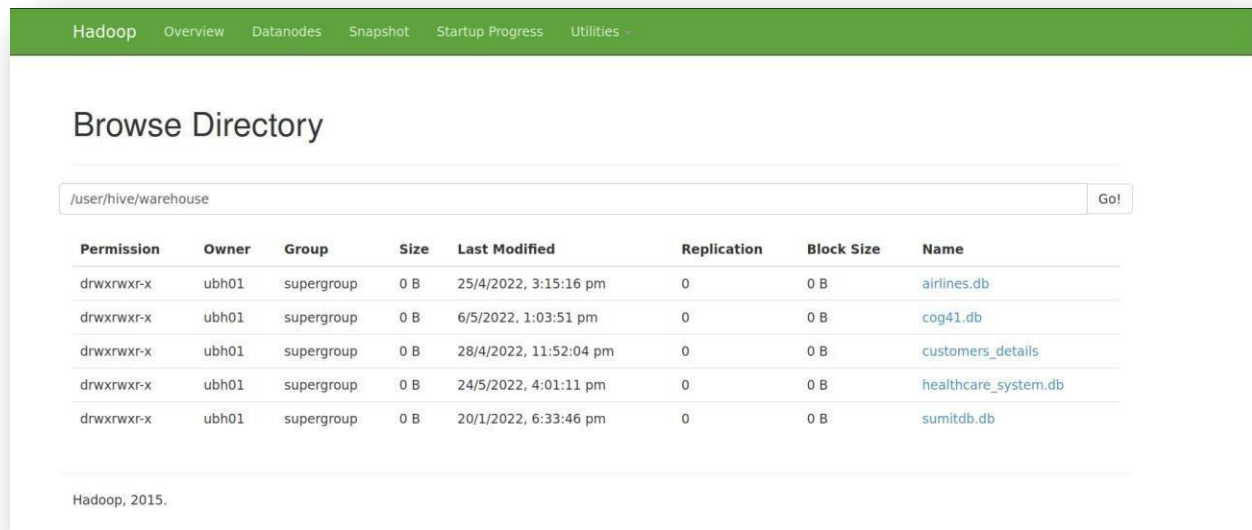
|    | A          | B          | C           | D                 | E          | F      | G              | H     | I                   | J      | K    | L  | M |
|----|------------|------------|-------------|-------------------|------------|--------|----------------|-------|---------------------|--------|------|----|---|
| 0  | SUBID10000 | Harbir     | Vishwakarma | Baria Marg        | 1924-06-30 | Female | +91 0112009318 | India | Rourkela            | 767058 | S107 | Y  |   |
| 1  | SUBID10001 | Brahmdev   | Sonkar      | Lala Marg         | 1948-12-20 | Female | +91 1727749552 | India | Tiruvottiyur        | 34639  | S105 | Y  |   |
| 2  | SUBID10002 | Ujjawal    | Devi        | Mammen Zila       | 1960-04-16 | Male   | +91 8547451606 | India | Berhampur           | 914455 | S106 | N  |   |
| 3  | SUBID10003 | Ballari    | Mishra      | Sahni Zila        | 1969-09-25 | Female | +91 0106026841 | India | Bihar Sharif        | 91481  | S104 | N  |   |
| 4  | SUBID10004 | Devnath    | Shrivastav  | Magar Zila        | 1946-05-01 | Female | +91 1868774631 | India | Bidhannagar         | 531742 | S110 | N  |   |
| 5  | SUBID10005 | Atasi      | Seth        | Khatni Nagar      | 1967-10-02 | Male   | +91 9747336855 | India | Amravati            | 229062 | S104 | Y  |   |
| 6  | SUBID10006 | Manish     | Mauriya     | Swaminathan Chowk | 1967-06-06 | Male   | +91 4354294043 | India | Panvel              | 438733 | S109 | NA |   |
| 7  | SUBID10007 | Aakar      | Yadav       | Swamy             | 1925-03-05 | Female | +91 2777633911 | India | Bihar Sharif        | 535907 | S104 | N  |   |
| 8  | SUBID10008 | Gurudas    | Gupta       | Sarfn Nagar       | 1945-05-06 | Male   | +91 1232859381 | India | Kamarhati           | 933226 | S103 | Y  |   |
| 9  | SUBID10009 | NA         | Gupta       | Thakur Circle     | 1925-06-12 | Male   | +91 1780763280 | India | Bangalore           | 957469 | S105 | Y  |   |
| 10 | SUBID1010  | NA         | Divedi      | Dhillon           | 1976-02-03 | Male   | +91 5586075345 | India | Rajkot              | 911319 | S102 | Y  |   |
| 11 | SUBID10011 | NA         | Vishwakarma | Rajagopalan       | 1955-01-22 | Female | +91 4146391938 | India | Ghaziabad           | 337042 | S106 | N  |   |
| 12 | SUBID10012 | Dhamadaas  | Tiwari      | Rama              | 1964-04-29 | Male   | +91 6345482027 | India | Bhalswa Jahangir Pu | 430793 | S103 | N  |   |
| 13 | SUBID10013 | Brahmvir   | Rai         | Shah Path         | 1991-11-11 | Male   | +91 7316972612 | India | Ambala              | 249998 | S106 | N  |   |
| 14 | SUBID10014 | NA         | Shrivastav  | Chandra Path      | 1981-01-25 | Female | +91 2960004518 | India | Surendranagar Dudh  | 111966 | S102 | N  |   |
| 15 | SUBID10015 | Bhagvan    | Shrivastav  | Edwin             | 1966-07-24 | Female | +91 0297693485 | India | Bhimavaram          | 436513 | S105 | Y  |   |
| 16 | SUBID10016 | Amritkala  | Shrivastav  | Guha Path         | 1933-11-20 | Female | +91 0537157280 | India | Meerut              | 863467 | S106 | Y  |   |
| 17 | SUBID10017 | Bandhu     | Seth        | Vanugheee         | 1996-10-15 | Male   | +91 0695289163 | India | Chinsurah           | 136713 | S108 | N  |   |
| 18 | SUBID10018 | Bhagavaana | Kumar       | Kulkarni Zila     | 1935-09-12 | Female | +91 6071745855 | India | Shahjahanpur        | 597276 | S101 | N  |   |
| 19 | SUBID10019 | NA         | Mauriya     | Sharnf Nagar      | 1924-11-09 | Female | +91 8906694405 | India | Jabalpur            | 958538 | S104 | N  |   |
| 20 | SUBID10020 | Umang      | Shrivastav  | Balay Chowk       | 1963-07-14 | Female | +91 9485838770 | India | Haridwar            | 181692 | S109 | Y  |   |
| 21 | SUBID10021 | Darsana    | Yadav       | Upadhyay Zila     | 1932-05-29 | Male   | +91 7676311811 | India | Dibrugarh           | 187414 | S109 | Y  |   |
| 22 | SUBID10022 | Prakash    | Rao         | Sachar            | 1923-09-15 | Female | +91 9268324471 | India | Kottayam            | 180680 | S104 | N  |   |
| 23 | SUBID10023 | Vaijayanti | Pratap      | Khalisa Nagar     | 1920-11-13 | Male   | +91 9358851649 | India | Mira-Bhayandar      | 419190 | S102 | Y  |   |



## 6.2 Hive and Sqoop

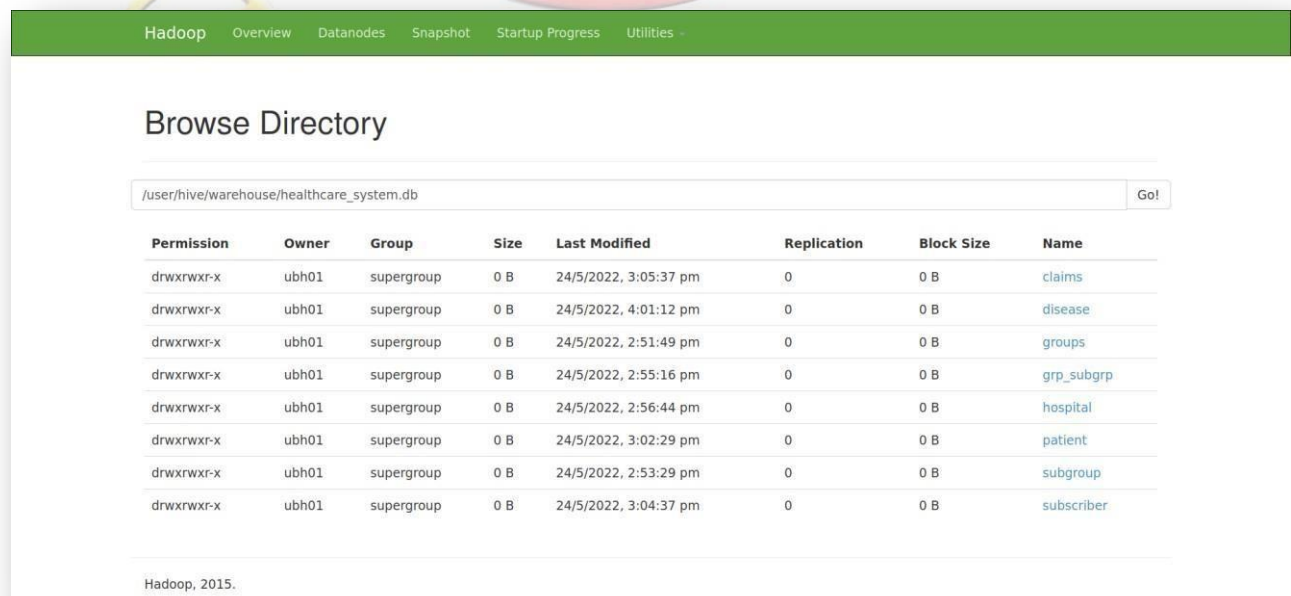
We have used Sqoop to import the data form RDBMS to Hive and there we can perform our necessary tasks to get the outputs

Here is the HEALTHCARE\_SYSTEM Database created in Hive.



| Permission | Owner | Group      | Size | Last Modified          | Replication | Block Size | Name                                 |
|------------|-------|------------|------|------------------------|-------------|------------|--------------------------------------|
| drwxrwxr-x | ubh01 | supergroup | 0 B  | 25/4/2022, 3:15:16 pm  | 0           | 0 B        | <a href="#">airlines.db</a>          |
| drwxrwxr-x | ubh01 | supergroup | 0 B  | 6/5/2022, 1:03:51 pm   | 0           | 0 B        | <a href="#">cog41.db</a>             |
| drwxrwxr-x | ubh01 | supergroup | 0 B  | 28/4/2022, 11:52:04 pm | 0           | 0 B        | <a href="#">customers_details</a>    |
| drwxrwxr-x | ubh01 | supergroup | 0 B  | 24/5/2022, 4:01:11 pm  | 0           | 0 B        | <a href="#">healthcare_system.db</a> |
| drwxrwxr-x | ubh01 | supergroup | 0 B  | 20/1/2022, 6:33:46 pm  | 0           | 0 B        | <a href="#">sumitdb.db</a>           |

The tables created in the databases as mentioned in the schema



| Permission | Owner | Group      | Size | Last Modified         | Replication | Block Size | Name                       |
|------------|-------|------------|------|-----------------------|-------------|------------|----------------------------|
| drwxrwxr-x | ubh01 | supergroup | 0 B  | 24/5/2022, 3:05:37 pm | 0           | 0 B        | <a href="#">claims</a>     |
| drwxrwxr-x | ubh01 | supergroup | 0 B  | 24/5/2022, 4:01:12 pm | 0           | 0 B        | <a href="#">disease</a>    |
| drwxrwxr-x | ubh01 | supergroup | 0 B  | 24/5/2022, 2:51:49 pm | 0           | 0 B        | <a href="#">groups</a>     |
| drwxrwxr-x | ubh01 | supergroup | 0 B  | 24/5/2022, 2:55:16 pm | 0           | 0 B        | <a href="#">grp_subgrp</a> |
| drwxrwxr-x | ubh01 | supergroup | 0 B  | 24/5/2022, 2:56:44 pm | 0           | 0 B        | <a href="#">hospital</a>   |
| drwxrwxr-x | ubh01 | supergroup | 0 B  | 24/5/2022, 3:02:29 pm | 0           | 0 B        | <a href="#">patient</a>    |
| drwxrwxr-x | ubh01 | supergroup | 0 B  | 24/5/2022, 2:53:29 pm | 0           | 0 B        | <a href="#">subgroup</a>   |
| drwxrwxr-x | ubh01 | supergroup | 0 B  | 24/5/2022, 3:04:37 pm | 0           | 0 B        | <a href="#">subscriber</a> |



## 6.3 Apache Spark

After uploading the data in to HDFS we connected spark. Here we analyze the data with help of python. Here we get our desired result in tabular form and that result is used to visualize our use cases.

Some snippet of the following code and result-

```
# List patients who have cashless insurance and have total charges greater than or equal for Rs. 50,000.

sparkdf = spark.sql("select patient_name,patient_gender,patient_birth_date \
    from patient join claims on patient.patient_id = claims.patient_id \
    where claim_amount >= 50000 and claim_type = 'claims of value'")
sparkdf.toPandas().to_csv('Spark Outputs for Visualization/query13.csv')
sparkdf.show()
```

| patient_name | patient_gender | patient_birth_date |
|--------------|----------------|--------------------|
| Anjushree    | Male           | 1982-06-28         |
| Chitranjan   | Female         | 2020-10-27         |
| Gensho       | Male           | 1991-07-27         |
| Vaijayanti   | Male           | 1969-04-06         |
| Aakar        | Female         | 1990-04-24         |
| NA           | Female         | 1959-01-06         |
| Saroj        | Female         | 1953-07-21         |
| Bhagvan      | Female         | 2011-02-26         |
| Dharmadaas   | Male           | 1964-10-25         |
| Umang        | Female         | 2017-02-26         |
| NA           | Male           | 1955-06-03         |
| Kishan       | Male           | 1955-06-30         |
| NA           | Female         | 1953-04-04         |
| Devnath      | Female         | 1982-02-22         |
| Harbir       | Female         | 1960-02-24         |
| Ekant        | Male           | 1969-11-01         |
| NA           | Male           | 2013-10-30         |
| NA           | Male           | 1956-04-04         |
| Lalit        | Female         | 1978-04-30         |
| Ujjawal      | Male           | 1965-12-31         |

```
# Find out hospital which serve most number of patients
sparkdf = spark.sql("select hospital_name,count(patient_id) as total_patient \
    from hospital join patient on hospital.hospital_id=patient.hospital_id \
    group by hospital_name order by total_patient desc")

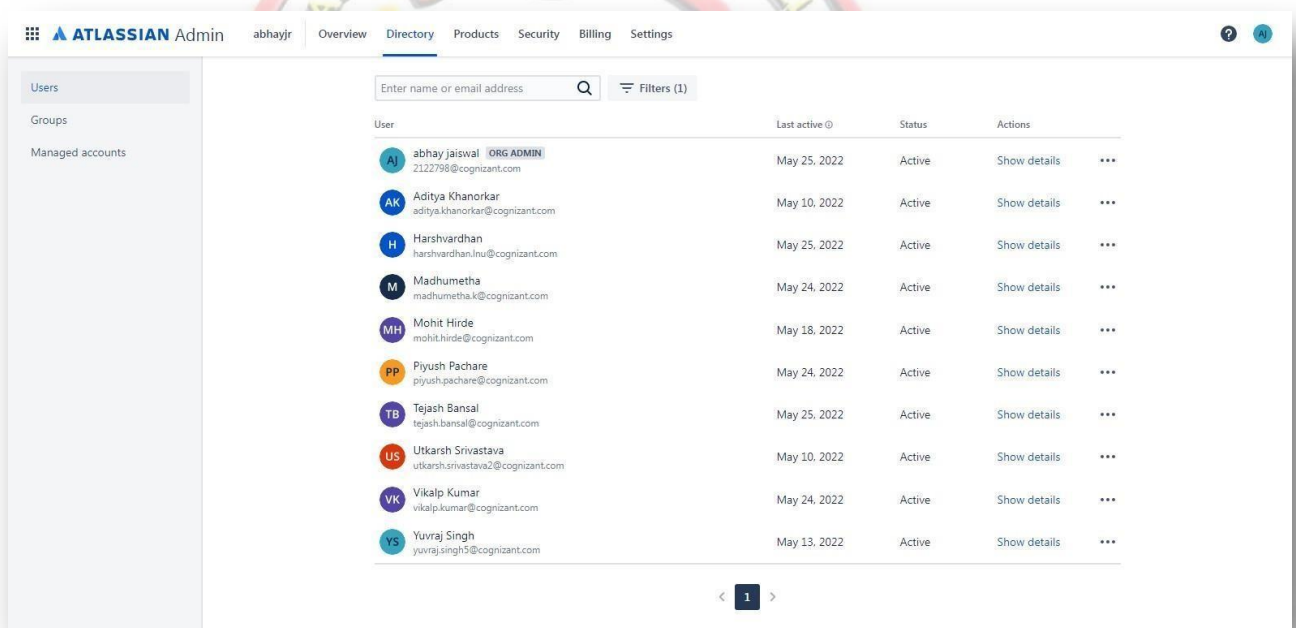
sparkdf.toPandas().to_csv('Spark Outputs for Visualization/query4.csv')
sparkdf.show()
```

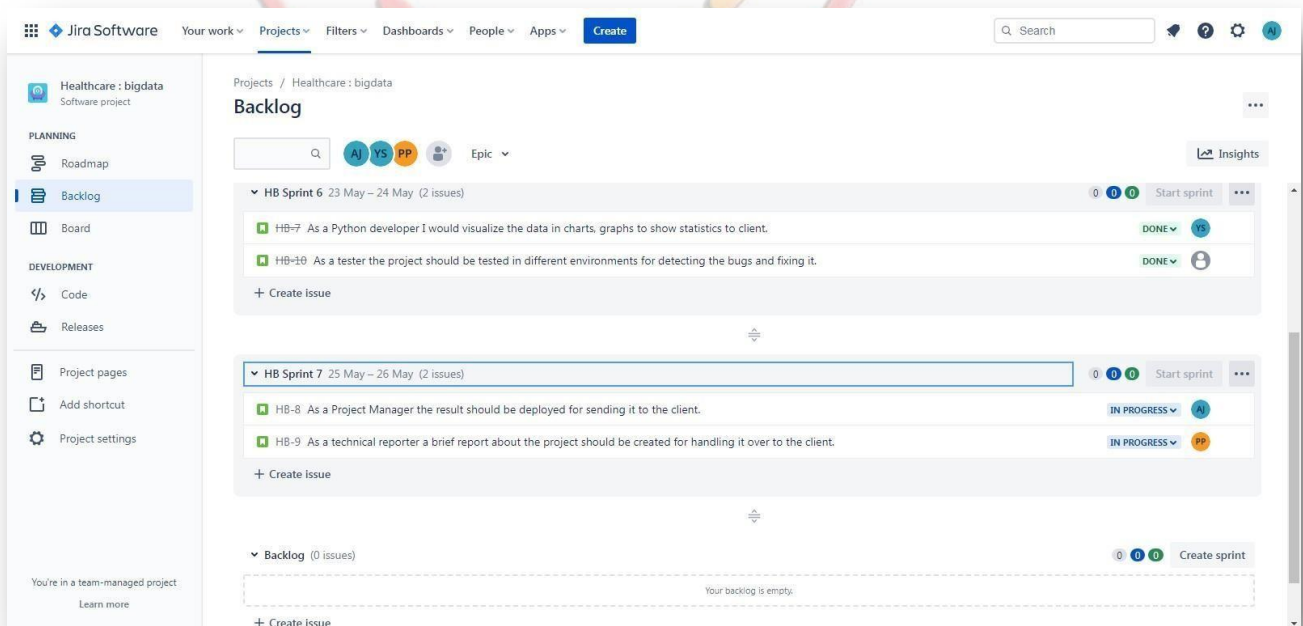
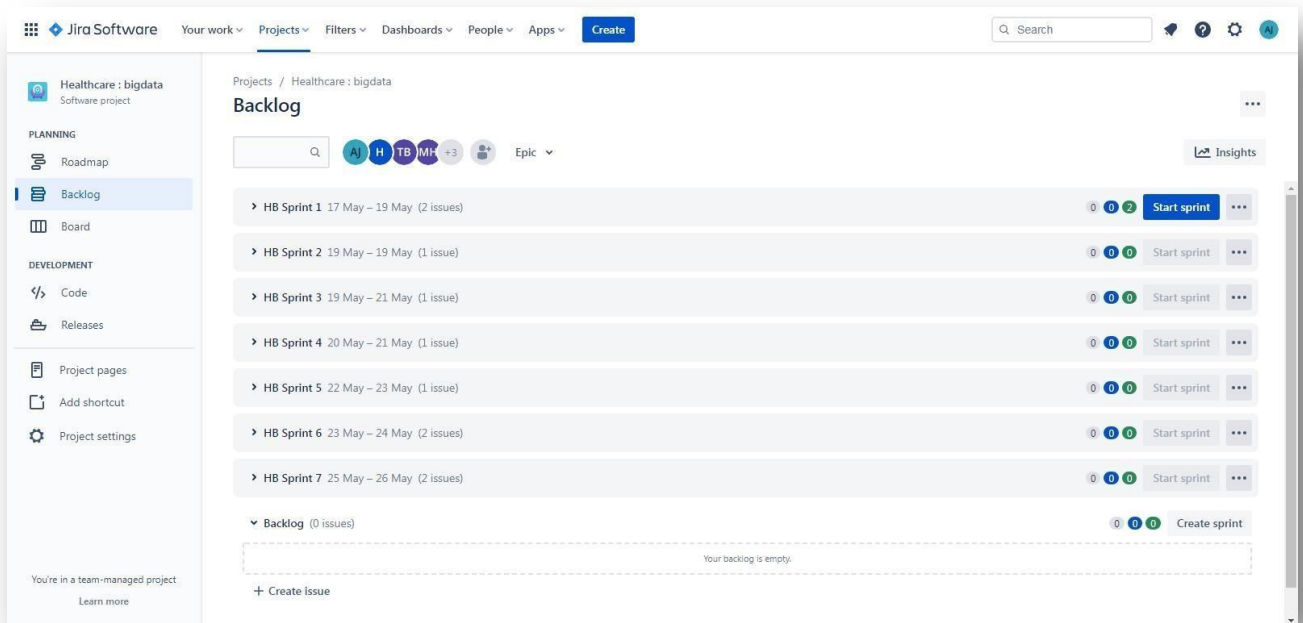
| hospital_name         | total_patient |
|-----------------------|---------------|
| Manipal Hospitals     | 9             |
| Apollo Hospitals ...  | 8             |
| Medanta The Medicity  | 7             |
| Jaslok Hospital a...  | 6             |
| Indraprastha Apol...  | 5             |
| PGIMER - Postgrad...  | 4             |
| Apollo Hospital ...   | 4             |
| Fortis Hospital M...  | 4             |
| King Edward Memor...  | 3             |
| Apollo Health Cit...  | 3             |
| Yashoda Hospital ...  | 3             |
| Bombay Hospital &...  | 3             |
| Fortis Hiranandani... | 2             |
| Lilavati Hospital...  | 2             |
| The Christian Med...  | 2             |
| Fortis Flt. Lt. R...  | 1             |
| P. D. Hinduja Nat...  | 1             |
| Breach Candy Hosp...  | 1             |
| All India Institu...  | 1             |
| Sir Ganga Ram Hos...  | 1             |

## 7. Project Management Tool

Jira Software is part of a family of products designed to help teams of all types manage work. Originally, Jira was designed as a bug and issue tracker. But today, Jira has evolved into a powerful work management tool for all kinds of use cases, from requirements and test case management to agile software development.

In this project we use Jira as a Project Management tool. With the help of the Jira, we assign a task and customizes the issues and subtasks in a whole team easily, also manages the workflow and track the progress. It also helps us to change the permission for a particular task within the team.

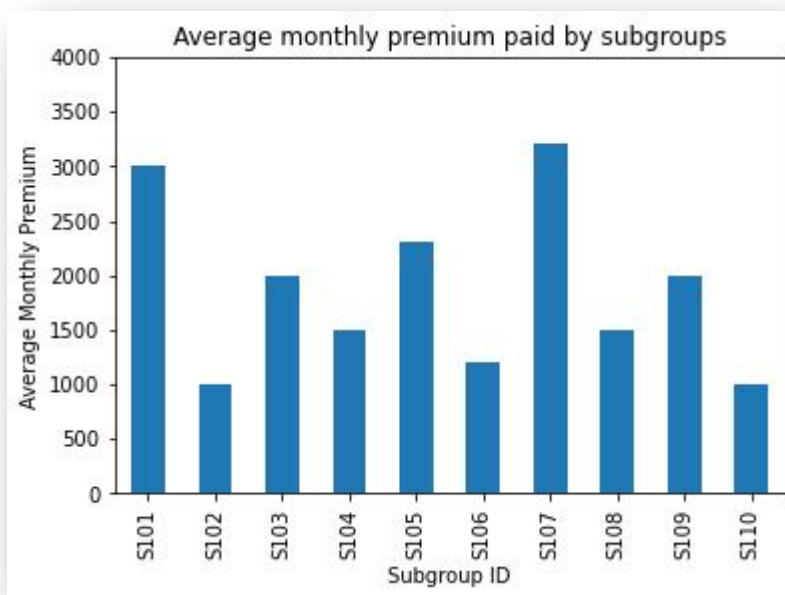




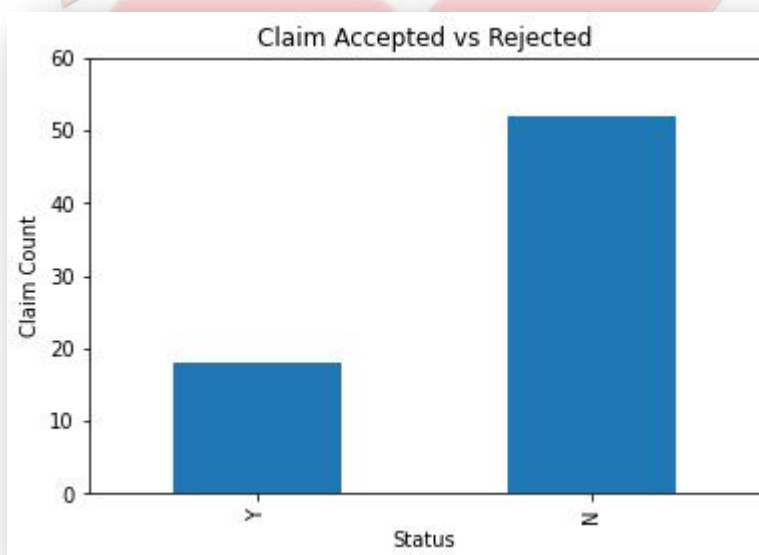
## 8. Output Screens

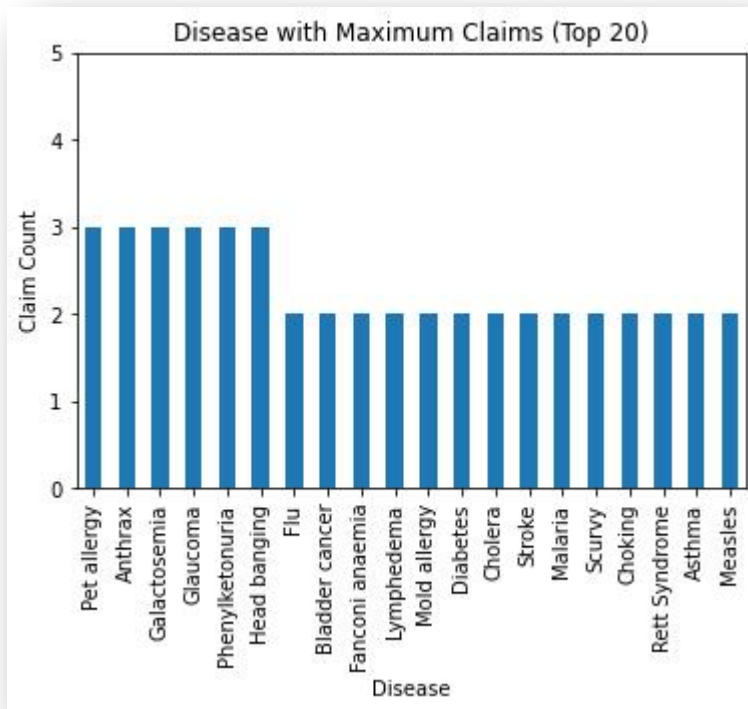
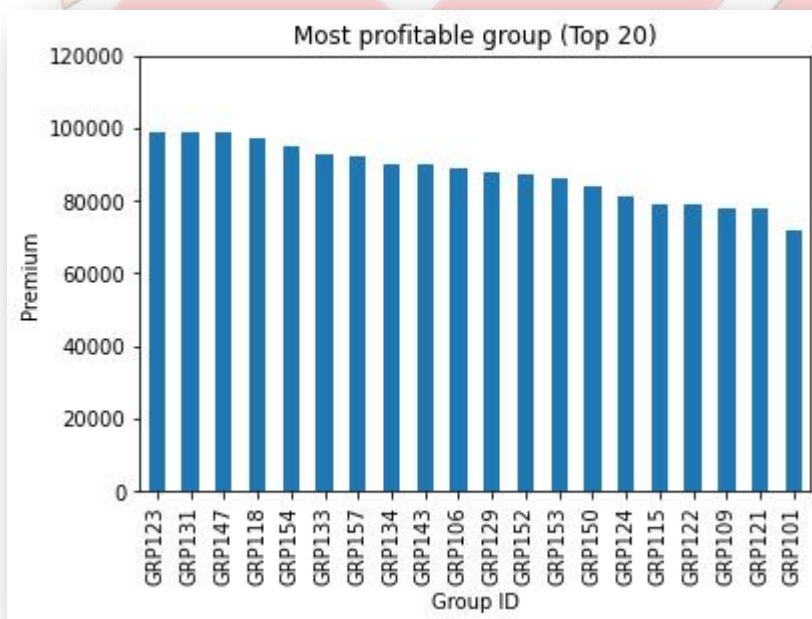
We used Matplotlib and seaborn to visualize our use cases which will be better to take business decision.

### Use Case-1: Average Monthly premium for each subgroup

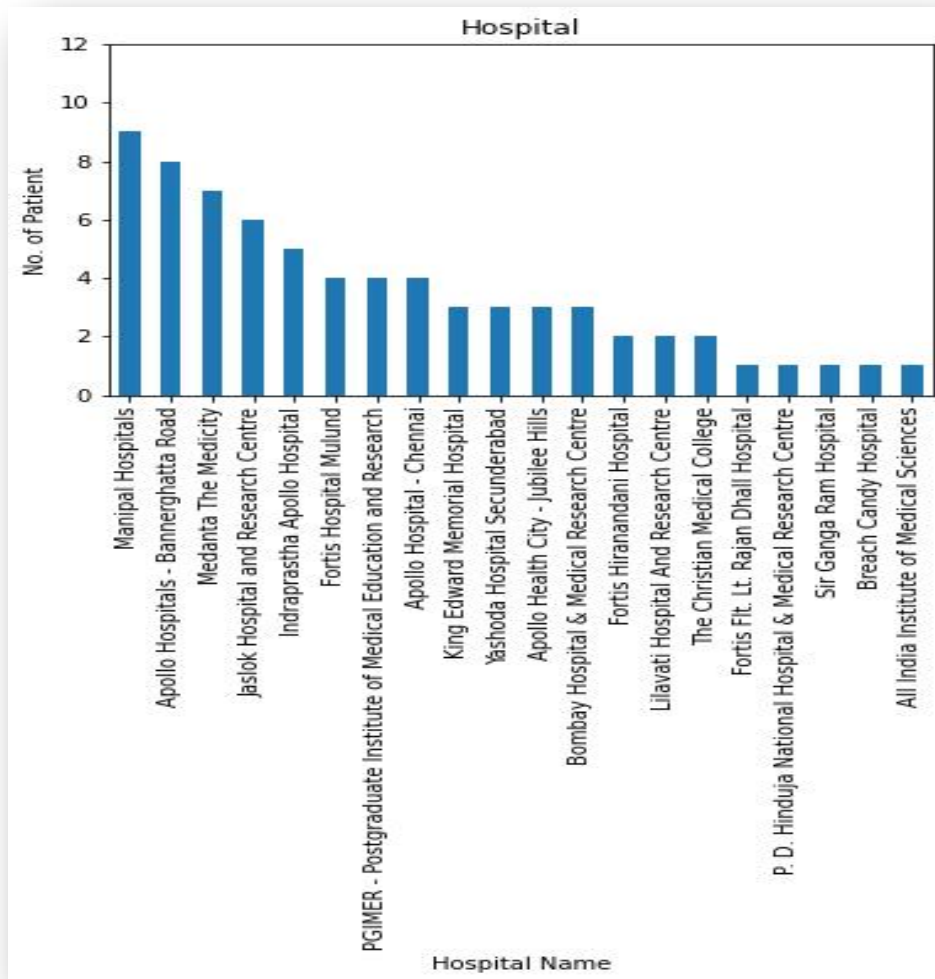
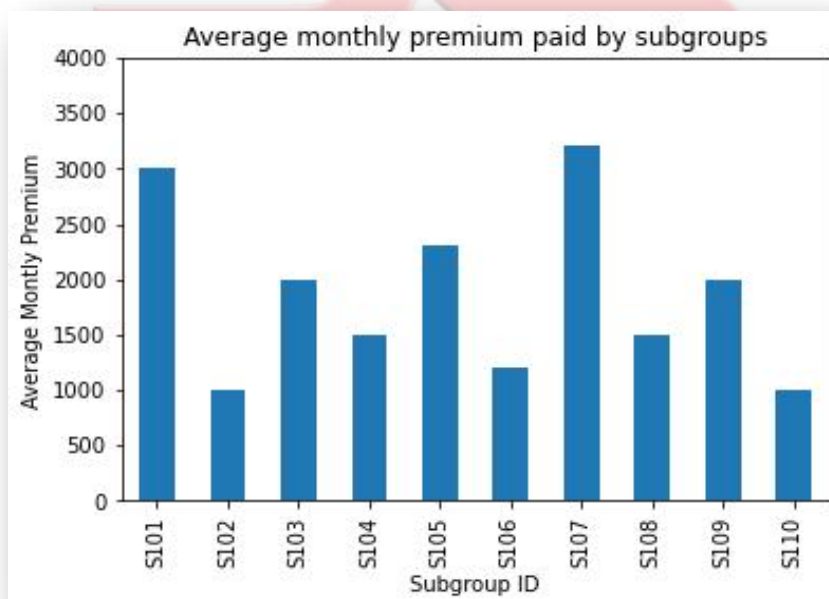


### Use Case-2: Number of people whose claim either got accepted or rejected.



**Use case-3: Which disease have maximum number of claims****Use Case-4: Which company/group is most profitable**



**Use case-5: No. of patient in each hospital****Use case-6: Average Monthly premium paid by each subgroup.**

## 9. Conclusion

We have collected data from various 3rd party sources and processed them and with the help of Big Data tools we computed the data to visualize some of necessary use case. Based on the above analysis the health care insurance company will create a new business strategy to acquire more customers, engagement and send offers. As well as fetching the company and customer details and provide easy access to information regarding customers.

## 10. Further Enhancements/Recommendations

This project has a very vast scope in future in this field. We developed this project on the requirement of our client but it can be generalized in future. If we get required resources, we can get more accurate results. There are various use cases that can be achieved by this project. Some of future scopes are below-

- Real time data can also be used for real time processing.
- We can automate the whole procedure where data coming from sources and getting executed at a same time.
- Not in the Healthcare industry we can generalize the whole procedure to other sectors like cars, online education system etc.

### **What is Attunity?**

*Attunity is now part of Qlik.*

*Qlik Data Integration efficiently delivers large volumes of real-time, analytics-ready data into streaming and cloud platforms, data warehouses, and data lakes. And with an*

*agentless and log-based approach to change data capture, your data is always current without impacting source systems.*

*For more info:- <https://www.qlik.com/us/streaming-data/data-streaming-cdc>*

## **What is SFTP?**

SFTP is the abbreviation of Secure File Transfer Protocol. It is a file protocol used to transfer large files over the Web. It is built on file transfer protocol (FTP) and includes Secure Shell (SSH) security components.

Secure Shell is an encryption component for Internet security. SSH and SFTP were designed by the Internet Engineering Task Force (IETF) to improve web security. SFTP uses SSH and encrypted FTP commands to transfer files securely to avoid password sniffing and exposing sensitive information in plain text. SFTP can also prevent man-in-the-middle attacks since the client needs to be authenticated by the server.

## **How Does SFTP Work?**

How does SFTP work? The SFTP establishes a secure connection through an SSH datastream and provides organizations with a higher level of file transfer protection. This is because SFTP uses encryption algorithms to safely move data to your server and keep files unreadable during the process, and authentication prevents unauthorized file access during operations.

Although the SFTP does not require two-factor authentication, you

can choose to require both a user ID and password as well as an SSH key for a more secure connection. Creating SSH keys helps prevent imposters from connecting to the SFTP server. The SSH key pair must be generated in advance

For More Info :- <https://www.minitool.com/lib/what-is-sftp.html>

### **What is Connect Direct Gateways?**

Connect Direct—originally named Network Data Mover (NDM)— is a computer software product that **transfers files between mainframe computers and/or midrange computers**. It was developed for mainframes, with other platforms being added as the product grew.

It is point-to-point (peer-to-peer) file-based integration middleware meant for 24x7 unattended operation, which provides assured delivery, high-volume, and secure data exchange within and between enterprises. It is optimized for high performance and throughput and moves files containing any type of data (text, EDI, binary, digital content, image) across multiple platforms, disparate file systems, and disparate media. It is used by many industries throughout the world to move large volumes of data and for connecting to remote offices.

### **What is Control-M Tool?**

Control-M **simplifies application and data workflow orchestration on premises or as a service**. It makes it easy to build, define, schedule, manage, and monitor production workflows, ensuring visibility, reliability, and improving SLAs.

Alternatives Schedulers: - Apache Oozie, Snowflake, IBM Workload Automation

### **Cluster Configuration:-**

Size of Data Node = 20TB

Data Node(Node

manager) = 17Name

Node (active) = 1

Name Node

(Passive) = 1

Secondary Name

Node = 1Resource

Manager = 1

Total Node in Cluster => 21 (Number of nodes are odd always)

### **Some Project based Interview Questions :-**

**Q1. How do you validate data after data ingestion/migration?**

Number of record

Column property map or not

Datatype

**Q2. What is your Daily data intake?**

-> 15 to 20GB

**Q3. How many number of tables do you worked with?**

Total Tables -> 200

70 - daily

30 - weekly



20 - monthly

#### **Q4. What Compression Tech you are using in your project?**

Snappy (default)

#### **Q5. What are some common challenges you may encounter during data migration?**

Some of the more common challenges include:

**Large Data Set Size:** Data from many tables may need to be migrated, which could increase the complexity of a project.

**Complex Data Relationships:** Different types of relationships may exist between different tables and columns, requiring more effort during the migration.

**Data validation:** Ensuring that all the data is valid and correct before migrating it can be difficult, especially if you migrate large amounts of data.

**Data inconsistency:** It's vital to ensure that the source and destination systems have similar naming conventions. Otherwise, there can be problems during or after migration with differing data names.

**Target format differences:** If your target environment is running on another platform, it may not support all of the same data formats as the source system. It can cause problems during or after a migration.

Different Data Quality: Data quality may differ between source and target data, making it harder to match records.

## What are the roles and responsibilities?

The data migration team has several roles and responsibilities. Our primary responsibility is to ensure the data is extracted from sources and moved to the database in an efficient and trustworthy manner. The duties the team performs include extracting data from the original sources, assuring the quality and cleaning the data, applying labels and measures to the data, and delivering the data in a format that can be used by query tools, report writers, and dashboards.

## What is the best way to process a fixed-length flat file?

Fixed-length flat files are simple to process if you first define the layout of the files. The information included in this definition is usually the beginning of the file, its length, and the data type. This information is initially entered manually and will remain the same until the data migration tool encounters a file with a different format. This will cause the migration to fail and alert you that some manual intervention is required. It is recommended that you perform periodic validation processes to ensure that the data format has not changed. Data validation is essential in this process in case the format of the data has changed. The most likely change will occur if the data includes a date field.

## What is the difference between an initial load and a full load process in the context of data migration?

In the context of data migration, the initial load is the process for populating all data warehousing tables for the first time. Full load also

refers to the first time a data warehouse is populated. However, using the full load process, all the records are loaded in one batch after all the contents of the table have been erased."

Q. what's your data source?

In which format your data was?(File formats,nature of data)

Q. what's your cluster size.

Ans. We have a 21 node Cluster.

In future it might grow based on the needs.

Q. Kindly explain your project architecture(end to end explanation)(It should be more than 10 mins)

Q. How much new data you get on

daily basis.Ans. 15-20 GB Per day

Incremental Data.

Also we expect the data to grow over time.

Q. what is your role in your big data project.

Ans. I am involved in ingesting the data.

I majorly work on Hive, Sqoop & their Performance Tuning aspects.

Q. which big data distribution are you using.

Ans. Before few years ago we used Cloudera distribution package and now we are planning to move on Amazon web services.

Q. what's the configuration of each node in your cluster.

Ans. 64 GB RAM & 16 CPU Cores each.

Q. Did you ever face any performance challenges with your job? how did you optimize that.

Ans. Yes, Many a times.

sometimes we see job taking lot of time, due to lot of shuffling and we try to minimize it.

Q. What optimisation techniques have you used in your project?

Ans:- Performance a) Handle data skewness b) Use filter first then sort while doing joins specially "Hive":-a) Dynamic Partitions ,b) Bucketing ,c) External table

Q. If you are facing with an issue while execution of bash file with sql script in hive - it always stuck at the same place map=100%, reduce=67%

The phases of a Reducer are:

- Shuffle

- Sort
- Reduce

Getting stuck @ 67% indicates that the Shuffle and Sort have completed but none of your partitions are able to succeed in the Reduce phase. The Reduce phase is your actual Reducer code. This indicates your code is unable to complete. You should examine your code and also look at the hive logs to see why your code is unable to be run.

And also try with these options with mappers and reducers number with different variations and other tuning characteristics like :-

```
SET hive.exec.parallel=true;
SET
hive.default.fileformat=RCFILE;SET
hive.stats.autogather=false;
SET hive.exec.compress.output=true;
SET
mapred.output.compression.codec=org.apache.hadoop.io.compress.SnappyCodec;SET mapred.output.compression.type=BLOCK;
SET
hive.input.format=org.apache.hadoop.hive.ql.io.CombineHiveInputFormat;
```

Q. How you implemented integration with different different module?

Q. which version of modules you used in your project?

Q. What is the most challenging problem you have solved in your big data project?



Q. When would you prefer to use Hive, and when would you prefer Spark SQL?

### Sqoooping issues:

- 1) Data type conversion issue: will have to be very careful when we import the data from RDBMS to hadoop system , you will notice default conversion happening and are not suitable to the business need. we can use map-column-java/map-column-hive function to handle this issue
- 2) Sqoop does not support few hadoop file types like ORC, RC, Parquet
- 3) Delimiters : make sure the delimiter you are using is not part of the data you are importing/loading
- 4) import-all command will not work if your tables are not having primary key for sqoop to split the data
- 5) if you need multiple mappers (parallel import) you will have to provide split-by column
- 6) Table and column names can not have special characters . When importing data from legacy system you might face this issue, so we will have to write scripts to take care of this.

### OutOfMemoryError in Sqoop and Hive :-

The OutOfMemoryError exception usually happens during **INSERT OVERWRITE** commands when there's not enough heap space on hive-server2, the Hive metastore, or the client side. To resolve this issue, increase the maximum memory allocation for the JVM or increase HADOOP\_HEAPSIZE.

Sqoop mappings sometimes fail with an out-of-memory error on the Spark engine. This issue occurs if the **Java heap**

**size is not sufficient.** Solution To resolve this issue, increase the Java heap size value for the Data IntegrationService that runs the Sqoop mapping, and then run the mapping again.

### **Refer Interview questions :-**

[Top 50 Apache Sqoop Interview Questions & Answers - DataFlair \(data-flair.training\)](#)

[Tricky Hive Interview Questions and Answers for Experience - DataFlair \(data-flair.training\)](#)

[Top 30 Tricky Hive Interview Questions and Answers - DataFlair \(data-flair.training\)](#)

[Top 30 Hive Interview Questions & Answers 2022 - Intellipaa](#)