

# ClaimCenter-Business-Analysts최고덤프문제시험은저희덤프로패스가가능

## Guidewire ClaimCenter Business Analyst

The Claims Business Analyst for Guidewire ClaimCenter is responsible for developing detailed business and functional requirements for claims processing and administration systems, as well as ensuring proper integration with downstream systems for reporting purposes. Their role also includes planning and conducting User Acceptance Testing to guarantee that the systems meet the necessary specifications. Additionally, the Claims Business Analyst provides analytical support for various projects and initiatives aimed at enhancing the claims management processes within the organization.

### ROLE RESPONSIBILITIES

- Lead requirements' definitions for complex projects and multi-year strategic initiatives.
- Identify & translate business needs into clearly defined requirements.
- Create Documentation inclusive of business use cases, process / data flows, traceability matrices, and report mock-ups.
- Plan, facilitate, and conduct requirements' gathering sessions, meetings, and presentations.
- Lead review sessions for completed business / functional requirements, with key business users focused on gaining consensus and final business approval.
- Cultivate strong professional relations within business units to thoroughly understand business needs.
- Collaborate with the development and testing teams to provide subject-matter expertise.
- Assist in troubleshooting and resolving issues when out-of-the-box functionality is leveraged.
- Ensure future solutions are efficient and effective across all business processes, while being consistent across products.
- Participate in the development and planning of the User Acceptance Testing activities, including test plans and scripts, based on requirements. After the planning phase, facilitate the UAT execution phase.

2026 PassTIP 최신 ClaimCenter-Business-Analysts PDF 버전 시험 문제집과 ClaimCenter-Business-Analysts 시험 문제 및 답변 무료 공유: <https://drive.google.com/open?id=1aDnJcduntjw59PtBrilzkbh1x-aDbas>

이 글을 보시게 된다면Guidewire인증 ClaimCenter-Business-Analysts시험패스를 꿈꾸고 있는 분이라고 믿습니다. Guidewire인증 ClaimCenter-Business-Analysts시험공부를 아직 시작하지 않으셨다면 망설이지 마시고PassTIP의 Guidewire인증 ClaimCenter-Business-Analysts덤프를 마련하여 공부를 시작해 보세요. 이렇게 착한 가격에 이정도 품질의 덤프자료는 찾기 힘들것입니다. PassTIP의Guidewire인증 ClaimCenter-Business-Analysts덤프는 고객님의게서 Guidewire인증 ClaimCenter-Business-Analysts시험을 패스하는 필수품입니다.

## Guidewire ClaimCenter-Business-Analysts 시험요강:

주제	소개
주제 1	<ul style="list-style-type: none"> <li>• Claim Center Financials Transactions: This section covers financial controls including payment approvals and holds, contact and vendor management, service request handling, and security framework with permissions and access control lists.</li> </ul>
주제 2	<ul style="list-style-type: none"> <li>• Behavior Driven Development at Guidewire: This section introduces BDD methodology and its application in Guidewire implementations, focusing on collaborative development approaches and writing clear, testable requirements using BDD principles.</li> </ul>

- Quality Analyst Basics: This domain covers quality assurance fundamentals including driving quality throughout development, integrating quality from inception, risk assessment and mitigation, test strategy selection, and defect management processes.

>> ClaimCenter-Business-Analysts최고덤프문제 <<

## ClaimCenter-Business-Analysts최고덤프문제 인증시험정보

Guidewire인증 ClaimCenter-Business-Analysts시험을 등록했는데 마땅한 공부자료가 없어 고민중이시라면PassTIP의 Guidewire인증 ClaimCenter-Business-Analysts덤프를 추천해드립니다. PassTIP의Guidewire인증 ClaimCenter-Business-Analysts덤프는 거의 모든 시험문제를 커버하고 있어 시험패스율이 100%입니다. PassTIP제품을 선택하시면 어려운 시험공부도 한결 가벼워집니다.

## 최신 Guidewire Certified Professional ClaimCenter-Business-Analysts 무료 샘플문제 (Q23-Q28):

### 질문 # 23

Succeed Insurance has a requirement to add a new high-risk indicator to the Claim Status screen for property claims that have a lien on the property. A new icon will be added to the configuration to provide a visual indicator making it easier for Adjusters and other ClaimCenter users to determine that a claim has a lien.

Which two common areas of the user interface (UI) can display the new lien icon? (Choose two.)

- A. Screen Area
- B. Workspace
- C. Info Bar
- D. Tab Bar
- E. Sidebar

정답: A,C

### 설명:

In the standard Guidewire ClaimCenter User Interface architecture, high-priority alerts and claim indicators are displayed in two primary locations to ensure visibility:

\* The Info Bar (Option D):This is the persistent strip located at the top of the claim file (just below the Tab Bar). It remains visible regardless of which specific claim sub-screen (Medical, Financials, Notes) the user is navigating. It is designed specifically to host "High Risk Indicators" such as Litigation, Fatalities, Coverage issues, and in this scenario, a "Lien" indicator. This ensures the adjuster is aware of the critical status immediately upon opening the claim.

\* The Screen Area (Option A):Specifically, theClaim Status(or Summary) screen-which resides in the main Screen Area-contains a dedicated section for "Claim Indicators." Here, the icon is displayed along with a text description and potential toggle status (On/Off). The prompt explicitly mentions the requirement to "add a new high-risk indicator to the Claim Status screen," confirming the Screen Area as the second location.

Why other options are incorrect:

\* Sidebar (B):The sidebar (left panel) is used for the "Actions" menu and navigation links (steps) to move between screens. It does not typically host status icons for the claim object itself.

\* Workspace (C):While "Workspace" can refer to the application frame, in UI terminology, it often refers to the specific worksheets (bottom pane) or the container, not the specific UI element for indicators.

\* Tab Bar (E):The Tab Bar is for high-level navigation (Claim, Desktop, Administration, Search) and does not display claim-specific data icons.

### 질문 # 24

An Adjuster at Succeed Insurance increases the reserve on a claim's exposure from \$1,000 to \$1,500 to account for inflation in repair costs. A week later, a Supervisor reviews the claim and wants to know specifically who made this change, the exact date and time it was made, and what the previous value was.

The Supervisor needs a chronological audit trail of changes to the claim file without navigating through complex financial ledgers. Which screen in the ClaimCenter user interface should the Supervisor access to find this information?

- A. History
- B. Financials > Transactions
- C. Loss Details > Status
- D. Notes

정답: A

### 질문 # 25

Succeed Insurance needs the ability to associate a primary hospital with an injury incident if the injured party received treatment. When treatment is needed, the primary hospital name should display on the injury incident screen along with other details about the injury and treatment received.

The primary hospital should be added to the injury incident in one of the following ways:

- . Select the name from a list of medical care organizations already associated with the claim.
- . Enter the contact details directly in the incident.
- . Search the Address Book from the incident to locate a hospital.

Which two requirements must be documented to associate the primary hospital with the claim? (Choose two.)

- A. A new primary hospital role
- B. A new field on the incident screen to add a contact with a role
- C. A new Hospital contact subtype
- D. A new field in the Address Book to identify a vendor as a hospital

정답: A,B

### 설명:

To implement the functionality of associating a specific contact (the "Primary Hospital") with an entity (the "Injury Incident") in Guidewire ClaimCenter, two core configuration components are required:

\* A new primary hospital role (Option B): In ClaimCenter, the relationship between a Contact and a Claim (or Incident) is defined by a Role. While the contact itself might be a "Medical Care Organization" (existing subtype), the context of its relationship to this specific incident is that it is the

"Primary Hospital". Defining this role allows the system to distinguish this hospital from other medical providers on the same claim.

\* A new field on the incident screen (Option C): To allow the user to select, add, or view this contact, a UI element (specifically a Claim Contact Picker or Input widget) must be added to the Injury Incident screen. This field will be configured to store the relationship and allows the user to perform the required actions: selecting from existing contacts (filtered by the role), entering new ones, or searching the Address Book.

Why other options are incorrect:

\* A (New Subtype): The base product already includes the MedicalCareOrg contact subtype, which is sufficient to store hospital data. Creating a new subtype is unnecessary unless the data structure (fields) of a hospital is fundamentally different from other medical providers.

\* D (Address Book Field): Contacts in the Address Book are typically identified by tags or their Subtype, not by adding a custom field just to identify them as a vendor/hospital.

### 질문 # 26

What are two recommended best practices with user interface (UI) mock-ups in a ClaimCenter implementation project? (Choose two.)

- A. When a Business Analyst (BA) does not have access to a tool, it is acceptable to take a clear screen shot, then indicate on the image how the screen should appear to meet the requirements.
- B. A Business Analyst (BA) should document the requirement number associated with the mock-up and then use a user interface (UI) mock-up tool to build the mock-up.
- C. A live system demonstration is acceptable in place of using a user interface (UI) mock-up to describe needed changes to the user interface.
- D. When creating a user interface (UI) mock-up, a Business Analyst (BA) should take a clear screen shot. User interface (UI) mock-up tools should not be used.

정답: A,B

### 설명:

In a Guidewire implementation, User Interface (UI) mock-ups serve as critical visual aids to bridge the gap between written business

requirements and the final technical solution.

\* Best Practice 1 (Option B): While sophisticated prototyping tools (like Balsamiq or Axure) are valuable, they are not always strictly necessary for every change. A "low-fidelity" mock-up is often sufficient and highly effective for minor adjustments. If a BA lacks access to specialized software, the recommended best practice is to take a screenshot of the existing ClaimCenter screen and overlay it with text boxes, arrows, or simple graphics (using tools like Paint or PowerPoint) to clearly indicate where fields should be added, moved, or removed. The goal is clarity of intent, not artistic perfection.

\* Best Practice 2 (Option D): Traceability is fundamental to the Agile and hybrid methodologies used in Guidewire projects. Every artifact, including mock-ups, must be traceable back to the specific User Story or Requirement Number it supports. By explicitly documenting the requirement number on or with the mock-up, the BA ensures that developers understand exactly which functionality is being visualized and that QA testers can validate the final screen against the correct scope.

Why other options are incorrect:

\* Option A: A live demo shows the current state. It cannot effectively demonstrate future changes (fields that don't exist yet) without a visual mock-up to accompany the explanation.

\* Option C: Stating that tools "should not be used" is incorrect; tools are generally encouraged when available to create high-fidelity prototypes.

### 질문 # 27

Succeed Insurance has plans to expand operations in Greeley, Colorado. Due to a history of hailstorm related damage in the area, the company plans to offer reimbursement for hail damage as an option.

Which two actions should the Business Analyst (BA) take to determine the requirements for the project?

(Choose two.)

- A. Identify changes to the line of business typelists and determine the correct data mapping.
- B. Lead an elaboration workshop with the customer and follow up to identify next steps.
- C. Recommend existing base product features and functionality to expedite the implementation.
- D. Author user stories following the elaboration workshops and identify acceptance criteria.

정답: B,C

설명:

In the Guidewire delivery methodology, the "Determine Requirements" phase (often part of Inception or Elaboration) focuses on understanding the business need and mapping it to the software capabilities.

\* Lead an Elaboration Workshop (A): The Elaboration Workshop is the primary forum where BAs engage with stakeholders (like the Greeley operations team) to discuss the specific needs for the new

"hail damage" product. This is where the raw requirements are gathered, discussed, and refined.

\* Recommend Base Product Features (B): A critical responsibility of the Guidewire BA is to maximize product value by reducing unnecessary customization. When determining requirements for

"reimbursement" and "hail damage," the BA should immediately demonstrate and recommend how ClaimCenter's out-of-the-box Coverage, Exposure, and Incident features can handle this scenario. This aligns the customer's expectations with the standard software capabilities, expediting the implementation.

\* Why not C or D? Authoring user stories (C) and defining typelists (D) are outputs or tasks that occur after the requirements have been determined and the solution approach (Standard vs. Custom) has been agreed upon.

### 질문 # 28

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