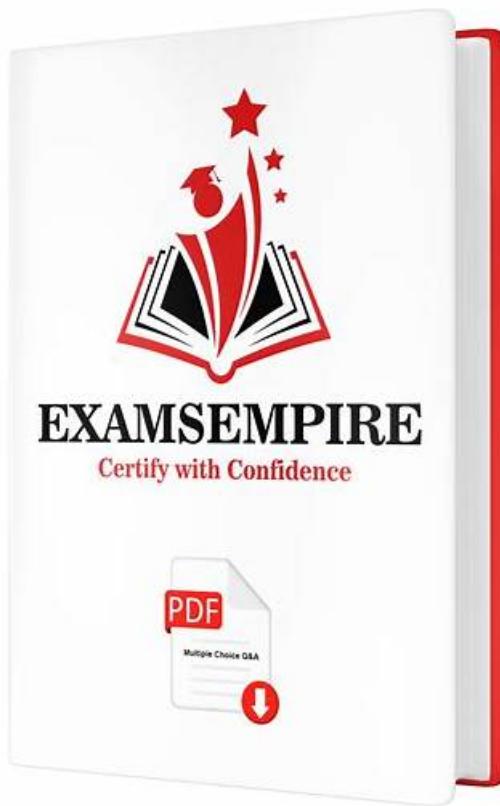


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## **Pass Guaranteed 2026 High Hit-Rate Salesforce AP-211: Sample Salesforce Health Cloud Accredited Professional Questions**

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## **Salesforce Health Cloud Accredited Professional Sample Questions (Q56-Q61):**

**NEW QUESTION # 56**

A new user story requires an OmniScript to update an existing field on a custom SObject.

Which two components should a consultant use to satisfy the requirement?

Choose 2 answers

- A. DataRaptors
- B. SOQL Query
- C. Integration Procedures
- D. API Actions

**Answer: A,C**

#### **NEW QUESTION # 57**

A customer wants to view medication data from Health Cloud leveraging FHIR standards.

Which Health Cloud data model should a consultant use?

- A. Virtual Care data model
- B. Electronic health record (EHR) data model
- C. Integrated Care Management data model
- D. Clinical data model

**Answer: D**

#### **NEW QUESTION # 58**

A payer needs to work with plan members and medical providers to influence decisions through a case-by-case review of the appropriateness of care.

When gathering requirements for this use case, which two Utilization Management processes should a consultant discuss with the client?

Choose 2 answers

- A. Designing Next Best Action and Recommendations for the care management team
- B. Designing Care Requests to seek authorization from a health plan for drugs, services, and admissions
- C. Considering the number of intake agents who will be using Health Cloud
- D. Considering the Request Review Types; Prior Authorization Review, Concurrent Review, and Retrospective Review

**Answer: B,D**

Explanation:

Comprehensive Detailed Step by Step Explanation with exact Extracts from Salesforce Health Cloud documents that you have with Reference Request Review Types:

Utilization Management processes center around reviewing requests for appropriateness of care, with the three main types being Prior Authorization Review, Concurrent Review, and Retrospective Review.

Extract:

"Utilization Management supports prior authorization, concurrent, and retrospective reviews to evaluate care appropriateness case by case."

- Utilization Management in Health Cloud

Care Requests:

Care Requests are the mechanism for providers to seek authorization from payers for drugs, services, or admissions.

Extract:

"Design care request processes to support providers seeking health plan authorization for services, medications, or admissions."

- Health Cloud Utilization Management Data Model

Why not the other options?

A: Next Best Action is more for care management recommendations, not utilization review.

C: Intake agent count is an operational consideration, not a UM process.

Reference:

Utilization Management Overview

Utilization Management Data Model

## NEW QUESTION # 59

A pharma company wants the ability to:

Upload a patient's insurance card, including automatic Member Plan record creation Run a benefits verification check Schedule on behalf of the patient with a provider Cloud Accredited Professional Which set of Health Cloud capabilities should enable the company to build this business process?

- A. Intelligent Document Automation, Intelligent Appointment Management, Intelligent Document Reader, Benefits Verification
- B. virtual Care, Intelligent Appointment Management, Intelligent Document Automation, Intelligent Document Reader
- C. Utilization Management, Care Management, Intelligent Document Automation, Intelligent Appointment Management
- D. Intelligent Appointment Management, Benefits Verification, Intelligent Document Automation, eFax Integration

### Answer: A

Explanation:

Step-by-Step Explanation:

Business Process Capabilities:

Intelligent Document Automation: Upload and process patient insurance cards.

Intelligent Document Reader: OCR and extract information to automatically create Member Plan records.

Benefits Verification: Check and verify patient insurance benefits.

Intelligent Appointment Management: Schedule on behalf of the patient with providers.

Salesforce Documentation Reference:

"Use Intelligent Document Automation and Intelligent Document Reader to upload and extract insurance card details, with automated Member Plan creation. Use Benefits Verification and Intelligent Appointment Management to enable scheduling and eligibility checks."

- Health Cloud: Intelligent Document Automation
- Health Cloud: Benefits Verification
- Health Cloud: Intelligent Appointment Management

Why not the other options?

Only D includes all needed automation for insurance card processing, Member Plan record creation, benefits verification, and scheduling.

Reference:

Intelligent Document Automation

Intelligent Document Reader

Benefits Verification

Intelligent Appointment Management

## NEW QUESTION # 60

An administrator at Bloomington Caregivers has received a change request to alter the appearance of the timeline so that it displays vertically instead of horizontally.

Which step should the administrator take when implementing this change request?

- A. Enable Timeline in Salesforce Setup, then set the toggle for vertical orientation to true to set all timeline orientations as vertical.
- B. Find the Timeline Orientation setting in Custom Metadata, which controls the orientation of all timelines, and change the value to vertical.
- C. Enable Timeline in Salesforce Setup, then configure and activate new timeline and add to the relevant Lightning record
- D. Find the Timeline View Configuration for each relevant timeline in the Health Cloud - Lightning Admin app and change the orientation to vertical.

### Answer: D

## NEW QUESTION # 61

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