

ClaimCenter-Business-Analysts Exam Questions and ClaimCenter Business Analyst - Mammoth Proctored Exam Torrent Prep - ClaimCenter-Business-Analysts Test Guide



Professional Proctored Exam Guide

ClaimCenter Business Analysts

This exam guide is designed to help you evaluate your readiness to successfully complete the Professional certification exam for ClaimCenter business analysts. It includes information about the target audience, required prerequisites, recommended training, and test topics. Guidewire recommends a mix of training, hands-on product experience, and knowledge of best practices to maximize your chances of success on this exam.

Target Audience

The Professional Certification - ClaimCenter Business Analyst - Jasper Proctored Exam is recommended for any business analyst who works with ClaimCenter as part of Guidewire InsuranceSuite or Digital implementations. This exam validates that business analysts can interpret a variety of ClaimCenter requirements effectively and efficiently. Those who pass this exam will become a Certified Professional, one of two certifications required for business analysts to earn the esteemed Certified Ace designation.

Why Certify?

Guidewire certifications allow learners to demonstrate increasing competency in their role. The Certified Professional designation is a coveted achievement that will help elevate you from the crowd. Certified Professionals are more productive, more self-sufficient, and more prepared to capture high-quality requirements that maximize product capabilities.

Certification Dependencies

Prerequisite Certifications

Business analysts do not need an existing Guidewire certification before they pursue the Certified Professional designation. Those who pass the Professional Certification - ClaimCenter Business Analyst - Jasper Proctored Exam will become a Certified Professional in the ClaimCenter business analyst track.

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Guidewire ClaimCenter-Business-Analysts Exam Syllabus Topics:

Topic	Details
Topic 1	<ul style="list-style-type: none">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.
Topic 2	<ul style="list-style-type: none">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.

Topic 3	<ul style="list-style-type: none"> Claim Processes and Maintenance: This section focuses on end-to-end claims processes, organizational structure setup, line of business coverage configuration, claim intake procedures, and ongoing claim maintenance activities.
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>> ClaimCenter-Business-Analysts PDF Question <<

Exam ClaimCenter-Business-Analysts Reference, ClaimCenter-Business-Analysts Test Braindumps

Highlight a person's learning effect is not enough, because it is difficult to grasp the difficulty of testing, a person cannot be effective information feedback, in order to solve this problem, our ClaimCenter-Business-Analysts study materials provide a powerful platform for users, allow users to exchange of experience. Here, the all users of our ClaimCenter-Business-Analysts Study Materials can through own id to login to the platform, realize the exchange and sharing with other users, even on the platform and more users to become good friends, encourage each other, to deal with the difficulties encountered in the process of preparation each other.

Guidewire ClaimCenter Business Analyst - Mammoth Proctored Exam Sample Questions (Q14-Q19):

NEW QUESTION # 14

When creating a new Personal Auto claim, Succeed Insurance would like to identify when Rideshare is the primary use for a vehicle. A Business Analyst (BA) thinks that Primary Use already exists as a typekey on the Vehicle Details screen. What are two ways the BA can confirm whether this field is configured in ClaimCenter and, if it is, which values are available in the typelist? (Choose two.)

- A. Access the Guidewire ClaimCenter Application Guide > Go to section on Personal Auto Object Model which lists available entities.
- B. Open Guidewire Studio for ClaimCenter > Navigate to the Vehicle Details screen > Locate the Primary Use field to view its typelist.
- C. Access the Data Dictionary > Click the Data Entities link > Open the PrimaryUse entity from left-hand pane to view field details on the right pane.
- D. Log in to ClaimCenter > Create a new Personal Auto claim > Navigate to Vehicle Details > Use keyboard shortcut CTRL + F to find information about the fields on the screen.

Answer: B,C

Explanation:

To verify the configuration of a specific field and its available values (typelist) within a specific implementation (like Succeed Insurance), a Business Analyst must consult the sources that reflect the current, actual system configuration, not just the out-of-the-box documentation.

* Option A (Data Dictionary): The Data Dictionary is the definitive, generated documentation of the running application's data model. It lists all Entities (such as Vehicle) and their Typekeys (such as PrimaryUse). By navigating to the Data Dictionary, a BA can confirm if the field exists in the database schema and view the specific Typelist values (e.g., "Rideshare", "Commuting", "Pleasure") associated with it. This is a primary tool for BAs to understand the data structure.

* Option D (Guidewire Studio): Guidewire Studio is the Integrated Development Environment (IDE) used to configure the application. It contains the "Source of Truth" for all configuration files. A BA (or a developer assisting them) can open the Page Configuration (PCF) files to see the Vehicle Details screen definition or open the Typelist files (.tti/.txt) directly to see exactly which values are defined and active.

Why other options are incorrect:

* Option B (Application Guide): The Application Guide documents the Base (Out-of-the-Box) product features. It does not contain customer-specific customizations or extensions. If "Primary Use" or "Rideshare" were added or modified by Succeed Insurance, the Application Guide would not reflect this.

* Option C (UI Inspection with CTRL+F): While logging into the application allows a user to see the dropdown on the screen, the shortcut CTRL + F is merely the browser's "Find" function. It searches visible text on the page but does not provide configuration metadata, hidden values, or definitive proof of the underlying data model structure. The correct shortcut for inspecting widget properties in Guidewire is Alt + Shift + I (Location Info), but even that is less efficient for viewing a full typelist than the Data Dictionary or Studio.

NEW QUESTION # 15

What is a reason to assign a unique identification number to each User Story Card in ClaimCenter implementation projects?

- A. The number provides the primary means for organizing tasks in backlog.
- B. The number identifies total time estimated for building out the related User Story.
- **C. The number is used in the naming convention of: Product - Theme - Subtheme - ID number.**
- D. The number helps to identify accepted and rejected Acceptance Criteria on Burndown Charts.

Answer: C

Explanation:

In Guidewire implementation methodology (such as SurePath), traceability and organization are maintained through strict naming conventions.

* Naming Convention (Option C): A unique identification number is assigned to every User Story Card to create a consistent naming structure: Product - Theme - Subtheme - ID. (For example: CC - FNOL - Vehicle - 001).

* Purpose: This convention allows Business Analysts, Developers, and QA testers to easily reference, search, and trace requirements across different tools (e.g., from the Story Card in Excel/Jira to the code in Studio and the test cases in the testing suite).

* Why not A, B, or D? Time estimation (A) uses "Story Points," not the ID. Burndown charts (B) track velocity/points, not criteria IDs. Backlogs (D) are organized by Business Value/Priority, not just numerically by ID.

NEW QUESTION # 16

A Business Analyst (BA) noticed that one of the User Story Card files for the project indicated that it had recently been modified. The BA wanted to see who changed it, what was changed, and why it was changed.

Where on the Story Card can the BA go to determine the changes recently made to it?

- A. Go to the UI Fields tab > New or Modified fields
- B. Go to the Action Items tab > Description > Resolution/Comments
- **C. Go to the Document Control tab > Amendment History**
- D. Go to File > Properties

Answer: C

Explanation:

In the standard Guidewire User Story Card template (an Excel-based tool used for requirements gathering), version control is manually tracked to ensure auditability and clarity among the project team.

* Document Control Tab (Option C): This is typically the first tab in the Story Card workbook. It contains a section specifically for Amendment History (or Revision History).

* Content: This section is designed to capture:

* Who: The author of the change.

* When: The date of the change.

* What/Why: A description of the modification (e.g., "Updated Acceptance Criteria based on Workshop feedback").

This provides the specific "Who, What, and Why" requested in the scenario.

Why other options are incorrect:

* File > Properties (A): This is standard Excel metadata. It shows the "Last Modified By" user and date, but it cannot explain what specific cells were changed or why (the business context).

* Action Items (B): This tab tracks open questions or tasks, not the revision history of the document requirements.

* UI Fields (D): This tab tracks the requirements for screen fields, but does not serve as a changelog for the entire document.

NEW QUESTION # 17

Losses incurred because of an accident with other vehicles can be very large. Because of the risk of large losses, all claims must include both a police report and the details of any passengers in the vehicle, whether they sustained injuries or not. The claim must show whether there were passengers in the vehicle at the time of the accident. Succeed wants the ability to include a very detailed description of the loss event information on intake of the claim.

When the claim is created, Succeed wants to flag the claim with a reminder for the Adjuster to contact the insured.

There should be reminders for the Adjuster to complete the following items for every new claim created:

- . Review any photographs of the accident
- . Contact and Interview each passenger

. Collect statements from each witness
. Record the vehicle's mileage
Which business requirement is based on assumptions?

- A. All claims must include both a police report and the details of any passengers in the vehicle, whether they sustained injuries or not.
- B. There should be reminders for the Adjuster to complete the following items for every new claim created: collect statements from each witness.
- **C. There should be reminders for the Adjuster to complete the following items for every new claim created: review any photographs of the accident.**
- D. When the claim is created, we want to flag the claim with a reminder for the Adjuster to contact the insured.

Answer: C

Explanation:

In the context of business requirements analysis, an assumption is a statement that is accepted as true or certain to happen without proof.

* Why A is the correct answer: The requirement to generate a reminder to "review any photographs" for every new claim assumes that photographs will be available for every accident. In reality, photos are not always taken or provided at the First Notice of Loss (FNOL). Creating a mandatory task for an optional piece of evidence is based on the assumption of data availability.

* Why D is incorrect: "All claims must include a police report..." is a Business Rule or constraint. It is a mandatory condition imposed by the business ("must include") rather than an assumption about what is currently present.

* Why B is incorrect: Contacting the insured is a standard, universal step in the claims process that applies to every claim, so it is not considered an assumption.

NEW QUESTION # 18

Which two components are necessary to create the check(s) using the wizard? (Choose two.)

- **A. Payee**
- **B. Payment tied to a reserve line**
- C. Date of the claim
- D. Payment tied to an activity

Answer: A,B

Explanation:

The Check Wizard in Guidewire ClaimCenter enforces strict financial integrity rules. To successfully create a check, the user must define the source of funds and the recipient.

* Payment tied to a Reserve Line (Option A): Every payment must be allocated to a specific Reserve Line (combination of Exposure, Cost Type, and Cost Category). This ensures that the payment consumes the correct financial reserves and maps to the correct coverage on the policy. You cannot create a "floating" payment; it must be tied to a reserve line.

* Payee (Option C): A check is a legal instrument that must be payable to a specific entity. Selecting a Payee (from the claim contacts) is a mandatory step in the wizard.

Why other options are incorrect:

* B (Activity): While payments can be linked to activities (e.g., Service Requests), it is optional. Most indemnity payments are made directly without an underlying activity.

* D (Date of claim): The Loss Date is a property of the claim, but it is not a component selected or created during the check wizard process. The relevant dates in the wizard are the "Service Period" or "Scheduled Send Date."

NEW QUESTION # 19

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