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Guidewire ClaimCenter Business Analyst - Mammoth Proctored Exam Sample Questions (Q19-Q24):

NEW QUESTION # 19
An auto accident in Chicago, Illinois has been reported to Succeed Insurance. The customer service representative uses the ClaimCenter standard Claim Wizard to set up the new claim. The policy is verified in effect and based on the reported exposures the total loss points calculated is 38. There is also a note to have an expert inspection via approved vendor.
What is the most likely claim setup with regards to this reported auto accident?

- A. The new claim will be segmented as mid-complexity auto claim, assigned to Midwest Low Complexity Auto Adjusters Group, with activity for vehicle inspection.
- B. The new claim will be segmented as high complexity auto claim, assigned to Midwest Complex Auto Adjusters Group, with activity for vehicle inspection.
- C. The new claim will be segmented as low complexity auto claim, assigned to Midwest Low Complexity Auto Adjusters Group, with activity for vehicle inspection.
- D. The new claim will be segmented as high complexity auto claim, assigned to a Supervisor for further determination on next steps due to complexity.

Answer: B

Explanation:
ClaimCenter uses a logic-based process called Segmentation to categorize claims and Assignment to route them.
* Complexity (Points):The "Total Loss Points" score of 38 is significantly high. In standard configuration, high scores (typically indicating severe damage or total loss potential) trigger a High Complexity segmentation.
* Assignment (Geography):The accident occurred in Chicago (Midwest). The assignment rules will match the geography (Midwest) with the complexity (High/Complex). Therefore, it routes to the Midwest Complex Auto Adjusters Group.
* Workplan (Activity):The specific note regarding an "expert inspection" translates into a generated Activity(likely "Assign Vehicle Inspection" or similar) added to the claim's workplan.
Why other options are incorrect:
* A & D (Low/Mid Complexity):A score of 38 is too high for "Low Complexity" (which is usually for simple fender benders). Assigning a complex claim to a "Low Complexity" group would violate standard routing logic.
* C (Supervisor):Modern ClaimCenter configurations prefer Straight-Through Processing (STP) to a working group. Routing to a Supervisor is generally a fallback for exceptions, whereas this is a standard high-severity scenario that should go directly to the specialized adjusters.

NEW QUESTION # 20
Succeed Insurance has a strategic initiative to offer pay-as-you-drive personal auto insurance to compete with other large carriers. Customers who choose these policies must either own a vehicle that is equipped with a monitoring device or agree to install a device provided by Succeed. The monitoring device collects information about how the drivers of a covered vehicle drive, including how fast they drive, how hard they brake, and how many miles/kilometers the vehicle travels within a policy period.
This information is logged, and premiums are based on how the insured's driving behavior is categorized.
When a claim is reported, the log files must be obtained in order to
analyze the information captured by the monitoring device at the time of the incident.
Succeed plans to collect and evaluate the Vehicle Monitoring Log files in the first implementation phase, which is scheduled for release in 60 days. The project sponsors have instructed the implementation team to use base product functionality over customization. Integration should be leveraged where possible to avoid manual data entry.
The New Claim Wizard must capture whether or not the vehicle has a monitoring device installed when a personal auto claim is created against a pay-as-you-drive policy.
Which feature of the base product enforces this claim creation requirement?

- A. Create a Validation rule enforcing a new custom Validation level for mechanical requirements.
- B. Create a Validation rule enforcing the New loss completion validation level.
- C. Create a Validation rule enforcing the Load and save validation level.
- D. Create a Validation rule enforcing the Ability to pay validation level.

Answer: B

Explanation:

In Guidewire ClaimCenter, Validation Rules are used to enforce data integrity and business requirements at specific stages of the claim lifecycle. These stages are defined by Validation Levels.

* New Loss Completion (Option B):This validation level is specifically designed as the "gatekeeper" for the New Claim Wizard (FNOL). Rules triggered at this level run when the user attempts to click

"Finish" to submit the new claim. If a rule fails (e.g., "If Policy Type = Pay-as-you-drive AND Monitoring Device is Null"), the system prevents the claim from being created and highlights the missing field. This directly meets the requirement to enforce data capture "when a personal auto claim is created." Why other options are incorrect:

* Ability to Pay (A):This level runs when a user tries to issue a check. Using this would allow the claim to be createdwithoutthe device info, only blocking the user later when they try to pay, which is too late for the requirement.

* Custom Level (C):Creating custom levels is possible but discouraged when a standard level fits the purpose, aligning with the "use base product functionality" principle.

* Load and Save (D):This level runs every time the claim is saved (even as a draft). Enforcing mandatory fields here can frustrate users who need to save their work partially complete.

NEW QUESTION # 21

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

Answer: A

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 everynew 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 aBusiness Ruleor 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 # 22

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 live system demonstration is acceptable in place of using a user interface (UI) mock-up to describe needed changes to the user interface.
- C. 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.
- 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.

Answer: A,C

Explanation:
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 specificUser StoryorRequirement Numberit 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 thecurrentstate. It cannot effectively demonstratefuturechanges (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.

NEW QUESTION # 23
Satisfied with the outcome of a Requirements Workshop, a Business Analyst (BA) attributed the success to preparation. The assigned task had been to document the requirements for capturing details on vehicle incidents for Personal Auto.
* Before the session, the BA reviewed ClaimCenter functionality by creating a new Personal Auto Claim involving physical damage to a vehicle.
* During review, the BA saw that ClaimCenter did not have a graphical representation of a vehicle with clickable hot spots to identify the damage areas like they have in their current application.
* Upon further research, the BA found that Guidewire does offer this functionality and even provides a Graphical Incident Capture Accelerator to ease implementation.
* During the workshop, the BA was able to clearly present all options for capturing vehicle incident details. Instead of having to develop the Vehicle Incident Capture functionality from scratch, the team was able to make a quick decision to add this functionality and end the meeting 30 minutes early.
Which two outcomes demonstrate the importance of preparing for a Requirements Workshop by becoming familiar with the features and functionality of ClaimCenter? (Choose two.)

- A. The BA was able to compare their legacy process to how ClaimCenter handles the same business process.
- B. The BA was able to make decisions in advance about where gaps existed and where changes were needed.
- C. The BA was able to gain team acceptance of the base product process instead of the legacy system process.
- D. The BA prevented the team from rebuilding something in a less effective way.

Answer: A,D

Explanation:
This scenario highlights the value of Feature Knowledge and Gap Analysis during preparation.
* Prevention of unnecessary work (Option A):Because the BA researched and found the "Graphical Incident Capture Accelerator," the team avoided the costly mistake of deciding to "develop the...
functionality from scratch." This is a direct outcome of the BA's preparation preventing an inefficient custom build.
* Comparison of Legacy vs. New (Option B):The text details that the BA "reviewed ClaimCenter functionality" and explicitly noted the difference ("saw that ClaimCenter did not have... like they have in their current application"). This ability to articulate the gap between theAs-Is(Legacy) and theTo-Be (Base ClaimCenter) allowed the BA to present the Accelerator as the perfect bridge solution.
Why other options are incorrect:
* Option C:The team didnotaccept the "base product process" (which lacked the graphics); they accepted theAccelerator(an add-on) to match the legacy expectation of clickable hot spots.
* Option D:The decision was not made "in advance." The text states the team made the "quick decision" during the workshop. The preparation enabled theteam'sdecision, but the BA did not make it unilaterally beforehand.

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Well-formed types, operator overloading, namespaces, and garbage collection, ClaimCenter-Business-Analysts IT vendors have generally ignored projects in this cluster and appear to have no coordinated strategy for dealing with them.

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