

ClaimCenter-Business-Analysts인증 시험대비 공부문제 & ClaimCenter-Business-Analysts최신덤프문제보기

ClaimCenter Business Analyst
Guidewire Learning Path

Education

Learning Path Structure

- Base** (Universal knowledge): **Base Curriculum:** All learners, including Inception attendees, complete the appropriate base courses to learn about Guidewire's methodology, tools, value, and product features.
- Platform** (Foundational learning): **Platform Curriculum:** Analysts then complete required training on platform-level functionality and best practices to prepare to build cloud-ready and future-proofed solutions.
- Specialty** (Product features): **Specialty Curriculum:** Analysts continue with specialty curriculum to gain product-specific knowledge that deepens competency.
- Advanced** (Proven expertise): **Advanced Curriculum:** Lead business analysts also complete advanced curriculum and certification to demonstrate their ability to apply their product knowledge to real-world scenarios.
- Mastery** (Continual learning): **Mastery Curriculum:** Analysts can take their Guidewire knowledge and expertise to the next level by learning about unique topics not found in other courses.

Education

ClaimCenter Business Analyst

Start your learning journey with Base curriculum, then continue learning more about the platform and product capabilities.

Base (Universal knowledge) → Guidewire Cloud Overview → SunPath Overview → InsuranceSuite Implementation Tools → Maximizing Product Value → Digital Experiences for PSC Insurance → Enterprise/Engage Introduction

Pass4Test ClaimCenter-Business-Analysts 최신 PDF 버전 시험 문제집을 무료로 Google Drive에서 다운로드하세요:
<https://drive.google.com/open?id=1QZJ6umFOnb3P3UKj-glgIaq9x4LTawFY>

학원다니면서 많은 지식을 장악한후 Guidewire ClaimCenter-Business-Analysts 시험보시는것도 좋지만 회사다니느라 야근하랴 시간이 부족한 분들은 Guidewire ClaimCenter-Business-Analysts 덤프만 있으면 엄청난 학원수강료 필요없이 20~30시간의 독학만으로도 Guidewire ClaimCenter-Business-Analysts 시험패스가 충분합니다. 또한 취업생분들은 우선 자격증으로 취업문을 두드리고 일하면서 실무를 익혀가는 방법도 좋지 않을가 생각됩니다.

Guidewire ClaimCenter-Business-Analysts 시험요강:

주제	소개
주제 1	<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.
주제 2	<ul style="list-style-type: none"> Claim Center Data Model and Adjudication: This domain examines ClaimCenter's data model architecture, claim setup, adjudication processes, financial terminology and concepts, and payment creation procedures.

주제 3	<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.
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>> ClaimCenter-Business-Analysts인증 시험대비 공부문제 <<

ClaimCenter-Business-Analysts최신 덤프문제보기 - ClaimCenter-Business-Analysts최신 덤프자료

Pass4Test에는Guidewire ClaimCenter-Business-Analysts인증시험의 특별한 합습가이드가 있습니다. 여러분은 많은 시간과 돈을 들이지 않으셔도 많은 IT관련지식을 배우실수 있습니다.그리고 빠른 시일 내에 여러분의 IT지식을 인증 받으실 있습니다. Pass4Test인증자료들은 우리의 전문가들이 자기만의 지식과 몇 년간의 경험으로 준비중인 분들을 위하여 만들었습니다.

최신 Guidewire Certified Professional ClaimCenter-Business-Analysts 무료 샘플문제 (Q13-Q18):

질문 # 13

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

정답: B,C

설명:

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.

질문 # 14

Succeed Insurance is implementing a slightly modified version of ClaimCenter to suit its organization's needs. The modification will include adding two new required fields to the standard user interface to capture the reporter's Preferred Language and Preferred Contact Time. This requirement is critical for Succeed to improve efficiency and the expediency of claims processing in its region. Under which ClaimCenter theme will the User Story Card be found for documenting these requirements?

- A. Special Services
- B. Adjudicate
- **C. Intake**
- D. Settle/Close

정답: C

설명:

In the Guidewire implementation methodology, User Stories are categorized into Themes that align with the high-level business processes of the claim lifecycle.

* Intake (Option A): The Intake theme covers the First Notice of Loss (FNOL) process and the "New Claim Wizard." The requirement specified is to capture data regarding the "Reporter" (the person reporting the loss) and their contact preferences. In ClaimCenter, Reporter information is collected at the very beginning of the New Claim Wizard (Step 1: Search/Create Policy and Reporter). Because this data entry occurs during the initial setup of the claim, the User Story governing these UI changes belongs to the Intake theme.

* Context: Improving "expediency of claims processing" often relies on accurate data capture at the Intake stage so that downstream assignment and communication can be handled correctly from the start.

Why other options are incorrect:

* Adjudicate (B): This theme covers the investigation, evaluation, and negotiation phases that occur after the claim is created.

* Settle/Close (D): This theme covers the payment issuance and final closure of the file.

* Special Services (C): This typically refers to Vendor Management or specialized sub-processes, not the core FNOL reporter data.

질문 # 15

Whenever the Total Loss Calculator determines that a vehicle is a total loss, Succeed Insurance wants to create a custom history event with the exposure name and total loss score.

Which step in the claim setup process flow must be completed before the history event can be created?

- A. Add a new step before the Total Loss Calculator to create the history event.
- B. Add a new step after the Vehicle Incident step to create the history event.
- C. Add a new step before the Vehicle Incident step to create the history event.
- **D. Add a new step after the Total Loss Calculator to create the history event.**

정답: D

설명:

250 to 350 words From Exact Extract of Guidewire ClaimCenter Business Analyst documentation:

In Guidewire ClaimCenter workflow analysis and configuration, defining the correct sequence of operations is critically dependent on Data Availability and Data Dependency.

The specific requirement here dictates that the custom history event must capture the Total Loss Score. In the context of the ClaimCenter object model and process flow, the Total Loss Score is an output value generated specifically by the Total Loss Calculator engine. Before this calculator runs, the score attribute is effectively null or non-existent.

Therefore, to satisfy the business requirement, the step that writes the history event must be placed after the step that generates the data it needs to record.

* Process Logic: If the Business Analyst were to place the history event creation step before the Total Loss Calculator (Option B) or before the Vehicle Incident (Option D), the system would attempt to write a record containing a score that has not yet been calculated. This would result in either a system error or a history event with a blank/zero value, failing to meet the business requirement.

* Dependency Chain: The workflow dependency is: Vehicle Data Entry -> Total Loss Calculation -> Score Generation -> History Event Creation.

* Implementation Note: In a typical Guidewire implementation, this logic is often handled via "Event Fired" rules or specific "Exit Points" in the workflow. The system waits for the confirmation that the Total Loss calculation service has successfully returned a result. Once that transaction is committed and the score is persisted on the Vehicle or Exposure entity, the subsequent rule to generate the History Event can trigger successfully.

Consequently, Option C is the only viable placement in the process flow. It ensures that the prerequisite action (calculation) is

complete and the required data payload (the score) is available for the subsequent action (logging the history event).

질문 # 16

Succeed Insurance requires that a new 'Driver under 18?' field be added to the vehicle incident screen for personal auto claims to indicate whether or not the driver of the vehicle was a minor when the loss occurred.

The field will be set by calculating the driver's age using the date of loss and the driver's date of birth.

There are two validation requirements:

* The field must be set if the 'Date of Birth' field for the driver is not null.

* No payments can be made for collision exposures if the 'Date of Birth' field for the driver of the vehicle is null.

A Business Analyst (BA) documents the validation requirements in the validation tab of the User Story Card 'Adjudicate - Update Maintain Vehicle Incident for Personal Auto Claims' as shown in the exhibit.

□ What information in the two validation examples is either missing or incorrectly documented? (Choose two.)

- A. The first requirement does not need a value in the LOB column since the rule condition provides a test for the policy type.
- **B. The second requirement is missing a requirement number, and the rule condition should check for a policy type of personal auto.**
- C. The first requirement includes information on how to set the new 'Driver under 18?' field in the Rules column, which is not needed.
- **D. The second requirement is missing the name of the DV or LV file where the warning or error message will display when the validation fails.**
- E. The first requirement is missing the name of the DV or LV file for the new field, and an error or warning message should be provided.

정답: B,D

설명:

The User Story Card exhibit contains several documentation errors when compared to standard Guidewire requirements gathering best practices and the specific scenario provided.

* Missing Requirement Number and Logic Gap (Option C):

* Traceability: In the second row of the exhibit (the payment validation rule), the "Requirement Number" column is completely blank. Traceability back to the original requirements document is mandatory for all entries.

* Logic Precision: The requirement explicitly states that the rule applies to "personal auto claims"

. However, the logic documented in the "Rules" column (If Exposure Type = VehicleDamage Then Block...) does not check the Policy Type. It relies solely on the Exposure Type, which could exist on Commercial Auto policies as well. To accurately reflect the business requirement, the condition If PolicyType = Personal Auto must be added (similar to how it was done in the first row).

* Missing DV/LV Context for Validation (Option D):

* UI Anchoring: The second requirement is a validation rule that triggers an error ("Driver's Date of Birth is required..."). For the system to highlight the specific field on the screen (the "Driver Date of Birth" widget) when the error occurs, the rule must be associated with the specific Detail View (DV) or List View (LV) where that field resides (e.g., VehicleIncidentDV). The exhibit lists "Not Applicable" in the "Name of DV or LV" column. This is incorrect because providing the DV name ensures the error message is displayed contextually next to the field rather than as a generic page-level error, improving the user experience.

Why other options are incorrect:

* Option A: The LOB column is used for filtering, reporting, and release management. Even if the rule logic checks the policy type, the LOB column is required metadata and should not be removed.

* Option B: While the first requirement (the calculation) lacks a DV name (which it should have), it is a Business Rule (assignment), not a validation. Therefore, it does not generate an error or warning message for the user, so the second part of Option B is incorrect.

* Option E: The "Rules" column is exactly where the calculation logic (Date of Loss - Date of Birth) belongs. The developer needs this information to implement the automation.

질문 # 17

A sales executive and business traveler has a full coverage auto policy through his insurance company. The executive lives in Detroit, Michigan and often drives across the border to visit client offices in Canada.

While driving in downtown Toronto, the executive's car was hit by a truck coming the wrong way. He called his insurance company to report a claim for this accident. However, the Customer Service Representative (CSR) cannot confirm there is an active policy on file.

How should this claim be handled?

- A. If the policy is not verifiable, the CSR will notify a Supervisor to escalate the case for investigation and submits notes in

ClaimCenter for reference.

- B. If the policy is not verifiable, the CSR cannot create the claim as a verified, active policy is a minimum requirement to create a claim.
- C. If the policy is not verifiable, the CSR will create the claim as an unverified policy claim and retrieve the correct policy when more information available.
- D. If the policy is not verifiable, the CSR will ask the executive to call back when he has the policy information to complete the report and create the claim.

정답: C

설명:

Guidewire ClaimCenter is designed to handle First Notice of Loss (FNOL) scenarios where the policy system is unavailable or the specific policy cannot be immediately located. The correct standard procedure is to create an Unverified Policy claim.

* Unverified Policy Workflow: The New Claim Wizard allows the user to select "Unverified Policy" if a search returns no results.

This allows the CSR to proceed with capturing critical accident details (Loss Details, Vehicles, Injuries) and providing service to the customer immediately.

* Reconciliation: Later, once the correct policy number is found or the policy system comes back online, the claim can be updated.

The "Unverified Policy" feature specifically supports the "Select Policy" step of the wizard to ensure claims are not blocked by administrative data issues.

* Customer Experience: Option A (asking the customer to call back) is poor service and contrary to ClaimCenter's design philosophy. Option D is incorrect because a verified policy is not a hard blocking requirement for creating a draft claim in this specific workflow.

질문 # 18

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여러분이 다른 사이트에서도 Guidewire 인증 ClaimCenter-Business-Analysts 시험 관련 덤프 자료를 보셨을 것입니다 하지만 우리 Pass4Test의 자료만의 최고의 전문가들이 만들어낸 제일 전면적이고 또 최신 업데이트일 것입니다. 우리 덤프의 문제와 답으로 여러분은 꼭 한번에 Guidewire 인증 ClaimCenter-Business-Analysts 시험을 패스하실 수 있습니다.

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