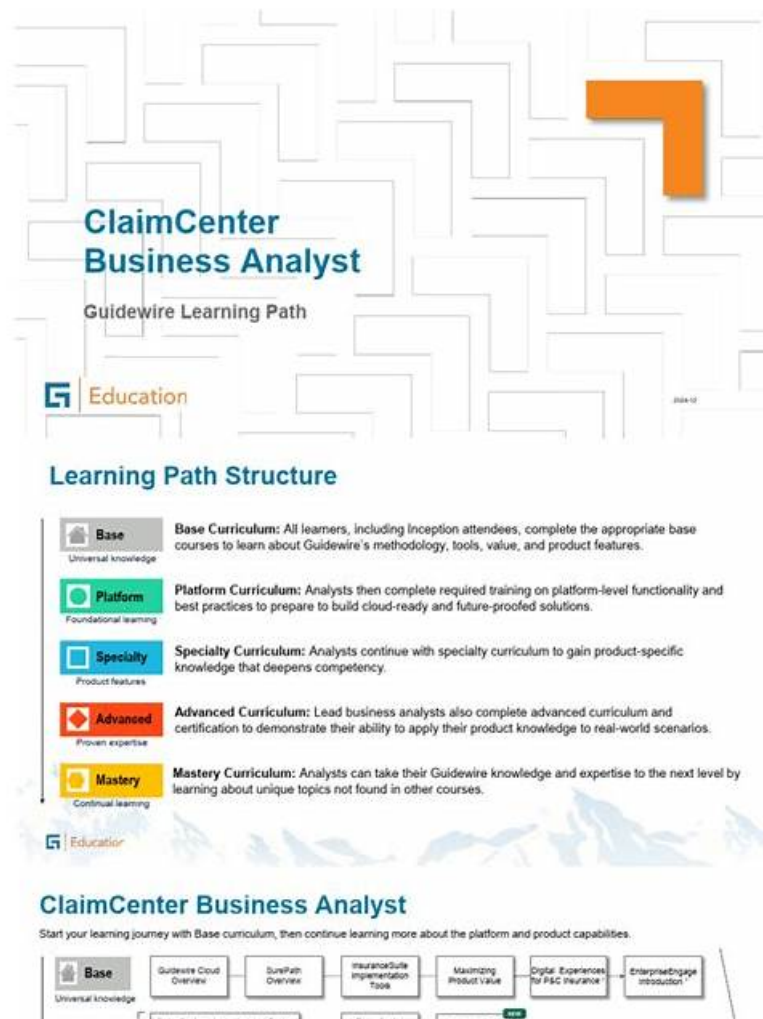


ClaimCenter-Business-Analysts Prüfung & ClaimCenter-Business-Analysts Fragen&Antworten



Bevor Sie sich für ZertFragen entscheiden, können Sie die Guidewire ClaimCenter-Business-Analysts Examensfragen-und antworten teilweise als Probe kostenlos herunterladen. So können Sie die Glaubwürdigkeit vom ZertFragen testen. Der ZertFragen ist die beste Wahl für Sie, wenn Sie die Guidewire ClaimCenter-Business-Analysts Zertifizierungsprüfung unter Garantie bestehen wollen. Wenn Sie sich für den ZertFragen entscheiden, wird der Erfolg auf Sie zukommen.

Es gibt ein Sprichwort, das Spiel beendet, wenn Sie es aufgeben. Die Prüfung ist ähnlich wie das Spiel. Viele geben die Guidewire ClaimCenter-Business-Analysts Zertifizierungsprüfungen auf, wenn sie nicht genug Zeit haben. Aber Sie können ClaimCenter-Business-Analysts Prüfung mit guter Note bestehen, wenn Sie die richtige exam Fragen benutzen trotz kurzer Zeit. Glauben Sie nicht? Dann müssen sie die ClaimCenter-Business-Analysts Prüfungsunterlagen von ZertFragen probieren.

>> ClaimCenter-Business-Analysts Prüfung <<

Die seit kurzem aktuellsten ClaimCenter Business Analyst - Mammoth Proctored Exam Prüfungsunterlagen, 100% Garantie für Ihen Erfolg in der Guidewire ClaimCenter-Business-Analysts Prüfungen!

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Guidewire ClaimCenter Business Analyst - Mammoth Proctored Exam ClaimCenter-Business-Analysts Prüfungsfragen mit Lösungen (Q31-Q36):

31. Frage

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

Antwort: C

32. Frage

Succeed Insurance has a strategic initiative to change auto insurance into a pay-as-you-drive model... When claims are processed, claimants must provide the log from the application for the date of incident. The log's details are essential to validation and analysis of the monitoring system's activity at the time of the incident.

Without the application log, claims should not be processed to indemnification.

Executives say the implementation team must maintain the base product functionality where appropriate and only change those things essential to the success of the initiative...

Which two requirements are in scope based on the guiding principles? (Choose two.)

- A. As an Adjuster, vehicle mileage/kilometers must be captured during adjudication to track mileage /kilometers, and potentially prevent fraudulent activities.
- **B. As an Adjuster, the insured application log must be received, reviewed, and attached to the claim to analyze and validate the monitoring systems activity at the time of the claim.**
- C. As a business, integration to the top five vehicle manufactures must be completed to maximize accuracy of claim processing. Succeed intends to complete one integration every 30 days.
- **D. As an Adjuster, the system should prevent indemnification of claimants if the application log has not been provided and reviewed to prevent payments without validation.**

Antwort: B,D

Begründung:

When defining scope based on specific strategic initiatives and guiding principles (such as "only change those things essential"), the Business Analyst must map requirements directly to the stated business rules and critical success factors.

* Requirement D (Log Intake):The scenario explicitly states:"The log's details are essential to validation and analysis... claimants must provide the log."Option D directly captures this by requiring the log to be received, reviewed, and attached. This is the core data intake requirement.

* Requirement C (Validation Rule):The scenario states:"Without the application log, claims should not be processed to indemnification."Option C directly maps to this business rule. It utilizes base product capabilities (Validation Rules) to enforce the "No Log, No Pay" constraint, ensuring the initiative's security and validity.

Why other options are incorrect:

* Option B (OEM Integration):The scenario mentions leveraging integration "where possible," but creates a requirement for "application logs," not direct integration with "top five vehicle manufacturers." Adding a rigid schedule ("one integration every 30 days") is a high-cost, high- complexity constraint that contradicts the principle of maintaining base functionality and minimizing cost/maintenance unless explicitly required.

* Option A (Mileage):While mileage is part of the concept, theessentialrequirement described for the claim process is thevalidation of the logfor the incident. Tracking mileage is secondary to the critical path of validating the accident data via the log.

33. Frage

Succeed Insurance allows field Adjusters to write checks directly to the insured to cover damage costs for minor claims such as:

- * Personal auto claims involving cracked windshields
- * Homeowners claims involving minor glass breakage

The Adjuster uses the Manual Check Wizard to record the check number and amount against a reserve line.

Succeed requires Supervisor approval for all manual checks to ensure that the paper checks are verified against the payment information in ClaimCenter.

Which two limits or rules must be configured in ClaimCenter to ensure that these manual payments are sent to the correct person for approval? (Choose two.)

- A. TransactionSet validation rules
- **B. Transaction approval rules**
- C. Approval routing rules
- **D. Authority limits**

Antwort: B,D

Begründung:

To enforce an approval workflow for a specific type of financial transaction (like "Manual Checks") regardless of the dollar amount, a Business Analyst must leverage both Authority Limits and Transaction Approval Rules.

* Authority Limits (D): These are the primary controls for financial exposure. While typically used for amounts (e.g., "Limit of \$5,000"), they are the foundational mechanism that triggers the system's

"Pending Approval" state. For this scenario, an authority limit could be set to \$0 for the specific payment method of "Manual Check" to force all such payments into the approval workflow.

* Transaction Approval Rules (C): These rules allow for more granular, logic-based approval triggers beyond simple amounts. Since the requirement specifies "all manual checks" (implying a condition based on the method of payment, not just the amount), a Transaction Approval Rule is the best practice configuration. The rule would be written to state: "If Payment Method is Manual, then Approval is Required."

* Why not A (Approval Routing)? While Approval Routing rules determine where the request (the "correct person"), the default behavior in ClaimCenter is to route approvals to the user's Supervisor.

Since the requirement is simply "Succeed requires Supervisor approval," the standard routing logic likely suffices without needing new custom configuration. The critical configuration needed is the trigger (C and D) to stop the payment in the first place.

34. Frage

Which set of three objects is required to create a liability exposure?

- A. Claimant, Coverage (type and subtype), Reserve Line
- B. Coverage (type and subtype), Incident, Reserve Line
- C. Claimant, Incident, Reserve Line
- **D. Claimant, Coverage (type and subtype), Incident**

Antwort: D

Begründung:

In the Guidewire ClaimCenter object model, a Liability Exposure represents a specific potential financial obligation to a third party. To successfully instantiate (create) a new exposure record, the system requires three fundamental data associations to define "Who, What, and How":

* Claimant: The specific person or entity seeking compensation (the "Who"). Every exposure must be linked to a contact designated as the claimant.

* Coverage (Type and Subtype): The specific contractual provision from the policy that applies to the loss (the "How"). The exposure must link back to a valid coverage on the verified policy to confirm the insurer is liable.

* Incident: The specific details of the event or damage (the "What"). In ClaimCenter, an Incident is a distinct object (e.g., Vehicle Incident, Injury Incident) that captures the facts of the loss. Multiple exposures can link to the same incident (e.g., Bodily Injury and Property Damage exposures both linking to the same Vehicle Incident), but every exposure requires one underlying incident to define the scope of the damage.

Why other options are incorrect:

* Reserve Line (A, C, D): A Reserve Line is a financial accounting object created after the exposure exists to set aside funds. It is a child object of the exposure, not a prerequisite for creating the exposure itself.

35. Frage

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

Antwort: D

Begründung:

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.

36. Frage

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