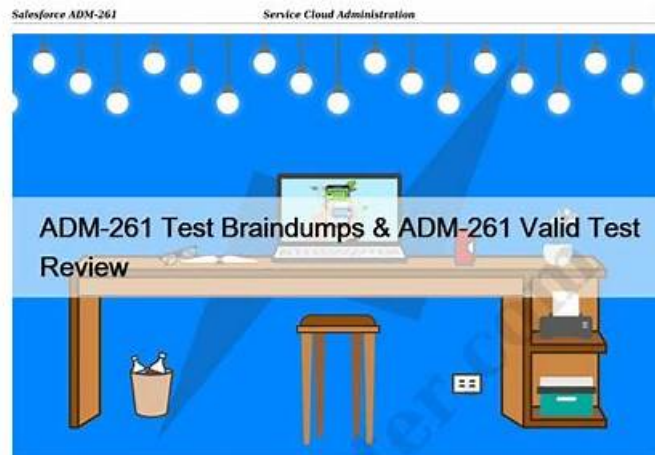


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## Workday Pro Certification exam Sample Questions (Q52-Q57):

### NEW QUESTION # 52

Your new hires have a 60-day waiting period. Medical coverage starts on the first of the month following 60 days from hire. Where do you configure the system to calculate first the 60-day waiting period and then apply the first of the following month logic?

- A. Benefit Group
- B. Benefit Plan Eligibility Rule
- C. Start or Waive Coverage
- D. Benefit Event Type

**Answer: C**

Explanation:

The correct answer is A because the Start or Waive Coverage section of the Enrollment Event Rule is where Workday determines when benefit coverage becomes effective after an employee becomes eligible. In this scenario, the organization needs two pieces of timing logic applied in sequence: first, a 60-day waiting period from the hire date, and second, a rule that moves the actual coverage start date to the first day of the following month. This type of effective-date calculation belongs in the coverage start configuration tied to the enrollment event.

Option B is incorrect because a Benefit Plan Eligibility Rule determines whether the employee qualifies for the plan, but it does not control the detailed coverage effective-date calculation sequence. Option C identifies the event itself, such as hire or newly eligible, but does not hold the specific start-date logic needed here.

Option D is also incorrect because Benefit Groups are used to organize populations for benefits eligibility and plan assignment, not to calculate waiting periods and coverage effective dates. For waiting period and start- date timing logic, the correct configuration point is Start or Waive Coverage .

### NEW QUESTION # 53

Your company decides to require workers to attach a document when they report a life event. Where will you configure this?

- A. On the event, select the Do Not Reprocess checkbox.
- B. On the event, select the Route to Benefits Partner checkbox.
- C. On the event, select the Worker Selectable checkbox.
- D. On the Change Benefits business process, using a validation rule.

**Answer: D**

Explanation:

The correct answer is D because requiring supporting documentation during a life event submission is controlled through the business process framework , specifically within the Change Benefits business process

. Workday allows administrators to enforce rules such as mandatory attachments by configuring a validation rule on the business process step. This ensures that when an employee submits a life event, the system checks for the presence of an attachment and prevents submission if the requirement is not met.

Option A is incorrect because the Route to Benefits Partner checkbox only determines whether the event is routed for review by a benefits administrator and does not enforce document attachment requirements. Option B is unrelated, as Do Not Reprocess controls event reprocessing behavior. Option C is also incorrect because Worker Selectable determines whether employees can initiate the event, not whether attachments are required.

To enforce compliance and ensure documentation is provided at submission, the requirement must be configured using a validation rule within the Change Benefits business process.

### NEW QUESTION # 54

What configuration limits an employee's self-service benefit event initiation to within 30 days of today's date?

- A. On the Enrollment Event Type, configure Days to Enroll to 30 and select Employee Cannot Report After Days to Enroll.
- B. On the Enrollment Event Type, configure Days to Enroll to 30 and select Do Not Reprocess.
- C. On the Enrollment Event Type, configure Days to Enroll to 30 and select Do Not Reprocess Future Events.

- D. On the Enrollment Event Type, select Reinstatement Event and enter 30 days in the Reinstatement Period Time Units field.

**Answer: A**

Explanation:

The correct answer is C because Workday controls how long an employee has to report a self-service life event through the Days to Enroll value combined with the Employee Cannot Report After Days to Enroll setting on the Enrollment Event Type. When Days to Enroll is set to 30, the system establishes a 30-day reporting window from the event date. Selecting Employee Cannot Report After Days to Enroll enforces that limit by preventing employees from initiating or submitting the event after the allowed timeframe has passed.

Option A is incorrect because Do Not Reprocess relates to event reprocessing behavior and does not limit how long an employee has to report the event. Option B is also incorrect because Do Not Reprocess Future Events manages future event handling rather than self-service submission timing. Option D is unrelated because the Reinstatement Event configuration is used for rehired workers or reinstatement scenarios, not for setting the reporting window for standard employee-initiated life events. To restrict employee self-service benefit event initiation to within 30 days, the correct setup is Days to Enroll plus the Employee Cannot Report After Days to Enroll control.

#### **NEW QUESTION # 55**

How do you update the HSA contribution limits to take effect in the upcoming open enrollment?

- A. When open enrollment is initiated, a prompt will require an update to the HSA limits.
- B. Workday automatically updates the benefit plan HSA limits.
- **C. Edit the HSA plan using an effective date that is the first day of the new plan year and update the new contribution limits.**
- D. HSA contribution limits are only configured in Workday Payroll. They are not configured on the HSA Benefit Plan.

**Answer: C**

Explanation:

The correct answer is B because Workday uses effective dating to manage changes to benefit plans over time, including contribution limits for plans such as Health Savings Accounts (HSAs). To ensure that new contribution limits apply for the upcoming open enrollment period, administrators must update the HSA plan with an effective date aligned to the start of the new benefit plan year. This allows the system to maintain historical accuracy while applying updated limits prospectively for future enrollments.

By entering the new limits with the correct future effective date, Workday ensures that employees enrolling during open enrollment will see and be governed by the updated contribution thresholds. Option A is incorrect because HSA contribution limits are configured within the benefit plan, not solely in payroll. Option C is incorrect because Workday does not prompt administrators automatically to update limits during enrollment events. Option D is also incorrect because Workday does not automatically adjust HSA limits; administrators must manually update them to reflect regulatory changes. Proper use of effective dating ensures accurate and compliant benefit plan configuration across plan years.

#### **NEW QUESTION # 56**

The benefits administrator must ensure newly acquired employees are eligible for two benefit plans that the rest of the company is not eligible for. To present all employees with a unified open enrollment experience and consistent rate frequency on enrollment pages, how should the benefits administrator configure this?

- **A. Create one benefit group for all employees. Create the two benefit plans and assign both to the Benefit Group. Create a Benefit Plan eligibility rule identifying the acquired employee population and link it to the two benefit plans they and only they are eligible for.**
- B. Create one benefit group and manually assign the two healthcare plans to eligible acquisition employees.
- C. Create one benefit group for all employees. Create two benefit plans and assign both to the Benefit Group, but leave the Benefit Plan eligibility rule on the two benefit plans empty.
- D. Create two benefit groups, one for the acquired employees and one for the current employees. Link both benefit groups to all available benefit plans.

**Answer: A**

Explanation:

The correct answer is A because the requirement is to give all employees a unified open enrollment experience while restricting only two specific plans to the acquired population. In Workday, when the broader enrollment structure should remain the same for everyone, the preferred design is to keep workers in a single benefit group and use benefit plan eligibility rules to control access to

individual plans. This preserves a consistent enrollment flow, rate frequency presentation, and general benefits framework while still limiting the two acquired-population plans to the correct employees.

Option B is incorrect because leaving the plan eligibility rule blank would make those plans available to everyone in the benefit group. Option C is not the best design because creating separate benefit groups introduces a broader split in the benefits framework, which can lead to a less unified enrollment experience and additional administrative complexity when only two plans need to differ. Option D is also incorrect because manual assignment is not the standard scalable configuration approach in Workday Benefits. Plan-level eligibility is the correct method when only selected plans must be restricted within a shared enrollment structure.

## NEW QUESTION # 57

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