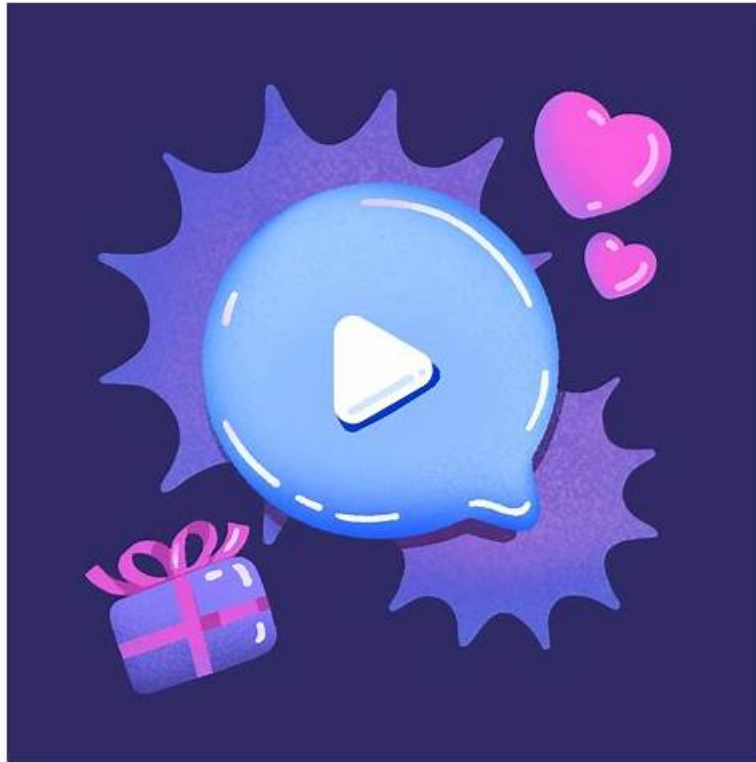


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Salesforce Health Cloud Accredited Professional certification exam is designed for professionals who work in the healthcare industry and want to demonstrate their expertise in using the Salesforce Health Cloud platform. Salesforce Health Cloud Accredited Professional certification indicates that the individual has a strong understanding of how Salesforce Health Cloud can be used to manage patient data, coordinate care, and improve health outcomes.

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Salesforce Health Cloud Accredited Professional exam is designed for individuals who work in the healthcare industry and have experience using Salesforce Health Cloud to manage patient data and improve patient outcomes. Salesforce Health Cloud Accredited Professional certification validates a professional's skills and knowledge in implementing, configuring, and customizing the Salesforce Health Cloud platform.

The Salesforce Health Cloud Accredited Professional certification exam covers a range of topics related to the Salesforce Health Cloud platform. These topics include health data models, care team management, patient management, case management, and analytics. Candidates must have a thorough understanding of these topics to pass the exam and earn the certification.

Salesforce Health Cloud Accredited Professional Sample Questions (Q20-Q25):

NEW QUESTION # 20

Which Data Model Leverages external objects to support the use Case?

- A. Member Plan
- B. Clinical Service Requests
- C. Care Observations
- **D. Claims**

Answer: D

Explanation:

Claims data model leverages external objects to support the use case of integrating claims data from external systems into Health Cloud. External objects are similar to custom objects, except that they map to data that's stored outside your Salesforce org1.

NEW QUESTION # 21

Which three activities does "The Social Determinants" feature in Health cloud help providers perform? (choose three.)

- **A. Plan interventions to help address the barriers to care within their patient populations**
- B. Automatically import credit scores and income information into the patient record in Health cloud
- **C. Track the influence of the social network of the patient on the patients' health outcomes**
- **D. Track determinants and barriers to care across their patient populations**
- E. Integrate service such as transportation and meal delivery into their patient care plans and programs.

Answer: A,C,D

NEW QUESTION # 22

A payer is looking to optimize the workflow for its call center, which focuses primarily on members calling to check on the status of their prior authorization requests.

How should a consultant conduct discovery to define a workflow for these call center users?

- A. Use work from another project to Inform the discovery, then review It with the IT department.
- B. Build a proof of concept to present to the client and ask them for feedback.
- **C. Identify personas and ask their to walk through a day in their life, taking notes and identifying opportunities for optimization.**
- D. Research Industry trends and develop a point of view, then present it to the customer for validation.

Answer: C

Explanation:

To optimize workflows for a payer's call center, conducting a discovery phase requires identifying key pain points, inefficiencies, and opportunities.

Identify Personas and Walk Through a Day in Their Life:

Engage call center agents and supervisors who handle prior authorization requests and ask them to describe their daily processes,

challenges, and tools used.

Take detailed notes to map out existing workflows and pinpoint inefficiencies. This approach provides insights into real-world challenges, helping to design tailored workflows that address bottlenecks.

Why Other Options Are Incorrect:

B . Build a proof of concept to present to the client and ask them for feedback:

Building a proof of concept comes later, after completing discovery and requirements gathering.

C . Research industry trends and develop a point of view, then present it to the customer for validation:

While understanding industry trends is useful, presenting pre-determined workflows without first understanding the customer's specific needs risks misalignment.

D . Use work from another project to inform the discovery, then review it with the IT department:

Reusing workflows from another project may not address the unique needs of this customer's call center processes.

Reference:

Salesforce Health Cloud Use Case Discovery Best Practices

Administer Health Cloud

NEW QUESTION # 23

A provider is looking to implement Utilization Management in Health Cloud and submit and track prior authorizations.

Which two capabilities should a consultant customize to achieve this?

Choose 2 answers

- A. Integrate using MuleSoft Direct for electronic Prior Authorizations (ePA).
- B. Create a new Support Process to match the customer's process steps.
- C. Customize the Service Request object.
- D. Create a new UtilizationManagementSettings record in Custom Settings.

Answer: A,C

Explanation:

Health Cloud supports Utilization Management (UM) through the Service Request object, which tracks prior authorization requests, and through integration with electronic prior authorization systems using MuleSoft.

* Customize the Service Request object:

* Extract:

"The Service Request object is at the core of the Utilization Management process in Health Cloud. You can customize fields, page layouts, and automation to match your business processes for prior authorization." (Source: Administer Health Cloud - Utilization Management)

* Integrate using MuleSoft Direct for ePA:

* Extract:

"Integrate Health Cloud Utilization Management with external systems using MuleSoft Direct, enabling electronic submission and tracking of prior authorizations." (Source: Administer Health Cloud - Utilization Management Integration)

* Why not B or D?

* There is no standard custom setting called UtilizationManagementSettings for this process.

* Support Process is more for standard Salesforce Cases and not directly linked to Utilization Management flows in Health Cloud.

NEW QUESTION # 24

Bloomington Caregivers has more than 1 million patients and each patient has an average of 10 claims a year, which are maintained in an external claims system. Management would like their agents to view all the claims of patients in Salesforce on demand when they open the patient's record.

What should a consultant recommend as the appropriate integration pattern to achieve this?

- A. Configure the claims system as an external data source and leverage external objects with the claims data.
- B. Add a nightly job to fetch all the claims from the external system and store them in Salesforce.
- C. Make a callout on demand to the external system and store the claims data against the patient record.
- D. Use an Enterprise Service Bus (ESB) to load all the claims data from the external system into Salesforce.

Answer: A

NEW QUESTION # 25

