

# MB-230 Exam Tutorial - Valid Exam MB-230 Registration



**MB-230**  
**Microsoft Dynamics 365**  
**Customer Service**  
**Functional**  
**Consultant**



**Certification Questions**  
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## Microsoft Dynamics 365 Customer Service Functional Consultant Sample Questions (Q19-Q24):

### NEW QUESTION # 19

You are an administrator of a Dynamics 365 Customer Service system for a computer support company. Team members must handle cases as follows:

- A case for a new customer follows a different process than for a returning customer.
- A case for a returning customer who has a contract follows a different process than for a

customer who is pay as you go.

All cases must be researched and resolved.

Cases must be handled in a manner that is simple to maintain.

You need to ensure that all team members follow the same process for handling cases.

What should you do?

- A. Create two different forms and a business process flow for each type of customer.
- **B. Create a business process flow that branches.**
- C. Create two different queues for the different types of customers.
- D. Create a Power Automate flow that branches.

**Answer: B**

Explanation:

<https://docs.microsoft.com/en-us/dynamics365/customerengagement/on-premises/customize/enhance-business-process-flows-branching?view=op-9-1>

### NEW QUESTION # 20

You need to configure the options for the schedule.

Which options should you configure? To answer, select the appropriate options in the answer area.

NOTE: Each correct selection is worth one point.

**Answer:**

Explanation:

Reference:

<https://docs.microsoft.com/en-us/dynamics365/customer-service/resources-service-scheduling>

Topic 2, Humongous Insurance

Overview

This is a case study. Case studies are not timed separately. You can use as much exam time as you would like to complete each case. However, there may be additional case studies and sections on this exam. You must manage your time to ensure that you are able to complete all questions included on this exam in the time provided.

To answer the questions included in a case study, you will need to reference information that is provided in the case study. Case studies might contain exhibits and other resources that provide more information about the scenario that is described in the case study. Each question is independent of the other questions in this case study.

At the end of this case study, a review screen will appear. This screen allows you to review your answers and to make changes before you move to the next section of the exam. After you begin a new section, you cannot return to this section.

To start the case study

To display the first question in this case study, click the Next button. Use the buttons in the left pane to explore the content of the case study before you answer the questions. Clicking these buttons displays information such as business requirements, existing environment, and problem statements. If the case study has an All Information tab, note that the information displayed is identical to the information displayed on the subsequent tabs. When you are ready to answer a question, click the Question button to return to the question.

Background

Humongous Insurance is contracted to process all insurance claims for a health facility that accepts the following types of health insurance:

Health maintenance organization (HMO)

Preferred-provider organization (PPO)

Gold

Cases are classified as new claims, claim disputes, and follow-ups. Each insured person is entitled to open 25 new cases each calendar year.

Support representatives specialize by and process claims by insurance type.

Humongous Insurance currently accepts claims only by telephone. The call center is open from 06:00 GMT to 24:00 GMT daily.

Call center staff work one of the following shifts: 06:00 GMT to 12:00 GMT, 12:00 GMT to 18:00 GMT, and 18:00 GMT to 24:00 GMT.

When a case is received by email, a staff member categorizes the case as email and closes the case immediately.

Current environment

Humongous Insurance has three departments to handle claim types: HMO, PPO, and Gold.

The company uses handwritten forms to send claims information to the correct department.

Each department maintains a workbook to record calls received.

Requirements. Support desk

Configure the system to track the number of insurance claims filed each year.

Categorize claims by type as they are opened.

Configure the system to track staff responsiveness to service-level agreements (SLAs).

Ensure that business hours reflect the hours that support staff are scheduled.

Requirements. Case handling

All new cases must be automatically placed into a queue based on insurance type after the type is selected.

All insurance types need to be automatically moved to the proper queue when the subject is picked.

All cases must be created and closed immediately when received.

The status reason must be set to Email Sent or Phone Call.

Information must be restricted by insurance and phone call type.

Managers must be alerted when customers reach their limit of 25 cases for the year.

Changes to cases must not be counted against entitlements until the case is closed.

Requirements. Disputes

Claim disputes must be categorized as low priority.

The status for all disputed cases must be set to Review by a Manager before a disputed case may be closed.

Requirements. Knowledge base

A knowledge base must be used as a repository for all answers.

Representatives must be able to search the knowledge base when opening a new case for similar claims.

Representatives must be able to search across all entities at all times.

Searches must check any field in the entity for matches in a single search.

Searches must return results in a single list and sort the list so that the most relevant results appear at the top of the list.

Representatives must be able to link the knowledge base to cases when applicable.

Representatives must create a new knowledge base article if an answer is not found in the existing knowledge base.

Representatives must be able to use SQL-like syntax to search the knowledge base.

Requirements. Service-level agreements

When a customer calls to open a claim, the company must respond to the caller within the following time frames:

Requirements. Alerts

Cases must be flagged when they are past the SLA threshold.

An email alert must be sent to the manager to indicate an SLA noncompliance.

An email alert must be sent to representatives for SLA violations as follows: HMO 2 hours prior and PPO 1 hour prior.

Send an email alert to support managers when disputes are ready to be closed.

Send an email alert to customers when cases are closed.

Requirements. Issues

The current process is all manual and not efficient.

There is no easy way to determine whether the company is meeting its SLAs.

Representatives are often inconsistent regarding how they handle customers and answer customer questions.

There is no accountability for any of the representatives who take calls.

## NEW QUESTION # 21

You are a Dynamics 365 Customer Service administrator.

Users inform you about situations in which child cases are not working correctly.

You need to configure the system to correct the issues.

What should you do in each situation? To answer, select the appropriate options in the answer area.

NOTE: Each correct selection is worth one point.

**Answer:**

Explanation:

Explanation

Graphical user interface, text, application Description automatically generated

Reference:

<https://docs.microsoft.com/en-us/dynamics365/customer-service/define-settings-parent-child-cases>

## NEW QUESTION # 22

A company that operates in 101 countries/regions globally uses Dynamics 365 Customer Service. The countries/regions currently

use the same environment.

An administrator plans the deployment of additional portals to support customer service processes.

Each country/region requires the following:

\* A Microsoft Dataverse starter portal in an environment with Dataverse

\* A blank portal in an environment with customer engagement apps

\* A pre-build portal in an environment with customer engagement apps

You need to determine the minimum number of environments required.

How many environments will you need? To answer, drag the appropriate number to the portal requirements.

Each number of may be used once, more than once, or not at all. You may need to drag the split bar between panes or scroll to view content.

NOTE: Each correct selection is worth one point.

**Answer:**

Explanation:

Explanation:

### NEW QUESTION # 23

You are setting up Omnichannel for Customer Service.

You need to automate the following tasks to make it easier and quicker for representatives to assist customers:

Establish a one-step process to send a predefined email to customers once a representative is done helping them.

Ensure that representatives ask predefined questions to identify a customer before troubleshooting a case.

Have chatbots available to help make recommendations in typed conversations.

Which tools should you use? To answer, drag the appropriate tools to the correct requirements. Each tool may be used once, more than once, or not at all. You may need to drag the split bar between panes or scroll to view content.

**Answer:**

Explanation:

Reference:

<https://docs.microsoft.com/en-us/power-platform/admin/create-users>

<https://docs.microsoft.com/en-us/dynamics365/customer-service/create-operating-hours?tabs=customerserviceadmincenter>

### NEW QUESTION # 24

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