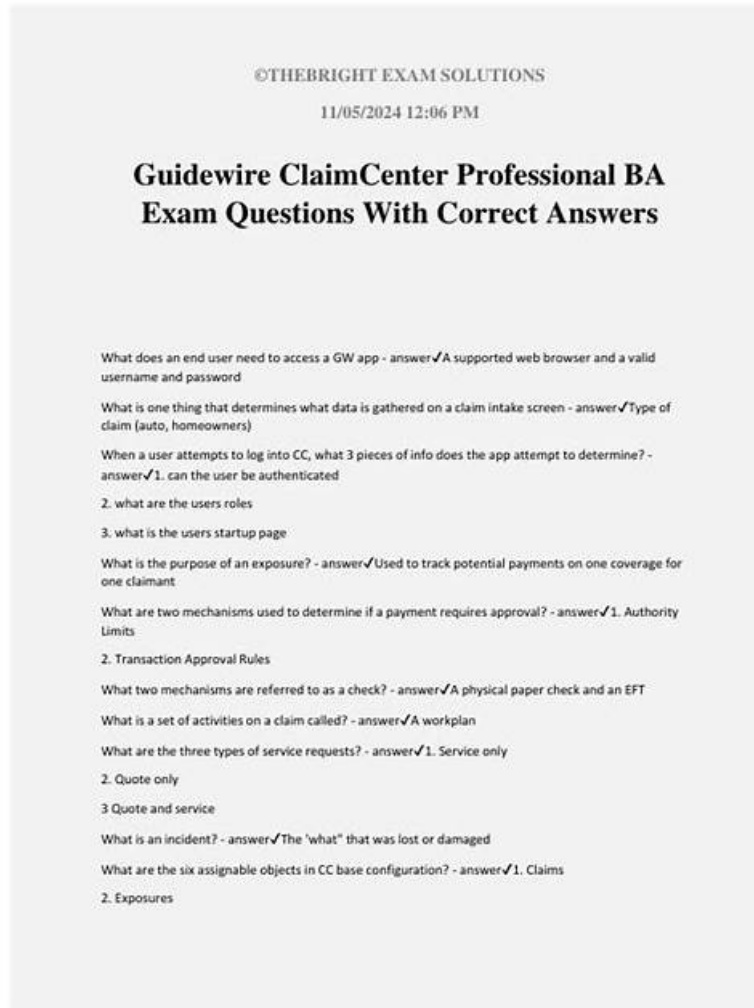


Real Guidewire ClaimCenter-Business-Analysts Exam Question In PDF



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There are more and more people to try their best to pass the ClaimCenter-Business-Analysts exam, including many college students, a lot of workers, and even many housewives and so on. These people who want to pass the ClaimCenter-Business-Analysts exam have regard the exam as the only one chance to improve themselves and make enormous progress. So they hope that they can be devoting all of their time to preparing for the ClaimCenter-Business-Analysts Exam, but it is very obvious that a lot of people have not enough time to prepare for the important exam. Just like the old saying goes, the spirit is willing, but the flesh is weak.

Guidewire ClaimCenter-Business-Analysts Exam Syllabus Topics:

| Topic | Details |
|---------|---|
| Topic 1 | <ul style="list-style-type: none"> Claim Processes and Maintenance: This section focuses on end-to-end claims processes, organizational structure setup, line of business coverage configuration, claim intake procedures, and ongoing claim maintenance activities. |
| Topic 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. |

| | |
|---------|---|
| Topic 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. |
| Topic 4 | <ul style="list-style-type: none"> Claim Center Financials Transactions: This section covers financial controls including payment approvals and holds, contact and vendor management, service request handling, and security framework with permissions and access control lists. |

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Guidewire ClaimCenter Business Analyst - Mammoth Proctored Exam Sample Questions (Q35-Q40):

NEW QUESTION # 35

Which workflow will kick in if the claim assignment is handled via "Default Group Claim Assignment Rule" with available matching?

- A. Claim gets assigned to a user based on expertise and workload.
- B. Claim gets assigned to an appropriate Group based on geography and LOB.
- C. Claim goes to the "Root Group" for manual assignment.
- D. Claim gets assigned to a Supervisor to determine next step.

Answer: A

Explanation:

In Guidewire ClaimCenter, assignment logic functions in a two-stage process: first Global Assignment (which finds the appropriate Group) and then Group Assignment (which finds the appropriate User within that group).

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TheDefault Group Claim Assignment Ruleis the specific logic set used to distribute claimswithina group once the group has already been identified. When this rule is configured with "available matching" (often referred to as criteria-based or attribute-based assignment), the system evaluates the users inside that group against specific criteria.

* Workflow:The system filters the group's users to find those who are "available" (not on vacation) and then matches the claim against user attributes such asExpertise,Workload(current claim count), or specific skills.

* Result:The claim is automatically assigned to the best-fitUserwithin that group.

Why other options are incorrect:

* Option B (Geography/LOB):This describesGlobal Assignmentrules, which are responsible for routing the claim to the correct office or unit (Group), not the specific user.

* Option C (Supervisor):Assigning to a supervisor is a fallback mechanism (often called "Assign to Supervisor") used when the system fails to find a matching user or when manual intervention is explicitly required. It is not the primary function of "available matching."

* Option D (Root Group):Routing to the "Root Group" is a last-resort fallback when Global Assignment fails entirely to find any appropriate group.

NEW QUESTION # 36

To optimize business process workflow, an insurer has spent a great deal of effort on estimating the amount of effort required to complete various types of work... They are also aware that certain situations may require specialized expertise and want to

incorporate this in their decision making.

All claims and exposures are entered using only the ClaimCenter new claim wizard. Once entered, the work should be automatically distributed fairly to those properly suited, as determined by the company's knowledge of each worker's skill set.

Which two assignment mechanisms, alone or together, will achieve their goal? (Choose two.)

- A. FNOL queues
- **B. Weighted workload**
- C. Round-robin
- **D. User attribute**
- E. Supervisor assignment

Answer: B,D

Explanation:

To meet the dual requirements of "specialized expertise" and "fair distribution based on effort," the Business Analyst should utilize User Attributes and Weighted Workload assignment rules.

* User Attributes (Option B): This feature handles the "specialized expertise" requirement.

Administrators can tag users with specific attributes (e.g., "Bilingual," "Heavy Equipment Expert,"

"Litigation Specialist"). Assignment rules can then be configured to filter the pool of potential assignees to only those who possess the matching attribute for the specific claim type.

* Weighted Workload (Option D): This feature handles the "fair distribution" and "amount of effort" requirement. Unlike Round-robin (which treats all claims as equal), Weighted Workload assigns a

"weight" (effort points) to the claim and tracks the "load factor" (current capacity) of the user. The system assigns the new work to the user with the lowest relative workload, ensuring that adjusters handling difficult, high-effort claims are not overwhelmed with the same volume as those handling simple claims.

Why other options are incorrect:

* Round-robin (A): Distributes work purely cyclically (1-2-3-1-2-3) without regard for the user's current workload or the complexity of the claim.

* FNOL Queues (C): This is a "pull" mechanism where work sits in a bucket until someone grabs it, rather than the "automatic distribution" (push) requested.

* Supervisor Assignment (E): This is manual, not automatic.

NEW QUESTION # 37

Under the Travel loss type, Succeed Insurance offers personal travel policies as part of its travel line of business.

Which two pieces of information in the user interface (UI) will be different for a personal travel claim than for a personal auto or homeowners claim? (Choose two.)

- A. The format of the Financial Summary screen
- B. Contact information collected for the insured
- C. The values displayed in the list of fault ratings
- **D. The values displayed in the list of loss causes**
- **E. Incident types available for recording damage**

Answer: D,E

Explanation:

Guidewire ClaimCenter is designed to support multiple Lines of Business (LOB), and the User Interface adapts dynamically based on the policy type associated with the claim.

* Incident Types (Option B): The "Incident" is the object that describes what was damaged or lost.

* For Auto, the UI displays Vehicle Incidents (describing cars).

* For Homeowners, the UI displays Dwelling or Fixed Property Incidents.

* For Travel, the UI will display distinct incident types such as Baggage Incident (for lost luggage) or Trip Cancellation Incident. These are fundamentally different data objects with different fields.

* Loss Causes (Option C): The Loss Cause typelist is filtered by the Line of Business.

* Auto claims show causes like "Collision," "Rear-end," or "Theft of Vehicle."

* Travel claims will show completely different values such as "Trip Delay," "Lost Baggage,"

"Medical Emergency," or "Cancellation."

Why other options are incorrect:

* Financial Summary (A): The structural format of the Financial Summary screen (displaying Reserve Lines, Payments, and Remaining Reserves) is a core system framework that remains consistent across all lines of business.

* Contact Information (E):The Contact entity (Name, Address, Phone) is a shared entity. The fields used to capture a person's details are generally the same whether they are a driver, a homeowner, or a traveler.

NEW QUESTION # 38

Succeed Insurance has a strategic initiative to offer pay-as-you-drive personal auto insurance to compete with other large carriers. Customers who choose these policies must either own a vehicle that is equipped with a monitoring device or agree to install a device provided by Succeed. The monitoring device collects information about how the drivers of a covered vehicle drive, including how fast they drive, how hard they brake, and how many miles/kilometers the vehicle travels within a policy period.

This information is logged, and premiums are based on how the insured's driving behavior is categorized.

When a claim is reported, the log files must be obtained in order to analyze the information captured by the monitoring device at the time of the incident.

Succeed plans to collect and evaluate the Vehicle Monitoring Log files in the first implementation phase, which is scheduled for release in 60 days. The project sponsors have instructed the implementation team to use base product functionality over customization. Integration should be leveraged where possible to avoid manual data entry.

The New Claim Wizard must capture whether or not the vehicle has a monitoring device installed when a personal auto claim is created against a pay-as-you-drive policy.

Which feature of the base product enforces this claim creation requirement?

- A. Create a Validation rule enforcing a new custom Validation level for mechanical requirements.
- **B. Create a Validation rule enforcing the New loss completion validation level.**
- C. Create a Validation rule enforcing the Load and save validation level.
- D. Create a Validation rule enforcing the Ability to pay validation level.

Answer: B

Explanation:

In Guidewire ClaimCenter, Validation Rules are used to enforce data integrity and business requirements at specific stages of the claim lifecycle. These stages are defined by Validation Levels.

* New Loss Completion (Option B):This validation level is specifically designed as the "gatekeeper" for the New Claim Wizard (FNOL). Rules triggered at this level run when the user attempts to click

"Finish" to submit the new claim. If a rule fails (e.g., "If Policy Type = Pay-as-you-drive AND Monitoring Device is Null"), the system prevents the claim from being created and highlights the missing field. This directly meets the requirement to enforce data capture "when a personal auto claim is created." Why other options are incorrect:

* Ability to Pay (A):This level runs when a user tries to issue a check. Using this would allow the claim to be created without the device info, only blocking the user later when they try to pay, which is too late for the requirement.

* Custom Level (C):Creating custom levels is possible but discouraged when a standard level fits the purpose, aligning with the "use base product functionality" principle.

* Load and Save (D):This level runs every time the claim is saved (even as a draft). Enforcing mandatory fields here can frustrate users who need to save their work partially complete.

NEW QUESTION # 39

Which two components are necessary to create the check(s) using the wizard? (Choose two.)

- A. Payment tied to an activity
- B. Date of the claim
- **C. Payment tied to a reserve line**
- **D. Payee**

Answer: C,D

Explanation:

The Check Wizard in Guidewire ClaimCenter enforces strict financial integrity rules. To successfully create a check, the user must define the source of funds and the recipient.

* Payment tied to a Reserve Line (Option A):Every payment must be allocated to a specific Reserve Line (combination of Exposure, Cost Type, and Cost Category). This ensures that the payment consumes the correct financial reserves and maps to the correct coverage on the policy. You cannot create a "floating" payment; it must be tied to a reserve line.

* Payee (Option C):A check is a legal instrument that must be payable to a specific entity. Selecting a Payee (from the claim contacts) is a mandatory step in the wizard.

Why other options are incorrect:

myportal.utt.edu.tt, myportal.utt.edu.tt, myportal.utt.edu.tt, www.stes.tyc.edu.tw, Disposable vapes

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