

# ClaimCenter-Business-Analysts Printable PDF - Reliable ClaimCenter-Business-Analysts Exam Tutorial

**ClaimCenter Business Analyst**  
Guidewire Learning Path

Education

### Learning Path Structure

- Base** (Universal knowledge): **Base Curriculum:** All learners, including Inception attendees, complete the appropriate base courses to learn about Guidewire's methodology, tools, value, and product features.
- Platform** (Foundational learning): **Platform Curriculum:** Analysts then complete required training on platform-level functionality and best practices to prepare to build cloud-ready and future-proofed solutions.
- Specialty** (Product features): **Specialty Curriculum:** Analysts continue with specialty curriculum to gain product-specific knowledge that deepens competency.
- Advanced** (Proven expertise): **Advanced Curriculum:** Lead business analysts also complete advanced curriculum and certification to demonstrate their ability to apply their product knowledge to real-world scenarios.
- Mastery** (Continual learning): **Mastery Curriculum:** Analysts can take their Guidewire knowledge and expertise to the next level by learning about unique topics not found in other courses.

Educator

### ClaimCenter Business Analyst

Start your learning journey with Base curriculum, then continue learning more about the platform and product capabilities.

Base (Universal knowledge) → Guidewire Cloud Overview → SunPath Overview → InsuranceSuite Implementation Tools → Maximizing Product Value → Digital Experiences for P&C Insurance → EnterpriseEngage Introduction

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## Guidewire ClaimCenter-Business-Analysts Exam Syllabus Topics:

Topic	Details
Topic 1	<ul style="list-style-type: none"> <li>InsuranceSuite Analyst Fundamentals: This domain covers InsuranceSuite platform fundamentals including user interface, data model, application logic, integration mechanisms, and hands-on workshop exercises for practical application.</li> </ul>
Topic 2	<ul style="list-style-type: none"> <li>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.</li> </ul>

Topic 3	<ul style="list-style-type: none"> <li>• Behavior Driven Development at Guidewire: This section introduces BDD methodology and its application in Guidewire implementations, focusing on collaborative development approaches and writing clear, testable requirements using BDD principles.</li> </ul>
Topic 4	<ul style="list-style-type: none"> <li>• 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.</li> </ul>
Topic 5	<ul style="list-style-type: none"> <li>• 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.</li> </ul>

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### Guidewire ClaimCenter Business Analyst - Mammoth Proctored Exam Sample Questions (Q37-Q42):

#### NEW QUESTION # 37

A car accident in a rural area of Durango, Colorado is reported to Succeed Insurance. The driver of the damaged car reportedly hit the base of a windmill tower while driving at night. There was no other passenger in the car when the accident happened, and the driver has a valid auto policy on file.

While the driver is not physically injured, the entire passenger side of the car has been severely damaged.

Although the windmill is still functioning, the base of the tower has sustained multiple broken parts.

Which two incidents need to be created for the claim based on the reported accident? (Choose two.)

- **A. Create a property incident for the damaged windmill**
- B. Create an injury incident for the driver
- C. Create a loss of use incident for the windmill tower
- D. Create another structure incident for windmill power damage
- **E. Create a vehicle incident for the damaged car**

**Answer: A,E**

Explanation:

In Guidewire ClaimCenter, an Incident is the data object used to capture the specific facts about "what" was damaged or affected during the loss event. It serves as the foundation for creating Exposures (the financial liabilities).

\* Vehicle Incident (Option C):The scenario states that the insured's car has been "severely damaged" on the passenger side. To record these facts-including the point of impact, the severity, and the vehicle description-the Adjuster must create a Vehicle Incident. This incident will eventually support the collision coverage exposure.

\* Property Incident (Option B):The accident involved the car hitting a "windmill tower," resulting in "broken parts" to the base. In ClaimCenter, damage to third-party non-vehicular objects (like fences, poles, buildings, or towers) is captured using a Fixed Property Incident (often referred to generically as a Property Incident). This incident records the damage description and ownership of the windmill, which is necessary to handle the Property Damage Liability claim

Why other options are incorrect:

\* Option E (Injury):The scenario explicitly states the driver is "not physically injured." Therefore, an Injury Incident is not required.

\* Option A ("Another structure"):The standard object for third-party fixed property damage is the Property Incident/Fixed Property Incident, not "Another structure."

\* Option D (Loss of Use):While possible later, the primary immediate damage is physical. Loss of Use is usually a secondary

exposure type, not the primary incident definition for the tower itself.

### NEW QUESTION # 38

Which scenario shows a Business Analyst (BA) demonstrating an important way to use Guidewire's Business Process Flows during a product implementation?

- A. We will not reference Guidewire Business Process Flows because we do not have the process flows for our current process documented to compare it.
- B. We will use our Business Process Flow for First Notice of Loss (FNOL) to guide the development of custom configuration instead of Guidewire's Process for Flow FNOL because we would like to continue using our current process.
- **C. We will be leveraging base configuration, so we will reference Guidewire's Business Process Flow for assignments to make changes to our business process for claim assignment.**
- D. We will compare our Business Process Flow for First Notice of Loss (FNOL) to Guidewire's Business Process Flow for Reserve entry to identify whether process gaps exist.

**Answer: C**

Explanation:

One of the primary value drivers of a Guidewire implementation is the "Adopt" or "Fit-to-Standard" approach, which encourages insurers to align their operations with industry best practices embedded in the software.

\* Best Practice (Option B): The most effective use of Guidewire's standard Business Process Flows is to use them as a reference to change the customer's internal processes. Instead of customizing the software to match a legacy (and potentially inefficient) way of doing things, the BA uses the base product flow to demonstrate how the system works out-of-the-box and guides the business to adapt their assignment logic to match this standard. This reduces customization costs and simplifies future upgrades.

\* Why Option A is incorrect: This describes the "Gap" approach where the software is heavily customized to fit the old process ("continue using our current process"). This is considered an anti-pattern in modern implementations as it increases technical debt.

\* Why Option C is incorrect: Comparing FNOL (intake) to Reserves (financials) is comparing two completely different lifecycle stages, making the gap analysis invalid.

\* Why Option D is incorrect: Lack of documentation is not a valid reason to ignore the standard flows; in fact, the standard flows can serve as the new documentation for the undocumented process.

Based on the Guidewire ClaimCenter Business Analyst documentation and the provided exhibits, here is the verified answer for Question 42.

### NEW QUESTION # 39

Succeed Insurance needs the ability to associate a primary hospital with an injury incident if the injured party received treatment.

When treatment is needed, the primary hospital name should display on the injury incident screen along with other details about the injury and treatment received.

The primary hospital should be added to the injury incident in one of the following ways:

- . Select the name from a list of medical care organizations already associated with the claim.
- . Enter the contact details directly in the incident.
- . Search the Address Book from the incident to locate a hospital.

Which two requirements must be documented to associate the primary hospital with the claim? (Choose two.)

- **A. A new field on the incident screen to add a contact with a role**
- **B. A new primary hospital role**
- C. A new Hospital contact subtype
- D. A new field in the Address Book to identify a vendor as a hospital

**Answer: A,B**

Explanation:

To implement the functionality of associating a specific contact (the "Primary Hospital") with an entity (the "Injury Incident") in Guidewire ClaimCenter, two core configuration components are required:

\* A new primary hospital role (Option B): In ClaimCenter, the relationship between a Contact and a Claim (or Incident) is defined by a Role. While the contact itself might be a "Medical Care Organization" (existing subtype), the context of its relationship to this specific incident is that it is the

"Primary Hospital". Defining this role allows the system to distinguish this hospital from other medical providers on the same claim.

\* A new field on the incident screen (Option C): To allow the user to select, add, or view this contact, a UI element (specifically a Claim Contact Picker or Input widget) must be added to the Injury Incident screen. This field will be configured to store the

relationship and allows the user to perform the required actions: selecting from existing contacts (filtered by the role), entering new ones, or searching the Address Book.

Why other options are incorrect:

\* A (New Subtype):The base product already includes the MedicalCareOrg contact subtype, which is sufficient to store hospital data. Creating a new subtype is unnecessary unless the data structure (fields) of a hospital is fundamentally different from other medical providers.

\* D (Address Book Field):Contacts in the Address Book are typically identified by tags or their Subtype, not by adding a custom field just to identify them as a vendor/hospital.

#### NEW QUESTION # 40

Succeed Insurance has a requirement to add a new high-risk indicator to the Claim Status screen for property claims that have a lien on the property. A new icon will be added to the configuration to provide a visual indicator making it easier for Adjusters and other ClaimCenter users to determine that a claim has a lien.

Which two common areas of the user interface (UI) can display the new lien icon? (Choose two.)

- A. Tab Bar
- **B. Info Bar**
- C. Workspace
- **D. Screen Area**
- E. Sidebar

**Answer: B,D**

Explanation:

In the standard Guidewire ClaimCenter User Interface architecture, high-priority alerts and claim indicators are displayed in two primary locations to ensure visibility:

\* The Info Bar (Option D):This is the persistent strip located at the top of the claim file (just below the Tab Bar). It remains visible regardless of which specific claim sub-screen (Medical, Financials, Notes) the user is navigating. It is designed specifically to host "High Risk Indicators" such as Litigation, Fatalities, Coverage issues, and in this scenario, a "Lien" indicator. This ensures the adjuster is aware of the critical status immediately upon opening the claim.

\* The Screen Area (Option A):Specifically, theClaim Status(or Summary) screen-which resides in the main Screen Area-contains a dedicated section for "Claim Indicators." Here, the icon is displayed along with a text description and potential toggle status (On/Off). The prompt explicitly mentions the requirement to "add a new high-risk indicator to the Claim Status screen," confirming the Screen Area as the second location.

Why other options are incorrect:

\* Sidebar (B):The sidebar (left panel) is used for the "Actions" menu and navigation links (steps) to move between screens. It does not typically host status icons for the claim object itself.

\* Workspace (C):While "Workspace" can refer to the application frame, in UI terminology, it often refers to the specific worksheets (bottom pane) or the container, not the specific UI element for indicators.

\* Tab Bar (E):The Tab Bar is for high-level navigation (Claim, Desktop, Administration, Search) and does not display claim-specific data icons.

#### NEW QUESTION # 41

At Succeed Insurance, new personal auto claims involving a fatality are assigned to a High Complexity Auto group made up of Adjusters with at least eight years of experience dealing with the issues and emotions commonly found in claims involving fatalities. Fatality claims typically take 18 to 24 days to complete. The assigned Business Analyst (BA) will document the assignment rule for this requirement in User Story Card Assign Claims Exposures and Activities for a Personal Auto Claim - Foundational. The existing tab UI Validation & Business Rules shown below is not a good fit for assignment rules, so a new tab will be added to the Story Card.

□ Which two sets of columns should the new tab include to accurately capture the assignment rule requirements? (Choose two.)

- **A. Entity, Line of Business, Rule Conditions, Rule Actions**
- B. Global Assignment Rule, Default Group Assignment Rule, Exit Type
- C. Error or Warning?, Base Product/New/Modified, Acceptance Criteria
- **D. Comments, Wave or Release, Requirement Number**
- E. Name of DV or LV, Field or Filter, Rules or Links to Master Business Rules Spreadsheet

**Answer: A,D**

#### Explanation:

When documenting Assignment Rules (or any business logic) in a User Story Card or a separate Business Rules spreadsheet, the Business Analyst must capture specific metadata that allows developers to implement the logic correctly in Gosu (Guidewire's programming language).

- \* Option D (Entity, Line of Business, Rule Conditions, Rule Actions): This is the core logical definition of the rule.
- \* Entity: Defines what object is being assigned (e.g., Claim, Exposure, Activity).
- \* Line of Business: Specifies the scope (e.g., Personal Auto).
- \* Rule Conditions: Captures the "IF" logic (e.g., "IF Loss Cause = Fatality AND LOB = Personal Auto").
- \* Rule Actions: Captures the "THEN" logic (e.g., "THEN Assign to Group: High Complexity Auto").
- \* This structure mimics the actual implementation pattern in Guidewire Studio (Rule Sets).
- \* Option E (Comments, Wave or Release, Requirement Number): These are standard project management and traceability columns required for any requirements artifact.
- \* Requirement Number: Links the specific rule row back to the high-level business requirement.
- \* Wave or Release: Indicates when this specific rule needs to be deployed.
- \* Comments: Provides context or clarification for the developer.

Why other options are incorrect:

- \* Option A: These columns ("Name of DV or LV", "Field or Filter") are specific to UI Validation (the tab currently shown in the image). They describe screen widgets and validation errors, not backend assignment logic.
- \* Option B: While "Global Assignment Rule" and "Default Group Assignment Rule" are valid Guidewire concepts, listing them as columns is not the standard way to document a list of requirements. Usually, the rule type would be a single column, but "Exit Type" is a technical implementation detail (part of the rule set execution) rather than a business requirement column.
- \* Option C: "Error or Warning?" is specific to Validation Rules (stopping a user from proceeding), not Assignment Rules (routing a work item).

Next Step: Would you like me to generate a sample "Assignment Rule" table structure that shows exactly how this Fatality claim rule would be entered into the columns described in Option D?

#### NEW QUESTION # 42

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