

100% Pass Quiz 2026 Guidewire Valid ClaimCenter-Business-Analysts: ClaimCenter Business Analyst - Mammoth Proctored Exam Latest Exam Preparation

Guidewire Exam Questions and Answers 100% Pass

Code is used in - Answer- Rules: validation, assignment

Classes: Functions that return calculated values

Extensions: added functionality to entities

What can be configured (terms) - Answer- Validation: Specific rules for what data is required

Assignment: Specific criteria for assigning objects to groups

Function: calculate the number of days since loss date

What programming language is used? - Answer- Gosu: (Like java)

Two major components of data model - Answer- 1) Entities: Dynamic info which is held or stored about person/claim

2) TypeList: Static info used to define details of an entity like gender

What can be configured in Data Model? - Answer- 1) Unstored info i.e passport #

2) Values for typeList

3) Data for reg. requirements

Define Integrations with Examples - Answer- Integration is sharing data or transactions to or from an InsuranceSuite

1) External policy system

2) Gen. ledger

3) Check writing system

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Guidewire ClaimCenter Business Analyst - Mammoth Proctored Exam Sample Questions (Q28-Q33):

NEW QUESTION # 28

Succeed Insurance requires that a new 'Driver under 18?' field be added to the vehicle incident screen for personal auto claims to indicate whether or not the driver of the vehicle was a minor when the loss occurred.

The field will be set by calculating the driver's age using the date of loss and the driver's date of birth.

There are two validation requirements:

- * The field must be set if the 'Date of Birth' field for the driver is not null.
- * No payments can be made for collision exposures if the 'Date of Birth' field for the driver of the vehicle is null.

A Business Analyst (BA) documents the validation requirements in the validation tab of the User Story Card 'Adjudicate - Update Maintain Vehicle Incident for Personal Auto Claims' as shown in the exhibit.

What information in the two validation examples is either missing or incorrectly documented? (Choose two.)

- A. The first requirement is missing the name of the DV or LV file for the new field, and an error or warning message should be provided.
- B. The first requirement does not need a value in the LOB column since the rule condition provides a test for the policy type.
- C. The second requirement is missing a requirement number, and the rule condition should check for a policy type of personal auto.
- D. The second requirement is missing the name of the DV or LV file where the warning or error message will display when the validation fails.
- E. The first requirement includes information on how to set the new 'Driver under 18?' field in the Rules column, which is not needed.

Answer: C,D

Explanation:

The User Story Card exhibit contains several documentation errors when compared to standard Guidewire requirements gathering best practices and the specific scenario provided.

* Missing Requirement Number and Logic Gap (Option C):

* Traceability: In the second row of the exhibit (the payment validation rule), the "Requirement Number" column is completely blank. Traceability back to the original requirements document is mandatory for all entries.

* Logic Precision: The requirement explicitly states that the rule applies to "personal auto claims".

. However, the logic documented in the "Rules" column (If Exposure Type = VehicleDamage Then Block...) does not check the Policy Type. It relies solely on the Exposure Type, which could exist on Commercial Auto policies as well. To accurately reflect the business requirement, the condition If PolicyType = Personal Auto must be added (similar to how it was done in the first row).

* Missing DV/LV Context for Validation (Option D):

* UI Anchoring: The second requirement is a validation rule that triggers an error ("Driver's Date of Birth is required..."). For the system to highlight the specific field on the screen (the "Driver Date of Birth" widget) when the error occurs, the rule must be associated with the specific Detail View (DV) or List View (LV) where that field resides (e.g., VehicleIncidentDV). The exhibit lists "Not Applicable" in the "Name of DV or LV" column. This is incorrect because providing the DV name ensures the error message is displayed contextually next to the field rather than as a generic page-level error, improving the user experience.

Why other options are incorrect:

* Option A: The LOB column is used for filtering, reporting, and release management. Even if the rule logic checks the policy type, the LOB column is required metadata and should not be removed.

* Option B: While the first requirement (the calculation) lacks a DV name (which it should have), it is a Business Rule (assignment), not a validation. Therefore, it does not generate an error or warning message for the user, so the second part of Option B is incorrect.

* Option E: The "Rules" column is exactly where the calculation logic (Date of Loss - Date of Birth) belongs. The developer needs this information to implement the automation.

NEW QUESTION # 29

During claim intake and adjudication, Adjusters capture contact information for the insured and all claimants.

To improve customer service and reduce the time required to reach these contacts to gather additional claim information, Succeed Insurance will capture the preferred contact method for all person contacts. The new field will be added to the contact details screen

of the user interface (UI) as a drop-down list displaying all valid contact methods including email, mail, and phone. Which version correctly lists the preferred contact methods in the Typelists tab of the Parties Involved User Story Card?

- A. Option D
- B. Option C
- C. Option A
- D. Option B

Answer: D

Explanation:

To correctly document a Typelist in a User Story Card, the Business Analyst must understand both the data structure (Codes vs. Names) and the configuration state (New vs. Modified).

* **Code Validity:** In Guidewire, a Typecode (the value stored in the database) must be a unique identifier for each option in the list.

* **Option B** correctly lists distinct codes: email, mail, and phone.

* **Options A and C** are incorrect because they list the Typelist Name (PreferredContactMethod) as the Code for every single row. You cannot have multiple entries with the same primary key (Code) in one list.

* **Configuration State (New vs. Modified):** The PreferredContactMethod typelist is a standard Base Product feature in Guidewire ClaimCenter. It already exists out-of-the-box.

* **Option B** correctly identifies the Status as "Modified". When you add values to or configure an existing base typelist, you document it as "Modified".

* **Option D** is incorrect because it lists the Status as "New". This would imply creating a brand new custom typelist (e.g., MyCustomList_Ext), which is not necessary for standard contact methods.

Therefore, Option B is the only version that has valid, unique codes and the correct configuration status.

NEW QUESTION # 30

A Business Analyst (BA) has identified a new typecode essential for Succeed Insurance implementation.

During adjudication, Adjusters need to be able to update the loss cause value to reflect the new typecode.

Which tabs in a Guidewire Story Card should be used to document the business requirement?

- A. Change Summary, UI Mockup, UI Fields, Typelist, and Action Items
- B. Change Summary, UI Fields, Typelist, Action Items, and Business Acceptance
- C. Document Control, UI Mockup, Typelist, Action Items, and Business Acceptance
- D. Document Control, UI Mockup, UI Fields, Typelist, and Business Acceptance

Answer: D

Explanation:

To fully document a requirement that involves both a User Interface change (updating a value on a screen) and a Data Model change (adding a new typecode), the standard Guidewire Story Card tabs required are:

* **Document Control:** Captures the metadata (Author, Version, Owner) to track the requirement's history.

* **UI Mockup:** Visually illustrates where on the screen the "Loss Cause" field is located and how the dropdown should appear to the Adjuster.

* **UI Fields:** Defines the specific behavior of the field (e.g., Is it mandatory? Is it editable during adjudication? What is the label?).

* **Typelist:** This is critical for this specific scenario. It lists the actual Code, Name, and Description of the new typecode being added to the "Loss Cause" typelist.

* **Business Acceptance:** Defines the testable criteria (Acceptance Criteria) to verify that the adjuster can successfully select the new value and save the claim.

Why Option B is correct: It is the only option that includes both the visual requirements (Mockup/Fields) and the data requirement (Typelist) alongside the standard control and testing tabs (Document Control/Business Acceptance).

NEW QUESTION # 31

Succeed Insurance has plans to expand operations in Greeley, Colorado. Due to a history of hailstorm related damage in the area, the company plans to offer reimbursement for hail damage as an option.

Which two actions should the Business Analyst (BA) take to determine the requirements for the project?

(Choose two.)

- A. Identify changes to the line of business typelists and determine the correct data mapping.
- B. Lead an elaboration workshop with the customer and follow up to identify next steps.

- C. Recommend existing base product features and functionality to expedite the implementation.
- D. Author user stories following the elaboration workshops and identify acceptance criteria.

Answer: B,C

Explanation:

In the Guidewire delivery methodology, the "Determine Requirements" phase (often part of Inception or Elaboration) focuses on understanding the business need and mapping it to the software capabilities.

- * Lead an Elaboration Workshop (A): The Elaboration Workshop is the primary forum where BAs engage with stakeholders (like the Greeley operations team) to discuss the specific needs for the new "hail damage" product. This is where the raw requirements are gathered, discussed, and refined.
- * Recommend Base Product Features (B): A critical responsibility of the Guidewire BA is to maximize product value by reducing unnecessary customization. When determining requirements for "reimbursement" and "hail damage," the BA should immediately demonstrate and recommend how ClaimCenter's out-of-the-box Coverage, Exposure, and Incident features can handle this scenario. This aligns the customer's expectations with the standard software capabilities, expediting the implementation.
- * Why not C or D? Authoring user stories (C) and defining typelists (D) are outputs or tasks that occur after the requirements have been determined and the solution approach (Standard vs. Custom) has been agreed upon.

NEW QUESTION # 32

A performing arts organization operates nationwide and is responsible for setting up stages for musical acts and concerts. The organization requires specific insurance coverage for its gear and equipment, including audio systems, lighting, cameras, and control boards. Succeed Insurance wants to optimize claim intake, processing, and reporting for this organization.

Which modifications should be made to ClaimCenter's base product line of business (LOB)?

- A. Add new Coverage Subtype code(s) with detailed information for each Exposure Type code to the existing LOB model.
- B. Add relevant Coverage Type code(s), Coverage Subtype code(s), and map Exposure Type code(s) to support the new coverage.
- C. The existing ClaimCenter standard LOB model can meet the company's objectives without modifications.
- D. Add new Loss Type code(s) and Policy Type code(s) to the LOB model to handle the organization's coverage needs.

Answer: B

Explanation:

According to the Guidewire ClaimCenter Business Analyst documentation, ClaimCenter's line of business (LOB) framework is intentionally designed to support extensibility through configuration rather than structural changes to core policy or loss classification elements. When an insurer needs to support specialized insured property—such as professional audio, lighting, and staging equipment—the recommended approach is to enhance the coverage configuration.

ClaimCenter models policy coverage using a hierarchy of Coverage Type and Coverage Subtype typelists.

Coverage Type codes represent high-level coverage categories defined by the policy, while Coverage Subtype codes allow insurers to further refine and classify coverage details. These coverage elements are then associated with Exposure Type codes, which drive claim processing behavior such as exposure creation, reserving, payment handling, and reporting.

By adding appropriate Coverage Type and Coverage Subtype codes for equipment and gear coverage and mapping them to Exposure Type codes, ClaimCenter can automatically create accurate exposures during claim intake. This approach ensures adjusters can efficiently process claims while maintaining consistent workflows and financial controls. It also supports meaningful analytics and reporting without altering the base product structure.

The Guidewire documentation advises against introducing new Loss Type or Policy Type codes unless the insurer is defining an entirely new policy or loss classification. Loss Type codes describe how a loss occurred (for example, theft or accidental damage), not the nature of the insured property. Policy Type changes are similarly broad and unnecessary for extending coverage within an existing LOB.

Therefore, option B aligns with Guidewire best practices by extending ClaimCenter's coverage and exposure configuration to meet the organization's needs while preserving the integrity of the standard LOB model.

NEW QUESTION # 33

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