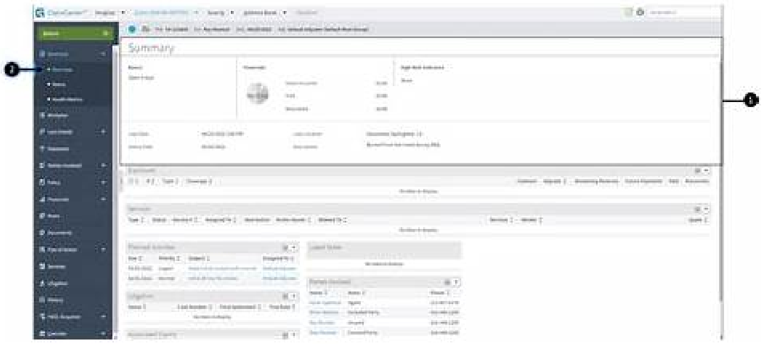
Guidewire ClaimCenter-Business-Analysts Fragenkatalog & ClaimCenter-Business-Analysts Fragen Und Antworten



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Die Ausbildungsmaterialien zur Guidewire ClaimCenter-Business-Analysts Zertifizierungsprüfung aus ZertPruefung enthalten Testfragen und Antworten. Diese Materialien sind von unserer Berufsgruppe aus erfahrenen IT-Experten untersucht und erforscht, deren Autorität zweifellos ist. Sie können auf unserer Webseite einige kostenlosen Testaufgaben und Antworten als Probe herunterladen. Nachdem Sie unsere Ausbildungsmaterialien zur Guidewire ClaimCenter-Business-Analysts Zertifizierungsprüfung gekauft haben, werden wir Ihnen einjähriger Aktualisierung kostenlos anbieten.

Guidewire ClaimCenter-Business-Analysts Prüfungsplan:

Thema	Einzelheiten
Thema 1	• 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.
Thema 2	• 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.
Thema 3	• 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.
Thema 4	• 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.

>> Guidewire ClaimCenter-Business-Analysts Fragenkatalog <<

ClaimCenter-Business-Analysts PrüfungGuide, Guidewire ClaimCenter-Business-Analysts Zertifikat - ClaimCenter Business Analyst - Mammoth Proctored Exam

Im ZertPruefung können Sie Dumps zur Guidewire ClaimCenter-Business-Analysts Zertifizierungsprüfung herunterladen, so dass Sie unsere Produkte ohne Risiko kaufen können. Das ist die Version der Übungen. Und Sie können die Qualität der Produkte und den Wert vorm Kauf sehen. Wir sind selbtsicher, dass Sie mit unseren Produkten zur Guidewire ClaimCenter-Business-Analysts Zertifizierungsprüfung zufrieden sein würden. Um Ihre Interessen zu schützen, versprechen wir Ihnen, dass wir Ihnen eine Rückerstattung geben für den Durchfall in der Prüfung würden. Unser Ziel liegt nicht nur darin, Ihnen zu helfen, die Guidewire

ClaimCenter-Business-Analysts Prüfung zu bestehen, sondern auch ein reales IT-Expert zu werden. So können Sie mehr Vorteile im Beruf haben, eine entsprechende technische Position finden und ganz einfach ein hohes Gehalt unter den IT-Angestellten erhalten.

Guidewire ClaimCenter Business Analyst - Mammoth Proctored Exam ClaimCenter-Business-Analysts Prüfungsfragen mit Lösungen (Q15-Q20):

15. Frage
An Adjuster at Succeed Insurance increases the reserve on a claim's exposure from $1,000 to $1,500 to account for inflation in repair costs. A week later, a Supervisor reviews the claim and wants to know specifically who made this change, the exact date and time it was made, and what the previous value was.
The Supervisor needs a chronological audit trail of changes to the claim file without navigating through complex financial ledgers.
Which screen in the ClaimCenter user interface should the Supervisor access to find this information?

- A. Financials > Transactions
- B. Notes
- C. Loss Details > Status
- D. History

Antwort: D

Begründung:
In Guidewire ClaimCenter, the History screen serves as the automated audit trail for the claim file. It is designed to capture and display a chronological list of significant events and user actions that have occurred throughout the claim's lifecycle.
* Audit Trail Functionality:The History screen automatically records specific types of events, including:
* Field Changes:When critical fields (like Reserve Amounts) are modified, the system logs the
"Old Value" and the "New Value."
* Assignment Changes:Tracks when the claim was transferred from one user to another.
* Rule Execution:Logs when specific business rules (like "Exception Flagged") are triggered.
* Data Points:For each entry, the History screen displays theUserwho performed the action, the Timestampof the event, and aDescriptionof the change.
Why other options are incorrect:
* Financials > Transactions (A):While this screen shows the financial T-account entries (debits/credits) for the reserve increase, its primary purpose is accounting analysis. It is less efficient for a supervisor looking for a simple "Who/When/What" audit trail compared to the History screen.
* Notes (C):Notes are typically used for qualitative narratives and manual entry. While a system notecan be generated for a reserve change, the History screen is the dedicated, non-editable system of record for tracking field changes.
* Loss Details > Status (D):This screen shows thecurrentstate of the claim (e.g., Open, Closed, Litigation Status) but does not provide a historical log of previous values or the specific user actions that led to the current state.

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

Antwort: A,C

Begründung:
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.
* ForAuto, the UI displaysVehicle Incidents(describing cars).
* ForHomeowners, the UI displaysDwellingorFixed Property Incidents.
* ForTravel, the UI will display distinct incident types such asBaggage Incident(for lost luggage) orTrip Cancellation Incident. These are fundamentally different data objects with different fields.

* Loss Causes (Option C):The LossCause typelist is filtered by the Line of Business.
* Autoclaims show causes like "Collision," "Rear-end," or "Theft of Vehicle."
* Travelclaims 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.

17. Frage
A sales executive and business traveler has a full coverage auto policy through his insurance company. The executive lives in Detroit, Michigan and often drives across the border to visit client offices in Canada.
While driving in downtown Toronto, the executive's car was hit by a truck coming the wrong way. He called his insurance company to report a claim for this accident. However, the Customer Service Representative (CSR) cannot confirm there is an active policy on file.
How should this claim be handled?

- A. If the policy is not verifiable, the CSR cannot create the claim as a verified, active policy is a minimum requirement to create a claim.
- B. If the policy is not verifiable, the CSR will notify a Supervisor to escalate the case for investigation and submits notes in ClaimCenter for reference.
- C. If the policy is not verifiable, the CSR will create the claim as an unverified policy claim and retrieve the correct policy when more information available.
- D. If the policy is not verifiable, the CSR will ask the executive to call back when he has the policy information to complete the report and create the claim.

Antwort: C

Begründung:
Guidewire ClaimCenter is designed to handle First Notice of Loss (FNOL) scenarios where the policy system is unavailable or the specific policy cannot be immediately located. The correct standard procedure is to create an Unverified Policy claim.
* Unverified Policy Workflow:The New Claim Wizard allows the user to select "Unverified Policy" if a search returns no results. This allows the CSR to proceed with capturing critical accident details (Loss Details, Vehicles, Injuries) and providing service to the customer immediately.
* Reconciliation:Later, once the correct policy number is found or the policy system comes back online, the claim can be updated. The "Unverified Policy" feature specifically supports the "Select Policy" step of the wizard to ensure claims are not blocked by administrative data issues.
* Customer Experience:Option A (asking the customer to call back) is poor service and contrary to ClaimCenter's design philosophy. Option D is incorrect because a verified policy isnota hard blocking requirement for creating a draft claim in this specific workflow.

18. Frage
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 second requirement is missing a requirement number, and the rule condition should check for a policy type of personal auto.
- C. 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.

- D. The first requirement includes information on how to set the new 'Driver under 18?' field in the Rules column, which is not needed.
- E. The first requirement does not need a value in the LOB column since the rule condition provides a test for the policy type.

Antwort: B,C

Begründung:
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...) doesnotcheck 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 specificDetail View (DV)orList 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 doesnotgenerate 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.

19. Frage
What is the importance of a mock-up of the user interface (UI) design?

- A. A mock-up tells the customer what the current ClaimCenter user experience is.
- B. A mock-up illustrates for the viewer the integration of ClaimCenter with outside sources.
- C. A mock-up shows the viewer what the intended ClaimCenter user experience is.
- D. A mock-up illustrates for the customer what the final ClaimCenter user experience is.

Antwort: C

Begründung:
In the context of a Guidewire implementation project, a User Interface (UI) Mock-up is a visual tool used during the requirements gathering and design phases. Its primary purpose is to illustrate the intended user experience before development begins.
* Visualization of Requirements:Mock-ups bridge the gap between abstract written requirements (User Stories) and the concrete software product. They show stakeholders how the screens will look and function to meet their needs.
* Intended vs. Final:Option A is correct because the mock-up represents theproposedorintendeddesign.
Option D ("Final") is subtly incorrect because the "final" experience is the actual, functioning software, which may evolve slightly from the mock-up during development due to technical constraints or feedback.
* Current vs. Integration:Option B refers to the existing system (Current state), which is typically shown via live demo, not a mock-up. Option C refers to backend integrations, which are typically documented via data mapping spreadsheets or architecture diagrams, not UI mock-ups.

20. Frage
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Das Leben ist mit den Wahlen gefüllt. Wahl kann nicht unbedingt Ihnen das absolute Glück bringen, aber sie kann Ihnen viele Chancen bringen. Wenn Sie die Chance verpasst haben, könnnen Sie nur bereuen. Die Fragenpool zur Guidewire ClaimCenter-Business-Analysts Zertifizierungsprüfung von ZertPruefung sind die Grundbedarfsbedürfnisse für jeden Kandidaten. Mit ihr können

Sie alle Probleme lösen. Die Fragenpool zur Guidewire ClaimCenter-Business-Analysts Zertifizierungsprüfung von ZertPruefung sind umfassend und zielgerichtet, am schnellsten aktualisiert und die vollständigsten. Mit ZertPruefung brauchen Sie sich nicht mehr um dieClaimCenter-Business-Analysts Zertifizierungsprüfung befürchten. Sie werden alle ClaimCenter-Business-Analysts Prüfungen ganz mühlos bestehen.

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