

PDFBraindumps



Latest Pdf Braindumps	Top Certifications	Top Vendors		
<ul style="list-style-type: none">▶ LRP-614▶ BCABA▶ JN0-740▶ 250-405▶ DS-200▶ SDM_2002001040▶ ST0-250▶ H12-221▶ M2180-716	<ul style="list-style-type: none">▶ ISEB Certification▶ OCE▶ NVIDIA Certifications▶ Network+▶ IBM Certified Integrat▶ CCDH▶ IBM Certified Advanc▶ eserver Certified Spe▶ SAP-Certifications▶ Network Appliance N	<ul style="list-style-type: none">▶ HCNP▶ IFPUG Certifications▶ dotMobi Certification▶ SCMA▶ MCSD▶ NCLP▶ XMLMaster Certificat▶ CS5▶ CHA	<ul style="list-style-type: none">▶ ISEB▶ ASTQB▶ Aruba▶ Data Center Universit▶ HRCI▶ CIW▶ Patchlink▶ International Consorti▶ Acme-Packet	<ul style="list-style-type: none">▶ Fortinet▶ Ericsson▶ Liferay▶ Novell▶ Huawei▶ RSA▶ MYSQL▶ ISM▶ CheckPoint

<http://www.pdfbraindumps.com>

Latest pdf braindumps provider, high pass rate

Exam : **ClaimCenter-Business-Analysts**

Title : ClaimCenter Business Analyst - Mammoth Proctored Exam

Vendor : Guidewire

Version : DEMO

NO.1 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. Lead an elaboration workshop with the customer and follow up to identify next steps.
- B. Recommend existing base product features and functionality to expedite the implementation.
- C. Author user stories following the elaboration workshops and identify acceptance criteria.
- D. Identify changes to the line of business typelists and determine the correct data mapping.

Answer: A B

Explanation:

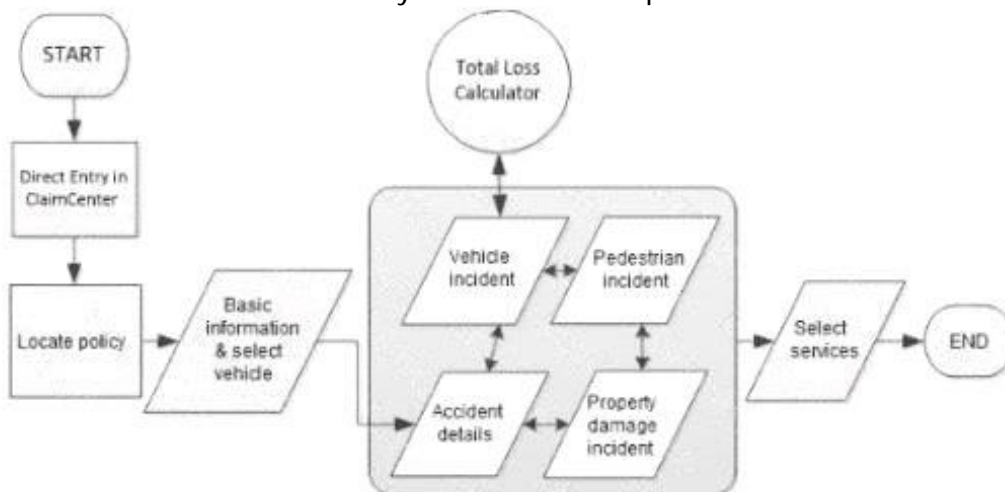
In the Guidewire delivery methodology, the "Determine Requirements" phase (often part of Inception or Elaboration) focuses on understanding the business need and mapping it to the software capabilities.

* 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.

NO.2 Whenever the Total Loss Calculator determines that a vehicle is a total loss, Succeed Insurance wants to create a custom history event with the exposure name and total loss score.



Which step in the claim setup process flow must be completed before the history event can be created?

- A. Add a new step after the Vehicle Incident step to create the history event.

- B.** Add a new step before the Total Loss Calculator to create the history event.
- C.** Add a new step after the Total Loss Calculator to create the history event.
- D.** Add a new step before the Vehicle Incident step to create the history event.

Answer: C

Explanation:

250 to 350 words From Exact Extract of Guidewire ClaimCenter Business Analyst documentation: In Guidewire ClaimCenter workflow analysis and configuration, defining the correct sequence of operations is critically dependent on Data Availability and Data Dependency.

The specific requirement here dictates that the custom history event must capture the Total Loss Score. In the context of the ClaimCenter object model and process flow, the Total Loss Score is an output value generated specifically by the Total Loss Calculator engine. Before this calculator runs, the score attribute is effectively null or non-existent.

Therefore, to satisfy the business requirement, the step that writes the history event must be placed after the step that generates the data it needs to record.

* Process Logic: If the Business Analyst were to place the history event creation step before the Total Loss Calculator (Option B) or before the Vehicle Incident (Option D), the system would attempt to write a record containing a score that has not yet been calculated. This would result in either a system error or a history event with a blank/zero value, failing to meet the business requirement.

* Dependency Chain: The workflow dependency is: Vehicle Data Entry -> Total Loss Calculation -> Score Generation -> History Event Creation.

* Implementation Note: In a typical Guidewire implementation, this logic is often handled via "Event Fired" rules or specific "Exit Points" in the workflow. The system waits for the confirmation that the Total Loss calculation service has successfully returned a result. Once that transaction is committed and the score is persisted on the Vehicle or Exposure entity, the subsequent rule to generate the History Event can trigger successfully.

Consequently, Option C is the only viable placement in the process flow. It ensures that the prerequisite action (calculation) is complete and the required data payload (the score) is available for the subsequent action (logging the history event).

NO.3 Succeed Insurance has a strategic initiative to change auto insurance into a pay-as-you-drive model... When claims are processed, claimants must provide the log from the application for the date of incident. The log's details are essential to validation and analysis of the monitoring system's activity at the time of the incident.

Without the application log, claims should not be processed to indemnification.

Executives say the implementation team must maintain the base product functionality where appropriate and only change those things essential to the success of the initiative...

Which two requirements are in scope based on the guiding principles? (Choose two.)

- A.** As an Adjuster, vehicle mileage/kilometers must be captured during adjudication to track mileage /kilometers, and potentially prevent fraudulent activities.
- B.** As a business, integration to the top five vehicle manufactures must be completed to maximize accuracy of claim processing. Succeed intends to complete one integration every 30 days.
- C.** As an Adjuster, the system should prevent indemnification of claimants if the application log has not been provided and reviewed to prevent payments without validation.
- D.** As an Adjuster, the insured application log must be received, reviewed, and attached to the claim to analyze and validate the monitoring systems activity at the time of the claim.

Answer: C D

Explanation:

When defining scope based on specific strategic initiatives and guiding principles (such as "only change those things essential"), the Business Analyst must map requirements directly to the stated business rules and critical success factors.

* Requirement D (Log Intake):The scenario explicitly states:"The log's details are essential to validation and analysis... claimants must provide the log."Option D directly captures this by requiring the log to be received, reviewed, and attached. This is the core data intake requirement.

* Requirement C (Validation Rule):The scenario states:"Without the application log, claims should not be processed to indemnification."Option C directly maps to this business rule. It utilizes base product capabilities (Validation Rules) to enforce the "No Log, No Pay" constraint, ensuring the initiative's security and validity.

Why other options are incorrect:

* Option B (OEM Integration):The scenario mentions leveraging integration "where possible," but creates a requirement for "application logs," not direct integration with "top five vehicle manufacturers." Adding a rigid schedule ("one integration every 30 days") is a high-cost, high-complexity constraint that contradicts the principle of maintaining base functionality and minimizing cost/maintenance unless explicitly required.

* Option A (Mileage):While mileage is part of the concept, theessentialrequirement described for the claim process is thevalidation of the logfor the incident. Tracking mileage is secondary to the critical path of validating the accident data via the log.

NO.4 An Adjuster at Succeed Insurance creates a check with a partial payment of \$1,200 for medical expenses payable to a claimant who was injured in a collision. The check has completed the following processing steps:

. The payment exceeded the Adjuster's authority limits, changing the status to Pending Approval.

. The Adjuster's supervisor reviewed and approved the payment, changing the status to Awaiting Submission.

. A batch process sent the check to the external check processing system, changing the status to Requested when ClaimCenter received an update from the external system.

The Adjuster received new information indicating that the check amount should be reduced to \$950.

Which action should the Adjuster take?

A. Edit the check and change the amount, then submit it for processing.

B. Ask the bank to hold the check and create a new check for the correct amount.

C. Stop the check and create a new check for the correct amount.

D. Void the check and create a new check for the correct amount.

Answer: D

Explanation:

250 to 350 words From Exact Extract of Guidewire ClaimCenter Business Analyst documentation:

In the lifecycle of a check within Guidewire ClaimCenter, the Requested status indicates that the payment instruction has been successfully handed off to the downstream check writing or electronic funds transfer system. Once a check reaches this status, it is considered a committed financial transaction and is locked from further editing.

* Why Option A is incorrect:You cannot edit a check that is in "Requested" status. The "Edit" button will likely be disabled or the fields locked because the data has already left the system.

* Why Option C is incorrect:A "Stop" payment is typically reserved for scenarios where a physical

check has been lost, stolen, or destroyed after it was printed and mailed. While a Stop Payment does prevent the check from being cashed, it is a specific banking process often involving fees.

* **Why Option D is Correct:** To correct an administrative error (such as the wrong amount) for a check that has been processed but not yet negotiated (cash), the standard procedure is to void the check. Voiding the check in ClaimCenter performs two critical functions:

* It reverses the financial T-accounts (reserves and payments) associated with the transaction, ensuring the claim financials are accurate.

* It updates the status to "Voided," effectively cancelling the payment in the system.

After voiding the incorrect check (\$1,200), the Adjuster must then create a new check for the correct amount (\$950) to pay the claimant.

NO.5 A catastrophe has been created in ClaimCenter for Tropic Storm Dorian. Succeed Insurance requires that all claims resulting from the storm be attributed to that catastrophe when they are entered in ClaimCenter. The completion target is within three (3) days of claim creation and should be escalated if it is not completed within five (5) days.

Which required element for a business activity rule is missing?

A. Actions

B. TriggerEntity

C. RuleCondition

D. AppliesTo

Answer: A

Explanation:

A complete Business Rule (specifically one designed to generate an Activity) consists of a Context (Trigger/Entity), a Condition (Logic), and an Action (Execution).

* **Missing Element: Actions (Option A):** The scenario describes the trigger ("when they are entered"), the intent/condition ("resulting from the storm"), and the parameters of the resulting activity (Target: 3 days, Escalation: 5 days). However, it fails to specify the action details required to execute the rule: specifically, who the activity should be assigned to (The Assignee) and the specific instruction to create the activity instance. Without defining the Action (e.g., "Create Activity 'Review Catastrophe' and Assign to Claim Owner"), the rule cannot function.

* **Why other options are present:**

* **TriggerEntity (B):** Implied as the Claim (since the text says "when they [claims] are entered").

* **RuleCondition (C):** While "resulting from the storm" is vague, it represents the business condition. The Action (assignment) is the most glaring omission preventing the workflow from reaching a user.

* **AppliesTo (D):** This generally refers to the root entity (Claim), which is identified.