

Salesforce.Health Cloud Accredited Professional.vMay-2024.by.Rick.129

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Exam Code: Health Cloud Accredited Professional
Exam Name: Health Cloud Accredited Professional



Exam A

QUESTION 1

Healthcare companies face challenges from a variety of sources. What are three common challenges they could encounter that HC solves for? (Choose 3)

- A. There are not enough Providers for the amount of the Care Requests.
- B. Insufficient funds allocated to Research and Development.
- C. The need to drive sales while reducing cost.
- D. Growing customer expectations for delivery of care everywhere.
- E. Growing demand for a more personalized care experience.

Correct Answer: C, D, E

Section:

Explanation:

According to the Salesforce website, Health Cloud solves for some of the common challenges that healthcare companies face from various sources. Some of these challenges are:

The need to drive sales while reducing cost: Health Cloud helps healthcare companies increase their revenue and efficiency by streamlining their processes, automating their workflows, and optimizing their resources.

Growing customer expectations for delivery of care everywhere: Health Cloud helps healthcare companies deliver personalized and collaborative care across every touchpoint, whether it is in person, online, or on mobile devices.

Growing demand for a more personalized care experience: Health Cloud helps healthcare companies provide tailored and holistic care for each customer by leveraging data insights, artificial intelligence, and digital engagement tools.

QUESTION 2

Which permission set is needed to grant users read access to health insurance records and also create, read and update access to Utilization Management records?

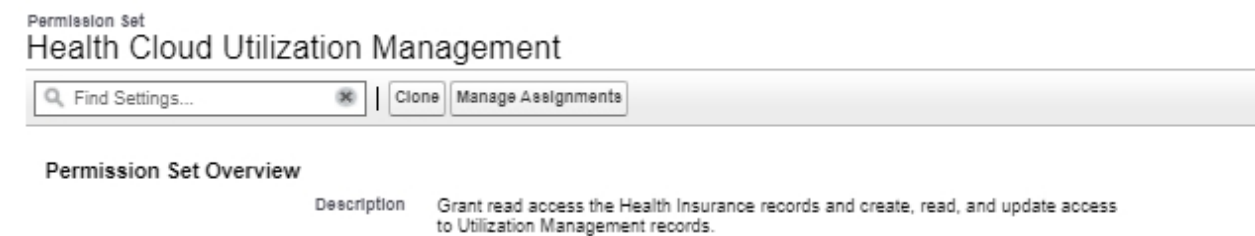
- A. HC Utilization Management Permission Set
- B. HC Foundation permission set
- C. HC Permission set license
- D. The Health Cloud Member Services Permission Set

Correct Answer: A

Section:

Explanation:

Reference and details below.



The screenshot shows the 'Health Cloud Utilization Management' permission set configuration page. At the top, there is a search bar labeled 'Find Settings...' and two buttons: 'Clone' and 'Manage Assignments'. Below this is a section titled 'Permission Set Overview' with a table containing one row:

Description
Grant read access the Health Insurance records and create, read, and update access to Utilization Management records.

According to the Salesforce documentation, to grant users read access to health insurance records and also create, read and update access to utilization management records, you need to assign them the HC Utilization Management permission set. This permission set grants users access to various objects, fields, tabs, apps, and components related to utilization management in Health Cloud.

QUESTION 3

What is the best practice when transitioning an org from Service Cloud to HC?

- A. Approach depends on how each customer uses their org. Any other options may be used.
- B. Put HC use cases in a new org, leave only Service Cloud use cases in an existing org.
- C. Migrate the entire org in place.
- D. Build out HC capabilities in a new org, then migrate all users and data.

Correct Answer: A

Section:

Explanation:

Reference and details below.

We've boiled down the upgrade options into three simple paths to success, depending on each organization's unique situation. Many existing Sales and Service Cloud instances don't have extensive customizations or technical debt. In those cases, upgrading to Health Cloud in the current org frequently provides the fastest path with little to no disruption for existing users.

According to the Health Cloud Implementation Guide, the best practice when transitioning an org from Service Cloud to Health Cloud is to approach it depending on how each customer uses their org. There is no one-size-fits-all solution for migrating from Service Cloud to Health Cloud, as each customer may have different requirements, use cases, and data models. Therefore, any of the other options may be used depending on the customer's needs and preferences.

QUESTION 4

A payer is implementing Health Cloud and wants to leverage predefined rules for its prior authorization request review process. The payer would like to leverage out-of-the-box Health Cloud functionality to drive speed to value.

Which prebuilt feature should a consultant recommend the payer leverage?

- A. Integration Procedures
- B. OmniScript Templates
- C. FlexCards
- D. Expression Set Templates

Correct Answer: D

Section:

Explanation:

Expression Set Templates are the prebuilt feature that the payer should leverage to implement predefined rules for its prior authorization request review process. Expression Set Templates are reusable sets of expressions that can be used to evaluate business logic and trigger actions based on the results.

QUESTION 5

A pharma company is implementing Health Cloud and trying to track insurance details related to its patients. The company wants to track:

- * A list of all payer organizations
- * The plans offered by a given payer
- * The standard benefits available under a plan
- * Which plan a given patient is enrolled in and their specific insurance details

Which set of objects should a consultant implement to meet these requirements?

- A. Account, Purchaser Plan, Member Benefit, Insurance Plan
- B. Purchaser, Insurance Plan, Insurance Benefit, Plan Detail
- C. Account, Purchaser Plan, Plan Benefit, Member Plan
- D. Payer, Plan Offering, Coverage Benefit, Member Plan



Correct Answer: C

Section:

Explanation:

The set of objects that the consultant should implement to meet the pharma company's requirements are Account, Purchaser Plan, Plan Benefit, and Member Plan. These objects are part of the Health Cloud data model and allow the company to track payer organizations, plans, benefits, and patient enrollments.

QUESTION 6

A health plan provider would like to manage prior authorizations with predefined approval criteri

a. Which three features in Health Cloud should a consultant recommend in this case?

- A. Claims data model
- B. Business Rules Engine
- C. Utilization Management data model
- D. Intelligent Appointment Management
- E. Out-of-the-box Process libraries

Correct Answer: B, C, E

Section:

Explanation:

The three features in Health Cloud that the consultant should recommend to the health plan provider are Business Rules Engine, Utilization Management data model, and Out-of-the-box Process libraries. These features enable the provider to manage prior authorizations with predefined approval criteria, store and track care requests, and leverage best practices and templates for common scenarios .

QUESTION 7

A provider would like to create Salesforce reports to analyze patient outcomes and patient referrals.

Which three steps should a consultant recommend as part of the reporting setup to ensure the provider can view this report appropriately?

- A. Enable the enhanced Analytics for Healthcare setting in Setup.
- B. Create custom report types for clinical objects.
- C. Assign appropriate permissions to internal users.
- D. Leverage the Patient Referral Management unmanaged package.
- E. Adjust template care management reports and dashboards.

Correct Answer: B, C, E

Section:

Explanation:

To create Salesforce reports to analyze patient outcomes and patient referrals, a consultant should recommend the following steps:

Create custom report types for clinical objects, such as Condition, Medication, or Encounter, to access the data stored in Health Cloud's clinical data model¹.

Assign appropriate permissions to internal users, such as the Health Cloud Analytics permission set, to enable them to view and create reports and dashboards².

Adjust template care management reports and dashboards, such as Patient Outcomes or Patient Referrals, to customize them for the customer's specific needs^{3,4}. Enabling the enhanced Analytics for Healthcare setting or leveraging the Patient Referral Management unmanaged package are not required steps for this requirement.

QUESTION 8

A MedTech company is implementing Health Cloud to better plan and track surgical case visits, manage device inventory and run cycle counts.

Which data model should a consultant recommend the company use?

- A. Intelligent Sales
- B. Inventory Management
- C. Life Sciences

D. Provider Engagement

Correct Answer: C

Section:

Explanation:

To better plan and track surgical case visits, manage device inventory and run cycle counts, a consultant should recommend the MedTech company use the Life Sciences data model in Health Cloud. This data model provides objects and fields to store and manage information related to surgical cases, devices, inventories, cycle counts, and more⁵. Intelligent Sales, Inventory Management, or Provider Engagement are not data models that exist in Health Cloud.

QUESTION 9

A customer wants to view medication data from Health Cloud leveraging FHIR standards. Which Health Cloud data model should a consultant use?

- A. Integrated Care Management data model
- B. Electronic health record (EHR) data model
- C. Virtual Care data model
- D. Clinical data model

Correct Answer: D

Section:

Explanation:

To view medication data from Health Cloud leveraging FHIR standards, a consultant should use the clinical data model. This data model is built to align with HL7's FHIR R4 and provides objects and fields to store and access clinical information such as medications, conditions, encounters, observations, and more⁶. The clinical data model also supports FHIR APIs to enable interoperability between Health Cloud and external systems that use FHIR standards⁷. Integrated Care Management data model, Electronic health record (EHR) data model, or Virtual Care data model are not data models that can fulfill this requirement.

QUESTION 10

Which entity in the new data model of Health Cloud can be used to store mappings between different coding systems such as ICD and HCC codes?

- A. Identifier
- B. Codesets
- C. ContactPoint
- D. Codeset Bundle

Correct Answer: B

Section:

Explanation:

Code Sets are the entity in the new data model of Health Cloud that can be used to store mappings between different coding systems such as ICD and HCC codes. Code Sets are a collection of codes that represent a specific concept or value in a terminology system¹.

QUESTION 11

How can Code Sets be managed in Health Cloud?

- A. Health Cloud provides a Code Sets data model that is pre-populated with industry standard procedures and diagnostic code sets.
- B. Health Cloud does not provide a Code Sets data model
- C. Health Cloud provides a Code Sets data model that must be populated from an external source.
- D. Health Cloud provides a Code Sets data model that is pre-integrated to authoritative sources to ensure the latest code sets are always available.

Correct Answer: C

Section:

Explanation:

Reference and details below.

As an admin, it's up to you to populate these objects with the codes your organization needs. As the volume of required codes can be immense, we recommend that you use the Salesforce Data Loader to import code data into your orgs.

QUESTION 12

In which three ways can users access Provider Management standard objects? (Choose three)

- A. By using Service Cloud
- B. By assigning Health Cloud Platform Permission set licenses.
- C. By assigning Health Cloud Foundation Permission set.
- D. By assigning the Provider Permission set.
- E. By using Health Cloud.

Correct Answer: B, C, E

Section:**Explanation:**

Health Cloud Foundation

Assigns read access to additional Health Cloud platform capabilities, including the Provider Management data model.

The Health Cloud Provider Network Management permission set grants access to provider management objects so users can manage credentialing and recruiting.

To use the Provider Network Management features of Health Cloud, assign both the Provider Network Management permission set and the Health Cloud permission set to your users

Users can access Provider Management standard objects by using Health Cloud, by assigning Health Cloud Platform Permission set licenses, and by assigning Health Cloud Foundation Permission set. Health Cloud is the industry-specific solution that includes Provider Management features such as provider search, provider network management, and provider credentialing³. Health Cloud Platform Permission set licenses grant access to the Health Cloud platform objects and features, including the Provider Management data model⁴. Health Cloud Foundation Permission set assigns read access to additional Health Cloud platform capabilities, including the Provider Management data model⁵. Service Cloud is not required to access Provider Management standard objects, and the Provider Permission set is not a standard permission set in Health Cloud.

QUESTION 13

Which credentials are available to track against providers with standard Health Cloud? (Choose two.)

- A. Specialties
- B. Facility Relationship
- C. Business License
- D. Board Certification

Correct Answer: A, D

Section:**Explanation:**

Reference and details below.

Streamline the Credentialing Process. Seamlessly collect credential data in the self-service application. Capture provider applications with integrated credential verification and validation rules for mandatory information. Use the extended data model to capture all aspects of provider education, work history, regulatory action, malpractice insurance, specialty, board certification, and award data to allow for comprehensive verification.

For detailed instructions, see the [Vlocity Provider Network Management documentation](#).

QUESTION 14

An admin wants to enable their users to leverage Provider Search, which denormalized object holds data to support this feature

- A. HealthCare Provider Facility
- B. Provider Search Sync Logs
- C. HealthCare Provider
- D. Care Provider Searchable field

Correct Answer: D

Section:

Explanation:

Care Provider Searchable Field is the denormalized object that holds data to support the Provider Search feature in Health Cloud. Care Provider Searchable Field is a custom object that stores searchable fields from the Healthcare Provider and Healthcare Provider Facility objects. It allows users to search for providers based on various criteria such as name, location, specialty, and availability. Healthcare Provider Facility, Provider Search Sync Logs, and Healthcare Provider are not denormalized objects in Health Cloud.

QUESTION 15

A HC admin is configuring a 'Convert to Patient' process, utilizing the Lead to Individual Conversion Apex class. Which statements are true about the steps the admin can take? (choose 3)

- A. The admin must configure all Lead field mappings including Medical Record Number, Source System and Source System ID.
- B. The custom Convert to Patient button should be added to the Lead list view.
- C. Some Lead field mappings including Medical Record Number, Source System ID can be handled automatically by HC.
- D. The Lead to Individual Conversion apex class will create a new Opportunity for the patient.
- E. Duplicate checks on Medical Record Number, Source System and Source System ID can be handled automatically by HC

Correct Answer: A, C, E

Section:

Explanation:

The admin must configure all Lead field mappings including Medical Record Number, Source System and Source System ID (A), some Lead field mappings including Medical Record Number, Source System ID can be handled automatically by HC, and duplicate checks on Medical Record Number, Source System and Source System ID can be handled automatically by HC (E) are true statements about the steps the admin can take. The custom Convert to Patient button should be added to the Lead detail page, not the list view (B). The Lead to Individual Conversion apex class will not create a new Opportunity for the patient (D).

QUESTION 16

Which 3 of the components are customizable in HC?

- A. Timeline
- B. EHR Data
- C. Life Events
- D. Patient Card
- E. Custom Label

Correct Answer: A, C, D

Section:

Explanation:

Timeline (A), Life Events, and Patient Card (D) are components that are customizable in HC. EHR Data (B) is not a component, but a type of data that can be integrated with HC. Custom Label (E) is not a component, but a metadata type that can be used to create labels for components.

QUESTION 17

A Payer Service Cloud org uses Accounts and contacts to model Health Insurance Members. While all teams within the organization work with all members, only some teams require HC capabilities. What is the recommended

best practice for modeling members in HC for this organization?

- A. Only groups needing HC capabilities need to use Person Accounts.
- B. Model as Person Accounts, whether they are using HC capabilities or not.
- C. Account Record Types for existing members can remain as-is. Future members should be created as Person Accounts.
- D. Use the individual model with HC

Correct Answer: B

Section:

Explanation:

According to the Health Cloud Implementation Guide, the recommended best practice for modeling members in Health Cloud for a payer service cloud org that uses accounts and contacts to model health insurance members is to model them as person accounts, whether they are using Health Cloud capabilities or not. Person accounts are a type of account that combines account and contact information in a single record. They are suitable for representing individual consumers in healthcare and life sciences. Using person accounts for all members can simplify data management and avoid data duplication. Only groups needing Health Cloud capabilities need to use person accounts is not a recommended best practice, as it can create inconsistency and complexity in data modeling. Account record types for existing members can remain as-is is not a recommended best practice, as it can limit the functionality and integration of Health Cloud features. Using the individual model with Health Cloud is not a valid option, as the individual model is not supported by Health Cloud.

QUESTION 18

In which two ways can a Data Architect ensure PHI/PII data visibility is minimized during the migration of Patient Data from an existing Service Cloud org to a new HC org?(Choose 2)

- A. Use Salesforce Data Masking when moving data to a Sandbox.
- B. Use Data Templates to exclude PHI/PII data from being added to Partial Copy Sandboxes
- C. Export Data to a spreadsheet to remove PHI before importing it into a Sandbox
- D. Ensure Sandboxes have
- E. Platform Shield enabled.



Correct Answer: A, B

Section:

Explanation:

According to the Health Cloud Data Model Developer Guide, two ways that a data architect can ensure PHI/PII data visibility is minimized during the migration of patient data from an existing Service Cloud org to a new Health Cloud org are:

Use Salesforce Data Masking when moving data to a sandbox. Data Masking is a tool that helps you protect sensitive data in sandboxes by masking it with anonymized values.

Use Data Templates to exclude PHI/PII data from being added to partial copy sandboxes. Data Templates are files that specify which objects and fields to include or exclude when creating a partial copy sandbox. Exporting data to a spreadsheet to remove PHI before importing it into a sandbox is not a recommended way, as it can introduce errors and security risks. Ensuring sandboxes have Platform Shield enabled is not a valid way, as Platform Shield is not a feature of sandboxes. Platform Shield is a product that allows encryption of data at rest in production orgs.

QUESTION 19

What is the recommended approach to create patients' records used in HC?

- A. Use Patient Data Import Wizard for importing up to 50,000 records.
- B. Patient object to convert leads into contacts.
- C. Create patient records using Patient Loader Wizard.
- D. Create as Person Accounts or Leads for referrals

Correct Answer: D

Section:

QUESTION 20

Which step is recommended to be completed before migrating from Service Cloud to HC?

- A. Migrate all existing leads to candidate leads.
- B. Migrate patient data to person accounts.
- C. Uninstall any Sales Cloud related packages.
- D. Log a Salesforce support case.

Correct Answer: B

Section:

QUESTION 21

In which two ways can Makana health service administrator prevent unauthorized users accessing the data?(choose two)

- A. Encrypt the data using shield
- B. Install shield and enable mask.
- C. create sharing sets
- D. optimize data using mask
- E. use field level security setting, record access setting and object permission.

Correct Answer: A, E

Section:

Explanation:

Encrypting the data using shield (A) and using field level security setting, record access setting and object permission (E) are two ways to prevent unauthorized users from accessing the data. Installing shield and enabling mask (B) is not enough to protect the data, as masking only obscures the data in reports and dashboards, but does not prevent access to the underlying data. Creating sharing sets and optimizing data using mask (D) are not relevant to data security.

QUESTION 22

An insurance organization wants to be able to track specialties and sub-specialties related to practitioner to use in provider search. Which would they store these relationships? (Choose three).

- A. Care provider facility specialty
- B. Healthcare provider specialty
- C. Care Taxonomy
- D. Healthcare provider Taxonomy
- E. Care specialty

Correct Answer: A, D, E

Section:

Explanation:

Reference and details below.

Field in Care Provider Searchable Field	Corresponding Field in Source Object
FacilityName	Account.Name
ProviderName	Contact.Name
Specialty	CareSpecialty.SpecialtyType
SubSpecialty	CareTaxonomy.TaxonomyType
PlanType	HealthcarePayerNetwork.NetworkType
IsAcceptingNewPatients	HealthcareFacilityNetwork.PanelStatus
ProviderType	HealthcareProvider.ProviderType
GenderRestriction	HealthcareFacilityNetwork.GenderRestriction
NationalProviderIdentifier	HealthcareProviderNpi.Npi

QUESTION 23

Which two steps can an administrator take to configure the care program enrollment flow? (choose two)

- A. Customize the out of box enrollment flow to match requirements
- B. Use the provider enrollment flow out of box.
- C. Customize the provider site flow.
- D. Identify the patient as approved candidate in the flow.
- E. Customize the care coordinator flow for patient.



Correct Answer: A, D

Section:

Explanation:

Customizing the out of box enrollment flow to match requirements (A) and identifying the patient as approved candidate in the flow (D) are two steps that an administrator can take to configure the care program enrollment flow. Using the provider enrollment flow out of box (B) is not applicable, as it is for providers, not patients. Customizing the provider site flow and customizing the care coordinator flow for patient (E) are not related to the care program enrollment flow.

QUESTION 24

Which three of the following statements are true about Care Plan Templates? (Choose Three)

- A. When creating a care plan with a template you can unselect tasks so they will not be included.
- B. The sort order of the Task group by Fields can be changed under custom setting task group.
- C. Care plan templates must include at least 1 problem, 1 goal and 1 task.
- D. When creating a care plan with a template you can change the offsets of the tasks.
- E. Care plan templates can only be used when creating a new care plan.

Correct Answer: A, B, C

Section:

Explanation:

When creating a care plan with a template you can unselect tasks so they will not be included (A), the sort order of the Task group by Fields can be changed under custom setting task group (B), and care plan templates must include at least 1 problem, 1 goal and 1 task are true statements about Care Plan Templates. When creating a care plan with a template you can change the offsets of the tasks (D) is false, as you can only change the offsets of the tasks when creating a care plan without a template. Care plan templates can only be used when creating a new care plan (E) is false, as you can also use care plan templates when editing an existing care plan.

QUESTION 25

Which two fields are optional when creating a new Care plan task? (Choose Two)

- A. Status
- B. Due Date
- C. Goal
- D. Problem
- E. Task Owner

Correct Answer: C, D

Section:

Explanation:

Goal and Problem (D) are optional fields when creating a new Care plan task. Status (A) and Task Owner (E) are required fields when creating a new Care plan task. Due Date (B) is not a field on Care plan task, but rather on Task object.

QUESTION 26

Which Data Model Leverages external objects to support the use Case?

- A. Care Observations
- B. Claims
- C. Member Plan
- D. Clinical Service Requests

Correct Answer: B

Section:

Explanation:

Claims data model leverages external objects to support the use case of integrating claims data from external systems into Health Cloud. External objects are similar to custom objects, except that they map to data that's stored outside your Salesforce org1.

QUESTION 27

Which format is acceptable for intelligent document automation upload?

- A. .PNG
- B. .CSV
- C. .DOC
- D. .MP4

Correct Answer: A

Section:

Explanation:

Intelligent document automation supports the following file formats for upload: .jpg, .jpeg, .png, .pdf, and .tif2. Therefore, .png is the only acceptable format among the options.

QUESTION 28

Which three steps are needed to setup Care Requests? (Choose three).

- A. Create a new case record type for each Care Request type
- B. Install UM unmanaged package for Health Cloud. Then assign Health cloud Utilization management permission set to users along with Health cloud permission set licenses.



- C. All Care requests are pre-setup on all Health Cloud orgs by default.
- D. Choose any existing case record type for each Care Request type.
- E. Choose case Care Request record type for each Care Request configuration.

Correct Answer: A, B, E

Section:

Explanation:

To set up care requests, you need to do the following steps:

Install the Utilization Management unmanaged package for Health Cloud and assign the Health Cloud Utilization Management permission set to users along with Health Cloud permission set licenses.

Create a new case record type for each care request type.

Choose the Case Care Request record type for each care request configuration.

QUESTION 29

If a Health Cloud administrator wanted to consume the content of an HL7 v2 -- Simple Application message, which step would they need to take?

- A. Do Nothing -- Health Cloud works out of the box with native HL7 message
- B. Use Salesforce Connect
- C. Write a custom apex class to consume parse and store a native HL7 message
- D. Use an HL7 broker/engine to transform the text based HL7 message into JSON and pass it to the Health Cloud.

Correct Answer: D

Section:

Explanation:

Health Cloud does not support native HL7 messages out of the box, so option A is incorrect. Option B is also incorrect, because Salesforce Connect is not designed to handle HL7 messages. Option C is possible, but it would require a lot of custom code and maintenance, and it is not recommended by Salesforce. Option D is the best option, because it uses an external HL7 broker/engine to convert the HL7 message into JSON, which can be easily consumed by Health Cloud using the standard REST API or the Health Cloud Data Loader.

QUESTION 30

Which resource within health cloud facilitates the easy exchange of data between Health Cloud and the client Electronic Medical Records

- A. Health Cloud has a built in HL7 integration Engine
- B. Health cloud has prebuilt connections for the top ten EMR's
- C. Health cloud has a lightning component button automatically configured to 'Export to EMR'
- D. Health cloud has published data mappings from commonly used HL7 message to the Health Cloud data model

Correct Answer: D

Section:

Explanation:

Health Cloud does not have a built-in HL7 integration engine, so option A is incorrect. Option B is also incorrect, because Health Cloud does not have prebuilt connections for any EMRs. Option C is incorrect, because there is no such lightning component button automatically configured to export to EMR. Option D is correct, because Health Cloud provides data mappings from commonly used HL7 messages (such as ADT, ORU, and RDE) to the Health Cloud data model, which can help developers and integrators map the data from external systems to Health Cloud objects and fields.

QUESTION 31

What is the latest FHIR model aligned to Health Cloud?

- A. V5
- B. V4
- C. V3

D. V1

Correct Answer: B

Section:

Explanation:

FHIR (Fast Healthcare Interoperability Resources) is a standard for exchanging healthcare information electronically. FHIR V4 is the latest version of FHIR, and it is aligned with Health Cloud3. Option A is incorrect, because there is no FHIR V5 yet. Option C is incorrect, because FHIR V3 is an older version of FHIR that is not aligned with Health Cloud. Option D is incorrect, because FHIR V1 is also an older version of FHIR that is not aligned with Health Cloud.

QUESTION 32

When bringing in the Business identifier for patient record from external system like EHRs, which entity is most suitable to hold that information in Health cloud?

- A. Sourcesystem identifier
- B. Contacts
- C. Account
- D. Identifier

Correct Answer: A

Section:

Explanation:

SourceSystemIdentifier is a custom object in Health Cloud that stores the business identifier for patient records from external systems like EHRs3. Option B is incorrect, because Contact is a standard object in Salesforce that stores the personal information of patients or members. Option C is incorrect, because Account is a standard object in Salesforce that stores the organizational information of providers or payers. Option D is incorrect, because Identifier is a field on the EhrPatient object in Health Cloud that stores the unique identifier for patient records within Health Cloud3.

QUESTION 33

Which two interoperability standards are supported by Salesforce to facilitate the exchange of health data? (Choose two)?

- A. EDI ANSI X12- Recall Concept/Remainder 2
- B. FHIR V4(Fast Healthcare interoperability Resources)
- C. The Direct Standard
- D. HL7 V2- Simple Application3 -- Apply to real world/Analyze / Evaluate(Health Level Seven)
- E. DICOM (Digital Imaging and communications In Medicine)

Correct Answer: B, D

Section:

Explanation:

FHIR V4 and HL7 V2 are two interoperability standards that are supported by Salesforce to facilitate the exchange of health data32. Option A is incorrect, because EDI ANSI X12 is a standard for exchanging business transactions, not health data. Option C is incorrect, because The Direct Standard is a standard for secure email communication, not health data. Option E is incorrect, because DICOM (Digital Imaging and Communications in Medicine) is a standard for storing and transmitting medical images, not health data.

QUESTION 34

Which three medication related FHIR resources are supported in the new data model of Health cloud (Choose Three)

- A. Medical Administration
- B. Medication
- C. Dosage
- D. Medication Dispense

E. Medical Request

Correct Answer: B, D, E

Section:

Explanation:

FHIR V4 and HL7 V2 are two interoperability standards that are supported by Salesforce to facilitate the exchange of health data³². Option A is incorrect, because EDI ANSI X12 is a standard for exchanging business transactions, not health data. Option C is incorrect, because The Direct Standard is a standard for secure email communication, not health data. Option E is incorrect, because DICOM (Digital Imaging and Communications in Medicine) is a standard for storing and transmitting medical images, not health data.

QUESTION 35

With regards to Integration/Interoperability, which three statement are true about health cloud? (Choose Three)

- A. The New clinical data model in health cloud is aligned with FHIR R4 standards.
- B. Health cloud support data exchange with both HL7 and FHIR enabled systems.
- C. Most EHR (Electronic Health Record) data exchange today is still done via legacy HL7 v2 -- simple application interface.
- D. Health cloud has a FHIR server.
- E. The new clinical data model in Health cloud is aligned with HL7 v2-simple application standard.

Correct Answer: A, B, C

Section:

Explanation:

According to the [Health Cloud Integration and Interoperability Guide], the new clinical data model in Health Cloud is aligned with FHIR R4 standards, which is the latest version of the FHIR specification. Health Cloud supports data exchange with both HL7 and FHIR enabled systems, using different methods such as MuleSoft connectors, Salesforce APIs, or third-party integrations. Most EHR data exchange today is still done via legacy HL7 v2 -- simple application interface, which is a widely adopted standard for exchanging clinical and administrative data. Health Cloud does not have a FHIR server, but it can connect to external FHIR servers using APIs or MuleSoft connectors. The new clinical data model in Health Cloud is not aligned with HL7 v2-simple application standard, which is a different standard from FHIR.

QUESTION 36

Which steps should a salesforce administrator complete to set up a warehouse that serves as a product fulfillment location to salesforce representative in a specific region, irrespective of the account? (Choose three)

- A. Create Inventory Location and add Visitor Address as Location Address.
- B. Create Record in Product Fulfillment Location.
- C. Set-up Product Transfer and product request.
- D. Select inventory location while creating visit
- E. Create a product item entry inventory, a single entry for each product that will be replenished from industry.

Correct Answer: A, B, E

Section:

Explanation:

According to the [Intelligent Sales for Medical Devices Implementation Guide], to set up a warehouse that serves as a product fulfillment location to salesforce representatives in a specific region, irrespective of the account, a salesforce administrator should complete the following steps:

Create Inventory Location and add Visitor Address as Location Address. This step creates a record for the warehouse location and associates it with a visitor address.

Create Record in Product Fulfillment Location. This step defines the product fulfillment location for the inventory location and assigns it to a specific region.

Create a product item entry inventory, a single entry for each product that will be replenished from industry. This step adds the products that will be available in the warehouse location and specifies their quantity and expiration date. Setting up Product Transfer and Product Request are not required steps for setting up a warehouse location. Selecting inventory location while creating visit is not a step for setting up a warehouse location, but for creating a visit record.

QUESTION 37

Which two preference must a salesforce administrator enable to begin using Intelligent Sales for Medical Devices? (Choose two)

- A. Visit Inventory Management
- B. Intelligent Sales
- C. Action Plans
- D. Lightning Flows
- E. Lightning App builder

Correct Answer: A, B

Section:

Explanation:

Reference and details below.

The FHIR-Aligned Clinical Data Model

Health Cloud's new clinical data model maps closely to FHIR R4 specification, but with a few minor differences.

- The new clinical data model supports most of the FHIR R4 attributes, except certain instances that aren't relevant for the typical Health Cloud user.

[Enable Intelligent Sales](#)

Before your users can use [Intelligent Sales](#), you must [enable the Intelligent Sales and Visit Inventory Management org prefs](#) in your Salesforce org.

QUESTION 38

Dr. Jill Mikel at Tahoe Hospital would like to improve the management of patient visits. Which steps should the salesforce Administrator complete to setup a patient visit Process? (Choose two)

- A. Create a Task and add task to an action plan template.
- B. Create flow for the business process.
- C. Create a task and add the task to visit creation.
- D. Create an action plan template add flow and published the template.

Correct Answer: B, D

Section:

Explanation:

Reference and details below.

Set Up Your Action Plan Templates

Your users can use the action plan templates you define to [create different types of visits](#). An action plan template adds a set of assessment tasks to a visit that your sales rep completes before ending the visit.

Before you create an action plan template, [make sure you have the business flows](#) that your sales reps need for their assessment tasks. You can either build your own flows using the Flow Builder, or you can use the Patient Registration and Order Authorization flows provided with Intelligent Sales. If you create a flow, make sure that this flow accepts `VisitId` and `AssessmentTaskId` as input.

2. [Add task flows in an action plan template and publish it.](#)

- a. In the Items tab of your action plan template, click **Add Flow**.

 **Warning:** Only add task flows to your template. Intelligent Sales doesn't support assessment task definitions.

Consent can take place with the participant providing [consent in person, using a tablet or mobile device](#). Patients and members who aren't physically present can [log into their Experience Cloud site](#), then view and provide consent for documents related to the program.

QUESTION 39

A sales Representative wants to request a Rep-to-Rep Transfer. What two paths are available to request the transfer? (Choose two)

- A. Under visit, choose to navigate to visit Products.
- B. The transfer can be requested while creating an Order Authorization for a Visit.
- C. To Request the transfer, navigate to product, then choose the specific inventory location against which to request the transfer.
- D. During Visit creation you can request the transfer while selecting products required for a visit.

Correct Answer: B, C

Section:

Explanation:

According to the Salesforce documentation¹, there are two ways to request a rep-to-rep transfer in Health Cloud:

When creating an order authorization for a visit, you can request a transfer from another rep's inventory location by selecting the Transfer option in the Product Selection screen¹.

To request a transfer from a specific inventory location, you can navigate to Products, select the product you want to transfer, and then click Request Transfer in the Related list¹.

QUESTION 40

Which Salesforce Product allows encryption of Protected Health Information (PHI) data at rest to enhance Health Cloud?

- A. Shield
- B. Tableau CRM
- C. Health Cloud
- D. Service Cloud

Correct Answer: A

Section:

Explanation:

Shield is a Salesforce product that allows encryption of protected health information (PHI) data at rest to enhance Health Cloud². Shield Platform Encryption encrypts sensitive data at rest without compromising critical platform functionality. It helps you address privacy policies, regulatory requirements, and contractual obligations for data protection².

**QUESTION 41**

A Health Cloud administrator has to provide the DevOps team access to production copy sandboxes for investigation and fixes. How can be administrator ensure that all privacy, compliance and regulatory requirement are met.

- A. Install Mask and anonymize sensitive data on production copy sandboxes.
- B. Only allow offshore team access to production copy sandboxes if they have taken compliance training and are certified to have access.
- C. Only allow onshore team access to Health cloud objects on production copy sandboxes.
- D. Install Shield only in production copy sandboxes.
- E. Install shield and encrypted all PII data on production sandboxes.

Correct Answer: A

Section:

Explanation:

Mask is a Salesforce product that helps you anonymize sensitive data in production copy sandboxes to ensure privacy, compliance, and regulatory requirements are met³. Mask replaces sensitive data with fictitious yet realistic data that preserves the characteristics of the original data. It also prevents unauthorized access to sensitive data by masking it before it is copied to a sandbox³.

QUESTION 42

Makana Pharmaceutical is planning to run a Patient support program on Health Cloud. A System Administrator has been tasked to ensure the platform encryption has been configured. The patient's name is stored on firstname and lastname fields on the person account record. Firstname and Lastname field have been identified as holding PHI(Personal Health Information) dat

a. They are also important search criteria commonly used by Users to find a patient record. The Compliance team has indicated that all PHI Data must be encrypted at rest. What is the best practice for platform encryption configuration for this solution?

- A. Encrypt all PHI/PII data
- B. Encrypt all data
- C. Use Class Encryption to encrypt field identified as PHI
- D. Use a Deterministic Encryption Policy on Account FirstName & LastName fields.
- E. Use a Probabilistic Encryption Policy on Account FirstName & LastName fields.

Correct Answer: D

Section:

Explanation:

Deterministic encryption is a type of encryption policy that allows you to encrypt fields that are used as search criteria, such as FirstName and LastName fields on the Account object. Deterministic encryption ensures that identical plaintext values always result in identical ciphertext values, which enables searching and filtering on encrypted fields. This is suitable for PHI data that needs to be encrypted at rest but also searchable by users.

QUESTION 43

Which action is Possible in the program enrollment flow when adding in 'Enroll in Program' quick action to a record? (Choose three)

- A. Starting a new blank care plan
- B. Signing enrollment consent form
- C. Seeing a list of all product and selecting applicable products
- D. Selecting the provider associate with a product
- E. Creating a new care program

Correct Answer: A, B, D

Section:

Explanation:

According to the [Health Cloud Implementation Guide], the three actions that are possible in the program enrollment flow when adding in 'Enroll in Program' quick action to a record are:

Starting a new blank care plan. This action allows you to create a new care plan for the patient based on their needs and goals.

Signing enrollment consent form. This action allows you to capture the patient's consent for enrolling in a program using an e-signature tool.

Selecting the provider associated with a product. This action allows you to choose the provider who will deliver the product or service to the patient as part of the program. Seeing a list of all products and selecting applicable products is not an action in the program enrollment flow. Creating a new care program is not an action in the program enrollment flow.

QUESTION 44

Which type of files can be uploaded as Consent Documents in secure folders of Health Cloud for a Care Program? (Choose two)

- A. Copy-protected PDF files
- B. Opt out consent documents
- C. Authorization consent forms
- D. Files that are smaller than 2 -- Simple Application 5MB
- E. Password protected files

Correct Answer: C, D

Section:

Explanation:

According to the Salesforce documentation¹, consent documents are files that capture the enrollee's consent to participate in a care program. Consent documents can be uploaded as PDF, DOC, DOCX, or JPG files in secure folders of Health Cloud for a care program. The file size limit for consent documents is 2 MB¹. Therefore, options C and D are correct. Option A is incorrect, because copy-protected PDF files cannot be uploaded as consent



documents. Option B is incorrect, because opt out consent documents are not used to enroll in a care program, but to withdraw from it. Option E is incorrect, because password protected files cannot be uploaded as consent documents.

QUESTION 45

In which two ways can Life Science organizations capture consent from enrollees of Care Program? (2 -- Simple Application correct options)

Options not visible

- A. By engaging in a web chat with an agent who presents consent forms in chat window.
- B. By sending an email that then create a case using email-to-case.
- C. By talking to an agent via phone who then enrolls the patient
- D. By submitting consent Via SMS using Einstein Chat bot.
- E. By using a Self-Service portal via a Community.

Correct Answer: C, E

Section:

Explanation:

According to the Salesforce documentation², there are two ways to capture consent from enrollees of a care program:

By talking to an agent via phone who then enrolls the patient using the Enroll in Program quick action in Health Cloud².

By using a self-service portal via a community where the enrollee can view and sign the consent document electronically using DocuSign or Adobe Sign². Therefore, options C and E are correct. Option A is incorrect, because web chat is not a supported channel for capturing consent in Health Cloud. Option B is incorrect, because email-to-case is not a supported feature for enrolling in a care program. Option D is incorrect, because SMS is not a supported channel for capturing consent in Health Cloud.

QUESTION 46

In which two ways can an administrator support the Health department so that the team can efficiently assess the individual, enroll them in a program, and monitor them during emergency? (Choose two)

- A. Create a healthcare provider enrollment flow
- B. Install emergency Response Management unmanaged package
- C. Leverage pre-configured flows provided with Health Cloud
- D. Create Patient Enrollment Console

Correct Answer: B, C

Section:

Explanation:

Reference and details below.

Using the **Emergency Response Management Console**, create a consistent intake experience using **guided workflows** and pre-built assessments that can quickly adapt as protocols or guidelines change.

According to the Salesforce documentation³, there are two ways to support the health department so that the team can efficiently assess the individual, enroll them in a program, and monitor them during emergency:

Install Emergency Response Management unmanaged package, which provides prebuilt objects, fields, apps, tabs, reports, dashboards, and more to help health organizations manage emergency response³.

Leverage pre-configured flows provided with Health Cloud, such as Assess Individual Risk Level flow and Enroll in Program flow, which help health workers quickly assess and enroll individuals in emergency programs³. Therefore, options B and C are correct. Option A is incorrect, because there is no such thing as a healthcare provider enrollment flow in Health Cloud. Option D is incorrect, because there is no such thing as a patient enrollment console in Health Cloud.

QUESTION 47

Which three terms can a Life Sciences company track about a Care Program using Program Management in Health Cloud? (Choose three)

- A. The clinical indicators that need to be monitored in the Care Program.
- B. The products that are associated with a given Care Program.
- C. The multiple marketing campaigns that enrollees are subjected to as part of the Care Program.

- D. The budget & expense of the company's associated Care Program.
- E. The Plans that enrollees have been engaged in as part of the Care Program.

Correct Answer: A, B, E

Section:

Explanation:

According to the Salesforce documentation, a life sciences company can track the following terms about a care program using program management in Health Cloud:

The clinical indicators that need to be monitored in the care program, such as blood pressure, cholesterol level, or weight.

The products that are associated with a given care program, such as medications, devices, or services.

The plans that enrollees have been engaged in as part of the care program, such as education plan, adherence plan, or follow-up plan. Therefore, options A, B, and E are correct. Option C is incorrect, because marketing campaigns are not tracked by program management in Health Cloud. Option D is incorrect, because budget and expense are not tracked by program management in Health Cloud.

QUESTION 48

What is the difference between Care Program and Care Plans in Health Cloud? (Choose 1 -- Recall concept / Remember.)

- A. Care Programs track a patient's overall health journey, while Care Plans are more focused on specific care needs.
- B. Care Plans can be exposed in a community while Care Programs cannot.
- C. Care Plans are only used by Providers & Payers while Care Programs are only used by Life Sciences companies.
- D. Care Programs are just a different type of Care Plan which capture more details such as financial information.
- E. Care Programs are an extension on Care Plans.

Correct Answer: A

Section:

Explanation:

According to the Salesforce documentation, care programs and care plans are different concepts in Health Cloud:

Care programs track a patient's overall health journey from enrollment to completion. They provide guidance and support for patients to proactively manage their health by increasing their adherence to treatment plans.

Care plans are practical, actionable steps to support the health of a patient. They break health problems down into doable, trackable actions. They serve as the source of truth for all the individuals involved in the care of a patient. Therefore, option A is correct. Option B is incorrect, because both care programs and care plans can be exposed in a community. Option C is incorrect, because both care programs and care plans can be used by providers, payers, and life sciences companies. Option D is incorrect, because care programs are not a different type of care plan, but a separate object in Health Cloud. Option E is incorrect, because care programs are not an extension of care plans, but a related object in Health Cloud.

QUESTION 49

Which Permission Set Licenses are required to utilize and access Health Cloud feature and functionalities? (Choose two)

- A. Health Cloud for Community
- B. Health Cloud
- C. Health Cloud Platform
- D. Health Cloud Permission Set License
- E. Health Cloud Standard

Correct Answer: B, D

Section:

Explanation:

According to the Health Cloud Implementation Guide, the two permission set licenses that are required to utilize and access Health Cloud features and functionalities are Health Cloud and Health Cloud Permission Set License.

Health Cloud is a base license that enables access to Health Cloud objects and tabs. Health Cloud Permission Set License is an add-on license that enables access to Health Cloud Lightning components and pages. Health Cloud for Community, Health Cloud Platform, and Health Cloud Standard are not valid permission set licenses for Health Cloud.

QUESTION 50

How can a Health Cloud administrator change the label 'Patient Card' to 'Member Card' to be more aligned with their specific business terminology and use case?

- A. Go to setup, navigate to Custom Labels, select the 'Patient_Card_Header' label, click the 'New Local Translation/Overrides' button, Select the language and enter the new label.
- B. Go to the Health Cloud -- Admin Home page, select the Patient Card Configuration tab, and click 'New' to add a new configuration for 'Member'.
- C. Go to Setup, navigate to the Patient Card object, and edit the Patient field name.
- D. Edit the page layout where the Patient Card is shown, click on the attributes for the Patient Card component, and edit the name to 'Member'.
- E. The labels that come with the Health Cloud cannot be changed.

Correct Answer: A

Section:

Explanation:

According to the Health Cloud Implementation Guide, the way to change the label 'Patient Card' to 'Member Card' to be more aligned with their specific business terminology and use case is to go to setup, navigate to Custom Labels, select the 'Patient_Card_Header' label, click the 'New Local Translation/Overrides' button, select the language and enter the new label. This method allows you to override the default label for a specific language. The other options are not valid ways to change the label.

QUESTION 51

How should Members and Patients be represented during the basic set-up of Health Cloud console for Care Coordinators and Managers as per the Salesforce recommendation?

- A. The Individual data model may be used to represent Members and Patients.
- B. Leveraging Candidate Accounts are the recommended approach to represent Members and Patients.
- C. Salesforce recommends using Member Accounts to represent Members and Patients.
- D. Leveraging Person Accounts is the recommended approach to represent Members and Patients.

Correct Answer: D

Section:

Explanation:

According to the Health Cloud Implementation Guide, leveraging Person Accounts is the recommended approach to represent Members and Patients during the basic set-up of Health Cloud console for Care Coordinators and Managers. Person Accounts are a type of account that combines account and contact information in a single record. They are suitable for representing individual consumers in healthcare and life sciences. The other options are not recommended approaches to represent Members and Patients.

QUESTION 52

Within Health Cloud Console, there are two apps available for use depending on work preferences, which console is available within Lightning Experience?

- A. Health Cloud -- Worklist
- B. Health Cloud -- Individual
- C. Health Cloud -- Personal
- D. Health Cloud -- Console

Correct Answer: A, D

Section:

Explanation:

:According to the Health Cloud Implementation Guide, Health Cloud -- Console is the console that is available within Lightning Experience. It is a customizable workspace that allows users to view and manage multiple records on a single screen.

QUESTION 53

A Health Cloud administrator would like to setup a new default sub-tab when opening record, where in the setup menu would the administrator go to accomplish this?

- A. Custom Permissions
- B. Custom Settings
- C. Custom Labels
- D. Custom Metadata Types
- E. Custom Object

Correct Answer: B

Section:

Explanation:

According to the Health Cloud Implementation Guide, a Health Cloud administrator can change the default sub-tab when opening a record by going to setup, navigating to Custom Settings, and editing the Default Subtab setting. This setting allows you to specify which sub-tab should be displayed by default when opening a record in Health Cloud -- Console. The other options are not relevant for changing the default sub-tab.

QUESTION 54

A Health Cloud administrator is working on a call center implementation and has to ensure that the phone numbers passing through the CTI settings display the matching contact record via Screen Pop. Which custom metadata type within Health Cloud should the administrator update to achieve this requirement?

- A. Flow Session Setting -> CallCenterFlow
- B. Feature Flag Setting -> CTIDriverSetting
- C. Job Flow Setting -> ConsoleDisplayValue
- D. Health Cloud Setting -> HcFeatureDriver

Correct Answer: B

Section:

Explanation:

According to the Salesforce documentation¹, the Feature Flag Setting custom metadata type within Health Cloud allows you to enable or disable certain features of Health Cloud. One of the features that can be enabled or disabled is the CTIDriverSetting, which controls whether the CTI adapter is used to display phone numbers in the patient console. To ensure that the phone numbers passing through the CTI settings display the matching contact record via screen pop, the administrator should update the Feature Flag Setting -> CTIDriverSetting custom metadata type and set the value to true¹.

QUESTION 55

How would a Health Cloud administrator indicate which tab should appear when a patient record is opened in the Patient Console?

- A. In the CardView dropdown custom setting for that tab, enter Default for Category Name.
- B. In the CardView dropdown custom setting for that tab, select Subtab for Tab Type.
- C. Edit the Patient Card configuration for the tab and enable Default Subtab
- D. In the CardView dropdown custom setting for that tab, enable Default subtab.

Correct Answer: C

Section:

Explanation:

According to the Salesforce documentation², the Patient Card configuration allows you to customize how patient information is displayed in the patient console. You can create different tabs for different types of information, such as demographics, medications, or referrals. To indicate which tab should appear when a patient record is opened in the patient console, you need to edit the Patient Card configuration for that tab and enable Default Subtab. This will make that tab the default subtab for all patient records².

QUESTION 56

Where can a Salesforce administrator configuring different levels of access to patients' care plans, configure team members different levels of access to cases to ensure sensitive data is not shared with the wrong groups?

- A. Permission Set Groups

- B. Profiles
- C. Contact Roles on case
- D. Permission Sets
- E. Case Team Roles

Correct Answer: E

Section:

Explanation:

Reference and details below.

Case Team Role

The Case Team Role object represents a role for a member of the patient care team, such as Caregiver or Physiotherapist. Care coordinators assign roles when they add a member to the private patient site. The case team role also controls access to the case and the care plan, and controls visibility of the user in the site.

QUESTION 57

Which three types of customizations can be managed through the Health Cloud Admin app? (Choose three.)

- A. Patient Card Configurations
- B. Timeline View Configurations
- C. Cross Object Relationships
- D. Household Relationships
- E. Permission Set Assignments

Correct Answer: A, B, C

Section:

Explanation:

Reference and details below.



Use the Health Cloud - Admin App

The Health Cloud - Admin app includes a set of tabs where you can customize Health Cloud features to support the ways your organization works with patients or members.

To use the Health Cloud - Admin app in Lightning Experience, go to App Launcher and select **Health Cloud - Lightning Admin**. To use the Health Cloud - Admin app in Salesforce Classic, use the app picker to select **Health Cloud - Admin**.

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Administer Health Cloud

Customize the Health Cloud Console

Cross Object Relationships

Cross-object relationships control which objects and fields appear in the filter selection options when creating patient or member lists.

EHR Custom Objects

These tables (EHR Patients, EHR Encounters, and so on) contain data from the source record system related to things like prescriptions, conditions, patients, and immunizations.

Patient Card Configurations

Edit the patient card view and add or remove information from EHR or other records.

Timeline View Configurations

Add or remove healthcare events from the timeline so that care coordinators have the information they need and can effectively manage patients or members.



QUESTION 58

What is Health Cloud? (Choose two.)

- A. Health Cloud is an engagement layer.
- B. An AppExchange core package and third party service.
- C. Health Cloud is part managed package and part core services.
- D. Core services exposed by permission license.
- E. Health Cloud is a new type of Electronic Health Record.

Correct Answer: A, C

Section:

Explanation:

According to the Salesforce documentation, Health Cloud is a health IT solution that helps healthcare organizations deliver personalized and collaborative care across every touchpoint. Some of the characteristics of Health Cloud are:

Health Cloud is an engagement layer that connects patients, providers, payers, and partners on a single platform. It enables seamless communication and collaboration across the healthcare ecosystem.

Health Cloud is part managed package and part core services. The managed package contains custom objects, fields, tabs, apps, components, and more that are specific to healthcare use cases. The core services include standard Salesforce features and functionality that are available across all Salesforce products.

QUESTION 59

Clinicians want to see an overview of the patient's life, like Starting a New Job, Birth of a Baby, Divorce, etC. to understand the patient better and help them with a personalized care plan. What should the administrator

configure in the Health Cloud so the clinicians can access this information in one place?

- A. Life Goals
- B. Life Events
- C. Household Map
- D. Milestones
- E. Life Map

Correct Answer: B

Section:

Explanation:

According to the Health Cloud Implementation Guide, Life Events are a feature in Health Cloud that allow clinicians to see an overview of the patient's life, such as Starting a New Job, Birth of a Baby, Divorce, etc. Life Events help clinicians understand the patient better and help them with a personalized care plan. Life Events can be added to the patient's timeline or life map. Life Goals, Household Map, Milestones, and Life Map are not features that show the patient's life events.

QUESTION 60

Which three of the following features are included with a Health Cloud License?

- A. EHR Mulesoft Templates
- B. Surveys
- C. Intelligent Document Automation
- D. Care Coordination(Patient Services)
- E. Intelligent Form Reader with Amazon Textract

Correct Answer: B, C, D

Section:

Explanation:

According to the Health Cloud Data Model Developer Guide, Surveys, Intelligent Document Automation, and Care Coordination (Patient Services) are three features that are included with a Health Cloud License. Surveys allow you to create and send surveys to patients and providers to collect feedback and data. Intelligent Document Automation allows you to digitize your document management processes and extract data from documents using artificial intelligence. Care Coordination (Patient Services) allows you to manage patient care across multiple care plans and teams. EHR Mulesoft Templates and Intelligent Form Reader with Amazon Textract are not features that are included with a Health Cloud License.

QUESTION 61

Which Visual representation in Health Cloud would enable a care coordinator to see all the relationships between a patient and the people and organizations participating in the patient's, including those across multiple care plans?

- A. Timeline view
- B. Care Team
- C. Lightning Empower Components
- D. Householding Map
- E. Patient Card

Correct Answer: D

Section:

Explanation:

According to the Health Cloud Implementation Guide, Householding Map is the visual representation in Health Cloud that enables a care coordinator to see all the relationships between a patient and the people and organizations participating in the patient's care, including those across multiple care plans. Householding Map shows a graphical view of the patient's household members, care team members, providers, and other related



entities. Timeline View, Care Team, Lightning Empower Components, and Patient Card are not visual representations that show all the relationships between a patient and their care participants.

QUESTION 62

Which three options are standard objects available for Insurance Management? (choose 3)

- A. Insurance Benefit
- B. PurchaserPlan
- C. MemberPlan
- D. Coverage Benefit
- E. Insurance Coverage

Correct Answer: A, C, E

Section:

Explanation:

According to the Health Cloud Data Model Developer Guide, Insurance Benefit, MemberPlan, and Insurance Coverage are three standard objects available for Insurance Management. Insurance Benefit represents a specific benefit or service covered by an insurance plan. MemberPlan represents an insurance plan that a member is enrolled in. Insurance Coverage represents an insurance policy that covers one or more members. PurchaserPlan and Coverage Benefit are not standard objects available for Insurance Management.

QUESTION 63

The Salesforce Admin for Lake Tahoe Hospital wants to implement Utilization Management. Which two of the listed steps need to be taken during the set-up process? (Choose 2)

- A. Install the Health Cloud Care Request Extensions unmanaged package.
- B. Assign the Health Cloud Permission Set License and Health Cloud Platform Permission Set License to Salesforce Classic users.
- C. Assign the Health Cloud Permission Set License and the Health Cloud Platform Permission Set License to Salesforce Lightning users.
- D. Install the Utilization Management Extensions.

Correct Answer: A, C

Section:

Explanation:

According to the Health Cloud Implementation Guide, the two steps that need to be taken during the set-up process for Utilization Management are:

Install the Health Cloud Care Request Extensions unmanaged package. This package contains custom objects, fields, layouts, tabs, and components for Utilization Management.

Assign the Health Cloud Permission Set License and the Health Cloud Platform Permission Set License to Salesforce Lightning users. These licenses enable access to Health Cloud features and functionalities for Lightning Experience. Assigning the Health Cloud Permission Set License and Health Cloud Platform Permission Set License to Salesforce Classic users is not necessary for Utilization Management. Installing the Utilization Management Extensions is not a valid step for Utilization Management.

QUESTION 64

Which three business process are supported by Salesforce HC utilization Management? (Choose 3)

- A. Ticketing
- B. Physician Request
- C. Drug Request
- D. Admissions
- E. Appeals

Correct Answer: C, D, E

Section:

Explanation:

Reference and details below.

Support and Manage Care Requests

Give your users the tools to collaborate seamlessly on submitting, assigning, and processing care requests. Utilization management makes it easier for payer organizations to gather member and clinical data from providers, streamline care request reviews, and evaluate reviews for medical necessity. Health care providers can quickly submit care requests with fewer phone calls and faxes for preauthorizations.

Health Cloud provides standard objects to support these business processes:

- Prescription drug preauthorization requests
- Service preauthorization requests
- Admissions
- Concurrent (continued stay) reviews
- Appeals
- Complaints and grievances

QUESTION 65

Which three standard objects are used in the workflow to manage utilization data? (Choose 3)

- A. Care Request Plan
- B. Care Diagnosis
- C. Care Authorization
- D. Care Request
- E. Care Request Drug

Correct Answer: A, C, D

Section:

Explanation:

According to the Salesforce documentation², the following standard objects are used in the workflow to manage utilization data:

Care Request Plan: A care request plan is an object that stores information about the plan of care for a member. It includes details such as the diagnosis, the service type, the start and end dates, and the status of the plan².

Care Authorization: A care authorization is an object that stores information about the approval or denial of a service or payment by a payer. It includes details such as the authorization number, the decision date, the decision reason, and the status of the authorization².

Care Request: A care request is an object that stores information about the request for a service or payment by a provider or a member. It includes details such as the request type, the request date, the priority, and the status of the request².

QUESTION 66

Which is true about choosing a care request type when setting up a new care request record?

- A. Any case record type can be chosen when creating care request.
- B. A care request type cannot be chosen when creating a new care request.
- C. A case record type can be chosen to identify a single care request type for each care request.
- D. Multiple care request types can be chosen for a single care request.

Correct Answer: C

Section:

Explanation:

According to the Salesforce documentation³, when setting up a new care request record, you need to choose a case record type to identify the care request type. The care request type determines what fields and values are



available on the care request record. There are four predefined care request types in Health Cloud: Physician Request, Drug Request, Admission Request, and Appeal Request. You can also create custom care request types to suit your business needs³.

QUESTION 67

A Salesforce administrator is migrating a Service Cloud org to Health Cloud and is considering using the Health Cloud Provider data model. Which approach should the administrator take if the Custom Provider Search Lightning component is to be used?

- A. The Provider data model is required for all Service Cloud to Health Cloud migrations, but either the standard or custom search components may be used.
- B. If the Provider data model is used, the standard Health Cloud Provider Search component must be used or extended. Custom search components are not supported.
- C. The current data model with the existing component can be used as well as the Provider data model with either custom search component or the Health Cloud Provider Search component.
- D. The Standard Health Cloud Provider Search component can be used to search either the Health Cloud Provider data model or a custom Provider data model.

Correct Answer: C

Section:

Explanation:

According to the Salesforce documentation¹, the Health Cloud Provider data model is an optional data model that can be used to represent providers and their relationships in Health Cloud. It is not required for all Service Cloud to Health Cloud migrations, and it can coexist with the existing data model. The Custom Provider Search Lightning component is a custom component that can be used to search for providers using any data model, including the Health Cloud Provider data model or a custom provider data model. The Health Cloud Provider Search component is a standard component that can be used to search for providers using the Health Cloud Provider data model only. It can be extended or customized, but not replaced by a custom component¹.

QUESTION 68

The Salesforce administrator for Lake Tahoe Hospital would like to implement Utilization Management. What are the design considerations that the administrator has to be aware of when creating the application? (Choose two.)

- A. Path can not be used to visually represent the status of a care request.
- B. Care request functionality is included in the Health Cloud managed package.
- C. Each Care request has to have an associated case.
- D. New Care requests can be created using the 'create care request' component.
- E. Care requests have empower components that can be exposed within Communities.



Correct Answer: C, D

Section:

Explanation:

The design considerations that the administrator has to be aware of when creating the application for utilization management are:

Each care request has to have an associated case. A case is the standard Salesforce object that represents a care request in Health Cloud⁴.

New care requests can be created using the 'Create Care Request' component. This component allows users to create a new care request from any page in the Health Cloud console⁵.

Path can be used to visually represent the status of a care request. Path is a standard Salesforce feature that displays the stages of a process, such as a care request, and guides users along the steps in Salesforce Lightning Experience⁶.

Care request functionality is not included in the Health Cloud managed package. It requires installing the Utilization Management unmanaged package for Health Cloud and assigning the Health Cloud Utilization Management permission set to users along with Health Cloud permission set licenses.

Care requests do not have empower components that can be exposed within Communities. Empower components are custom Lightning components that allow patients or members to view and manage their health information in Communities. Care requests are not part of the empower components.

QUESTION 69

An Health Cloud administrator has a requirement to display a custom field from the HealthCondition object that categorizes High Risk Conditions on the Patient Card. Which two are steps required to achieve this? (Choose two.)

- A. Add the newly created custom formula field on the Patient Card referencing the HealthCondition object.
- B. Create a custom formula on the Account object.

- C. Create a custom formula field on the Custom HealthCondition object.
- D. Create an APEX Trigger to categorize the High Risk Conditions.

Correct Answer: A, C

Section:

Explanation:

The steps required to display a custom field from the HealthCondition object that categorizes High Risk Conditions on the Patient Card are:

Create a custom formula field on the Custom HealthCondition object. This field can use logic to determine whether a health condition is high risk or not based on certain criteria.

Add the newly created custom formula field on the Patient Card referencing the HealthCondition object. This can be done by creating or editing a patient card configuration record and adding the field API name in the Field Name column.

QUESTION 70

A service cloud organization migrating to HC uses Contacts to represent patients, physicians and non-clinical staff. Which of these groups of contacts should be modeled as Person Accounts post-migration?

- A. Patients should be modeled as Person Accounts. Providers and non-clinical staff can be modeled as Person Accounts or Contacts
- B. Patients, physicians and non-clinical staff should be modeled as Person Accounts.
- C. None By using individual data model, the use of person account can be avoided
- D. Patients should be modeled as Person Accounts. Providers and non-clinical staff should be modeled as Contacts

Correct Answer: D

Section:

Explanation:

Patients should be modeled as Person Accounts. Providers and non-clinical staff should be modeled as Contacts (D) is the correct answer. Patients, physicians and non-clinical staff should not be modeled as Person Accounts (B), as Person Accounts are only for patients. The individual Data Model is not recommended for HC, as it does not support all the features of HC. Providers and non-clinical staff can be modeled as Person Accounts or Contacts (A) is not a valid answer, as it does not specify which group should be modeled as Person Accounts.

QUESTION 71

Three steps required to configure HC?

- A. Install HC unmanaged Package
- B. Install HC managed package
- C. Verify that chatter is enabled
- D. Configure the console view
- E. Enable the options for contact to related with multiple accounts

Correct Answer: B, C, D

Section:

Explanation:

Install HC managed package (B), verify that chatter is enabled, and configure the console view (D) are three steps required to configure HC. Install HC unmanaged Package (A) is not a valid step, as there is no unmanaged package for HC. Enable the options for contact to related with multiple accounts (E) is not a required step, as it is only needed if using Contacts instead of Person Accounts.

QUESTION 72

Which of the standard objects are included in the Care Plan Data Model?

- A. Crae programs,Product,Patients
- B. Life Events
- C. Benifits,Barriers,Provider Education

D. Case,Problems,Goals,Tasks,Care Plan Templates

Correct Answer: D

Section:

Explanation:

Case, Problems, Goals, Tasks, Care Plan Templates (D) are the standard objects that are included in the Care Plan Data Model. Care programs, Product, Patients (A), Life Events (B), and Benefits, Barriers, Provider Education are not standard objects in the Care Plan Data Model.

QUESTION 73

What are the two steps required to create Health care providers for Health program?Choose two

- A. Add NPI for associated provider
- B. Choose associated facility for Care Program.
- C. Add the UPIN
- D. Create Care Program Providers from the App Launcher
- E. Create a care program health care provider with an associated care prgm provider

Correct Answer: A, E

Section:

Explanation:

Add NPI for associated provider (A) and create a care program health care provider with an associated care program provider (E) are two steps required to create health care providers for health program. Choose associated facility for care program (B) is not a valid step, as facilities are not related to health care providers. Add the UPIN is not a required step, as UPIN is an optional field for health care providers. Create care program providers from the app launcher (D) is not a valid step, as care program providers are created from the related list on the care program record.

QUESTION 74

Which solution includes pre-built APIs, connectors ,implementation templates, and a prescriptive end-to-end reference architecture to enable EHR connectivity and power a patient 360 from any HER into HC using HL7 V2 or FHIR standards?

- A. Mulesoft Accelerator for HealthCare
- B. Shield
- C. Specialty vendors
- D. Tableau CRM for HealthCare

Correct Answer: A

Section:

Explanation:

Mulesoft Accelerator for Healthcare (A) is the solution that includes pre-built APIs, connectors, implementation templates, and a prescriptive end-to-end reference architecture to enable EHR connectivity and power a patient 360 from any EHR into Health Cloud using HL7 V2 or FHIR standards. Shield (B) is a solution that provides encryption and auditing capabilities for data security. Specialty vendors are not a solution, but a type of external partners that can provide integration services. Tableau CRM for Healthcare (D) is a solution that provides analytics and insights for healthcare data.

QUESTION 75

Which two fields are required when creating a new care plan task?

- A. owner
- B. problem
- C. Status
- D. Goal

E. Due Date

Correct Answer: A, C

Section:

Explanation:

Owner (A) and Status are two fields that are required when creating a new care plan task. Problem (B), Goal (D), and Due Date (E) are optional fields when creating a new care plan task.

QUESTION 76

Service cloud organization is migrating to health cloud, and only certain teams of users have health cloud use cases .Which Users with health cloud use cases or users who need access to health cloud objects require health cloud permission set licences.

What three types of ancillary information can be included in a single care request.

- A. Care request providers
- B. Care request reviews
- C. Care request drug
- D. Care request diagnosis
- E. Care request facility

Correct Answer: B, C, D

Section:

Explanation:

Care request reviews (B), Care request drug , and Care request diagnosis (D) are three types of ancillary information that can be included in a single care request. Care request providers (A) and Care request facility (E) are not types of ancillary information, but types of related records that can be associated with a care request.

QUESTION 77

Which features does Health Cloud Consent Management provide? (Choose two)

- A. Capture Data Use Purpose'
- B. Email for signature
- C. Delegated signing
- D. Capture IP Address during completion
- E. E-Signature

Correct Answer: B, E

Section:

Explanation:

Health Cloud Consent Management provides features such as email for signature and e-signature. Email for signature allows users to send consent documents to participants via email and track their status.E-signature allows participants to electronically sign consent documents using a third-party service such as DocuSign1. Capture Data Use Purpose, Delegated Signing, and Capture IP Address during completion are not features of Health Cloud Consent Management.

QUESTION 78

Which two steps can an administrator take to configure the Care Program enrollment flow? (Choose two.)

- A. Customize the provider site flow.
- B. Customize the care coordinator flow for patient
- C. Use the patient approval flow
- D. Use the provided enrollment flow out of the box.

E. Customize the out of the box enrollment flow template to match requirements.

Correct Answer: D, E

Section:

Explanation:

An administrator can configure the Care Program enrollment flow by using the provided enrollment flow out of the box or by customizing the out of the box enrollment flow template to match requirements. Health Cloud delivers an automated process for enrolling patients in care programs using Flow Builder. The flow lets the users select a program, add related products and providers, and capture the participant's consent. The administrator can use the default flow or modify it to suit their needs. Customize the provider site flow, customize the care coordinator flow for patient, and use the patient approval flow are not steps to configure the Care Program enrollment flow.

QUESTION 79

A Salesforce Admin wants to create tasks within a Care Plan that is related to a specific problem or goal. Which three different locations in the Health Cloud console can be used to create tasks related to a specific problem or goal within a Care Plan? (Choose three.)

- A. Timeline Tab
- B. Care Team
- C. Care Plan page
- D. Patient List
- E. Household Tab

Correct Answer: A, C, D

Section:

Explanation:

An administrator can create tasks within a Care Plan that is related to a specific problem or goal from the Timeline Tab, the Care Plan page, or the Household Tab in the Health Cloud console. The Timeline Tab shows a chronological view of all the tasks, events, and notes related to a patient or member. The Care Plan page shows the details of a specific care plan, including the tasks, problems, goals, and interventions. The Household Tab shows a list of household members and their relationships with the patient or member. The Care Team and the Patient List are not used to create tasks within a Care Plan.

QUESTION 80

Which Permission Set Licenses and Permission Sets need to be assigned to users to leverage Utilization Management? (Choose three)

- A. Health Cloud Analytics Permission Set
- B. Health Cloud Platform Permission Set License
- C. Health Cloud Utilization Management Permission Set
- D. Health Cloud Permission Set License
- E. Health Cloud Foundation Permission Set

Correct Answer: B, C, D

Section:

Explanation:

To leverage Utilization Management features in Health Cloud, users need to have Health Cloud Permission Set License, Health Cloud Utilization Management Permission Set, and Health Cloud Foundation Permission Set. Health Cloud Permission Set License grants access to the Health Cloud platform objects and features. Health Cloud Utilization Management Permission Set grants access to utilization management objects so users can manage care requests and reviews. Health Cloud Foundation Permission Set assigns read access to additional Health Cloud platform capabilities. Health Cloud Analytics Permission Set and Health Cloud Platform Permission Set License are not required for Utilization Management.

QUESTION 81

How does an administrator display device information on a patient card?

- A. Create a custom field on the EHR_Patient object with a formula that returns the information to display on patient card

- B. Create a custom field on the EHR_DeviceRequest with a formula that returns the information to display on patient card
- C. Create a custom field on the FilterCondition_c with a formula that returns the information to display on patient card
- D. Create an Asset record and create a Care Registered Device record that looks up to the Asset record and then looks up to the Account record for the Patient
- E. Create a custom field on the EHR_MedicalDevices with a formula that returns the information to display on patient card

Correct Answer: D

Section:

Explanation:

To display device information on a patient card, an administrator can create an Asset record and create a Care Registered Device record that looks up to the Asset record and then looks up to the Account record for the Patient. Asset records represent devices that are owned by patients or members. Care Registered Device records link assets to patients or members and store information such as device type, status, serial number, and manufacturer. Creating custom fields on other objects such as EHR_Patient, EHR_DeviceRequest, FilterCondition_c, or EHR_MedicalDevices will not display device information on a patient card.

QUESTION 82

While not every component or attribute within Health Cloud is customizable, which three of the following components are customizable within Health Cloud? (Choose three.)

- A. Custom label
- B. HER data
- C. Patient Card
- D. Timeline
- E. Life Events

Correct Answer: A, C, D

Section:

Explanation:

Custom label (A), Patient Card, and Timeline (D) are components that are customizable within Health Cloud. EHR data (B) is not a component, but a type of data that can be integrated with Health Cloud. Life Events (E) is not a customizable component, but a standard object in Health Cloud.

QUESTION 83

Which Salesforce product allows encryption of Protected Health Information (PHI) data at rest to enhance Health Cloud?

- A. Tableau CRM
- B. Service Cloud
- C. Shield
- D. Health Cloud

Correct Answer: C

Section:

Explanation:

Shield is the Salesforce product that allows encryption of Protected Health Information (PHI) data at rest to enhance Health Cloud. Tableau CRM (A), Service Cloud (B), and Health Cloud (D) are not products that provide encryption capabilities.

QUESTION 84

Which three options explain why the new clinical data model in Health Cloud is labeled as FHIR aligned and not FHIR compliant? (Choose three)

- A. Some entities have additional non-FHIR attributes to increase the usability of the data within Salesforce.
- B. The cardinality of a few attributes has been changed (e.g. in picklist scenarios)
- C. Not all attributes in a given FHIR resource may be supported.

- D. It does not utilize the latest FHIR R4 standards.
- E. It only aligns with FHIR DSTU2 specs.

Correct Answer: A, B, C

Section:

Explanation:

Some entities have additional non-FHIR attributes to increase the usability of the data within Salesforce (A), the cardinality of a few attributes has been changed (e.g. in picklist scenarios) (B), and not all attributes in a given FHIR resource may be supported are three options that explain why the new clinical data model in Health Cloud is labeled as FHIR aligned and not FHIR compliant. It does utilize the latest FHIR R4 standards (D), so this is not a reason for being FHIR aligned. It aligns with both FHIR DSTU2 and FHIR R4 specs (E), so this is not a reason for being FHIR aligned either.

QUESTION 85

Which three statements about the patient timeline view are true? (Choose three.)

- A. The patient timeline can be used in any Salesforce application.
- B. Events can be specified to appear when the Health Cloud home page first loads.
- C. The patient timeline is a Health Cloud Empower component.
- D. The patient timeline supports standard and custom objects.
- E. Filters can be used to limit the number of records shown in the patient timeline.

Correct Answer: B, D, E

Section:

Explanation:

Events can be specified to appear when the Health Cloud home page first loads (B), the patient timeline supports standard and custom objects (D), and filters can be used to limit the number of records shown in the patient timeline (E) are three statements that are true about the patient timeline view. The patient timeline cannot be used in any Salesforce application (A), as it is specific to Health Cloud. The patient timeline is not a Health Cloud Empower component, but a standard component in Health Cloud.

QUESTION 86

An Health Cloud administrator has setup risk recalculation by setting the recalculate flag to true, but is not seeing the recalculation score for the patient. Which of the following is mostly likely the reason why the recalculation score for the patient is not displaying?

- A. CMS risk scores cannot be recalculated in Health Cloud.
- B. CMS risk scores should be recalculated using only third party APIs.
- C. Risk scores are recalculated only for patients that are affiliated with a Care Program.
- D. Risk scores can only be calculated using the CMS recalculation API.

Correct Answer: C

Section:

Explanation:

Risk scores are recalculated only for patients that are affiliated with a Care Program is the most likely reason why the recalculation score for the patient is not displaying. CMS risk scores can be recalculated in Health Cloud (A), so this is not a reason for the score not displaying. CMS risk scores can be recalculated using both third party APIs and Salesforce APIs (B), so this is not a reason for the score not displaying. Risk scores can be calculated using both the CMS recalculation API and other methods (D), so this is not a reason for the score not displaying.

QUESTION 87

Which three are steps required to configure Health Cloud? (Choose three.)

- A. Enable the option for contacts to relate to multiple accounts.
- B. Install the Health Cloud Managed Package.
- C. Verify that Chatter Is enabled.

- D. Configure the console view.
- E. Install Health Cloud Unmanaged Packages.

Correct Answer: A, B, D

Section:

Explanation:

To configure Health Cloud, the following steps are required¹:

Enable the option for contacts to relate to multiple accounts. This feature allows contacts to be associated with more than one account, which is essential for modeling complex relationships in healthcare.

Install the Health Cloud Managed Package. This package contains the core objects, fields, tabs, components, and other elements that make up Health Cloud.

Configure the console view. This step involves customizing the Health Cloud console app to suit your needs and preferences. You can add or remove tabs, components, page layouts, and other features to optimize your user experience.

Verify that Chatter is enabled. Chatter is a collaboration tool that allows users to communicate and share information within Health Cloud. Chatter is enabled by default in most orgs, but you can check your settings to make sure.

Install Health Cloud Unmanaged Packages. These packages are optional and provide additional functionality for specific use cases, such as utilization management, care programs, or provider search.

QUESTION 88

In which three ways does Health Cloud meet compliance and regulatory requirements? (Choose three.)

- A. Health Cloud helps HIS organization achieve HIPAA compliance
- B. Health Cloud is HIPAA certified
- C. Health Cloud is HL7 compliant
- D. Health Cloud is HITRUST certified
- E. Health Cloud is GDPR certified

Correct Answer: A, C, D

Section:

Explanation:

Health Cloud meets compliance and regulatory requirements in the following ways²:

Health Cloud helps healthcare organizations achieve HIPAA compliance. HIPAA is a US law that protects the privacy and security of patient health information. Health Cloud offers various features and tools to help customers comply with HIPAA, such as encryption, audit trails, data masking, and consent management. Customers who want to use Health Cloud for HIPAA purposes can sign a Business Associate Addendum (BAA) with Salesforce.

Health Cloud is HL7 compliant. HL7 is a set of standards for exchanging health information electronically. Health Cloud supports HL7 FHIR (Fast Healthcare Interoperability Resources), which is a modern specification for representing and sharing health data. Health Cloud allows customers to integrate with external systems that use FHIR APIs and access FHIR resources within Salesforce.

Health Cloud is HITRUST certified. HITRUST is a framework that provides a comprehensive and flexible approach to security and privacy in the healthcare industry. HITRUST certification demonstrates that an organization meets the highest standards of data protection and compliance. Health Cloud has achieved HITRUST CSF certification for its core services and features.

Health Cloud is not HIPAA certified or GDPR certified. HIPAA certification does not exist as a formal process or accreditation. HIPAA compliance is a shared responsibility between Salesforce and its customers, and each party must implement appropriate safeguards and policies to protect patient data³. GDPR is a European law that regulates the processing of personal data of individuals in the EU. GDPR compliance depends on various factors, such as the type and purpose of data processing, the location of data subjects and processors, and the rights and obligations of data controllers⁴. Salesforce provides various tools and resources to help customers comply with GDPR, but it does not certify Health Cloud as GDPR compliant.

QUESTION 89

When setting up Intelligent Sales, which three types of records should an administrator create for a Field Sales Agent before Visit records can be created? (Choose three.)

- A. Contacts
- B. Opportunities
- C. Locations
- D. Accounts
- E. Assets



Correct Answer: A, C, E

Section:

Explanation:

To create Visit records for a Field Sales Agent using Intelligent Sales, the administrator must create Contacts, Locations, and Assets records for the agent. Contacts are the people that the agent visits or interacts with during their sales cycle. Locations are the places where the agent conducts their visits or activities. Assets are the products or devices that the agent sells or services during their visits. Opportunities and Accounts are not required for creating Visit records using Intelligent Sales.

QUESTION 90

A payer needs to manage requests for concurrent review of prior authorizations within Health Cloud and wants to use out-of-the-box record types and page layouts. However, the payer's Salesforce administrator does not see any preconfigured record types or page layouts for prior authorizations in the payer's Salesforce org. What should a consultant recommend to the Salesforce administrator to expedite implementation?

- A. Install the Health Cloud Claims unmanaged package.
- B. Build custom page layouts and record types to support the requirement.
- C. Install the Health Cloud Care Request Extensions package.
- D. Install an AppExchange prior authorization package.

Correct Answer: C

Section:

Explanation:

The Health Cloud Care Request Extensions package provides out-of-the-box record types and page layouts for prior authorizations, as well as other features for managing care requests1.

QUESTION 91

An administrator for Bloomington Caregivers has added an Enhanced Timeline to an existing Patient Lightning page showing patient interactions, including records from a custom object developed to track caregiver preferences. What else should the administrator complete post deployment of the enhanced timeline?

- A. Assign the users permissions to be able to view the Timeline before adding it to the Timeline component.
- B. Add the Timeline component to the Patient Lightning page and activate the Timeline.
- C. Add the Timeline component to the Patient Lightning page and select the Timeline.
- D. Add the custom object to the Timeline after deployment, then add it to the Timeline component.

Correct Answer: D

Section:

Explanation:

The administrator needs to add the custom object to the Timeline after deployment, then add it to the Timeline component. This will allow the custom object records to be displayed on the Enhanced Timeline2.

QUESTION 92

Prior to go-live for Bloomington Caregivers, a consultant loads the future system users into Salesforce.

Which two permission set licenses should the consultant assign to the users to give them access to Health Cloud?

- A. Health Cloud Foundation permission set license
- B. Health Cloud permission set license
- C. Health Cloud Standard permission set license
- D. Health Cloud Platform permission set license

Correct Answer: B, C

Section:

Explanation:

The users need both the Health Cloud permission set license and the Health Cloud Standard permission set license to access Health Cloud features. The Health Cloud Foundation permission set license is for users who only need access to the Health Cloud data model, and the Health Cloud Platform permission set license is for users who need access to the Health Cloud Lightning components.

QUESTION 93

A healthcare provider with multiple clinics and specialties is struggling to manage its appointment scheduling process efficiently. Patients are experiencing long wait times on the phone and want to leverage self-service options.

Which three Health Cloud capabilities should a consultant recommend configuring to provide a solution to improve patient satisfaction?

- A. Intelligent Appointment Management
- B. Intelligent Form Reader
- C. Provider Search
- D. Assessments and Recommendations
- E. Experience Cloud for Health Cloud

Correct Answer: A, C, E

Section:

Explanation:

A is correct because Intelligent Appointment Management (IAM) for Health Cloud helps patients schedule appointments through the channel of their choice: agent-assisted or self-service. IAM aggregates multiple scheduling engines, such as Salesforce Scheduler or Electronic Health Record (EHR) scheduling engines, or both, so that schedulers and patients can see all available appointments in one place.

B is incorrect because Intelligent Form Reader is not a Health Cloud capability, but a Salesforce Platform capability that allows users to extract data from forms and documents using artificial intelligence.

C is correct because Provider Search helps patients find and connect with care providers that match their needs and preferences. Provider Search allows patients to search for providers by various criteria, such as name, location, specialty, availability, and ratings.

D is incorrect because Assessments and Recommendations are not Health Cloud capabilities that directly improve patient satisfaction with appointment scheduling. Assessments and Recommendations are tools that help users gather information and provide guidance for patients based on their responses.

E is correct because Experience Cloud for Health Cloud enables patients to schedule their own appointments using a self-service portal or website. Experience Cloud for Health Cloud provides a prebuilt template that integrates with IAM and Provider Search to allow patients to book appointments online.

QUESTION 94

How should a consultant at a large provider system model a patient in Health Cloud?

- A. Configure Account
- B. Leverage Contact-Contact
- C. Configure Contact
- D. Leverage Person Account

Correct Answer: D

Section:

Explanation:

D is correct because leveraging Person Account is the recommended way to model a patient in Health Cloud. A Person Account is a special type of account that combines the attributes of an account and a contact. It allows users to store information about individual people, such as name, address, phone number, email, and health details. Health Cloud uses Person Accounts to represent patients and members, and to enable various features and functionality, such as household data model, clinical data model, care management, and provider network management.

QUESTION 95

Bloomington Caregivers is Implementing Health Cloud to streamline the process to register patients to care programs while capturing their consent. The company plans to leverage out-of-the-box Health Cloud features.

Which Health Cloud feature should a consultant recommend the company use in this scenario?

- A. Care Plan Enrollment Flow
- B. Program Enrollment Flow

- C. Enrollment Consent OmmScript
- D. Program Eligibility OmniScript

Correct Answer: B

Section:

Explanation:

B is correct because Program Enrollment Flow is the out-of-the-box Health Cloud feature that helps users to register patients to care programs while capturing their consent. Program Enrollment Flow is a prebuilt flow template that guides users through the steps of selecting a program, adding related records, and obtaining consent from the patient. The flow also creates a care plan for the patient based on the program template.

QUESTION 96

A customer that already has Service Cloud is onboarding a new business unit, which needs to use Health Cloud. Which three organization-wide default settings should an administrator change to ensure the original business unit that leverages Service Cloud does not have visibility into protected health information (PHI)?

- A. Set Person Accounts to Private.
- B. Set Contact to Controlled by Parent.
- C. Set related clinical objects to Controlled by Parent or Private.
- D. Set Health Details to Controlled by Parent or Private.
- E. Set Account and Contract to Private.

Correct Answer: B, C, E

Section:

Explanation:

A is incorrect because setting Person Accounts to Private is not a valid organization-wide default setting. Person Accounts inherit their sharing settings from Accounts and Contacts.

B is correct because setting Contact to Controlled by Parent ensures that the original business unit that leverages Service Cloud does not have visibility into protected health information (PHI) stored in Contact records. This setting means that the access level for Contact records depends on the access level for their parent Account records.

C is correct because setting related clinical objects to Controlled by Parent or Private ensures that the original business unit that leverages Service Cloud does not have visibility into protected health information (PHI) stored in clinical objects, such as Allergy, Diagnosis, Medication Order, and Procedure Order. These objects are related to either Account or Contact objects, and their sharing settings should match or be more restrictive than their parent objects.

D is incorrect because setting Health Details to Controlled by Parent or Private is not a valid organization-wide default setting. Health Details is a custom object that stores health information for patients and members. It is related to the Person Account object, and its sharing settings are controlled by its parent object.

E is correct because setting Account and Contract to Private ensures that the original business unit that leverages Service Cloud does not have visibility into protected health information (PHI) stored in Account and Contract records. This setting means that users can only access the records that they own or are explicitly shared with them.

QUESTION 97

A provider is looking to view a patient's insurance coverage, including co-pay and deductible information, prior to their appointment. Using Health Cloud, which two steps should a consultant take to access this information in the Benefit Verification component?

- A. Configure the Connection Label with the source systems API details
- B. Create a new record for the HCBenVerConnect custom setting
- C. Configure the link to the clearinghouses endpoint using a Uniform Resource Identifier (URI) path.
- D. Create a named credential to support authenticated callouts.

Correct Answer: B, D

Section:

Explanation:

B is correct because creating a new record for the HCBenVerConnect custom setting is required to access the Benefit Verification component in Health Cloud. The HCBenVerConnect custom setting stores the configuration details for the connection to the external benefit service that provides the patient's insurance coverage information.

D is correct because creating a named credential to support authenticated callouts is required to access the Benefit Verification component in Health Cloud. A named credential specifies the URL of the external benefit service and the authentication protocol and credentials to use for callouts to that service.

QUESTION 98

A provider wants its care coordinators to track a series of problems, goals, and interventions (PGIs) related to a patient's care in a repeatable, efficient way. Which approach should a consultant recommend?

- A. Configure an action plan template with tasks for each PGI.
- B. Coach the care coordinators to quickly create tasks using a checklist.
- C. Create care program templates and assign them to patients.
- D. Define a PGI Library and care plan templates using the library.

Correct Answer: D

Section:

Explanation:

The best approach is to define a PGI Library and care plan templates using the library. This will enable the care coordinators to track PGIs in a standardized way, and also leverage best practices and evidence-based guidelines.

QUESTION 99

How should a consultant recommend modeling a physician's locations of service, when the physician practices at clinics?

- A. Healthcare Practitioner Facility
- B. Healthcare Provider Relationship
- C. Healthcare Taxonomy
- D. Account Contact Relationship

Correct Answer: A

Section:

Explanation:

The Healthcare Practitioner Facility object is used to model a physician's locations of service, such as clinics or hospitals. It stores information about the facility name, address, phone number, and type.

QUESTION 100

A customer wants to view a patient's health conditions and clinical encounters as a sequence on the patient's Person Account page. What should a consultant do to achieve this using the Enhanced Timeline functionality?

- A. Clone the HCTimeline FlexCard for customization.
- B. Add a record to the HealthCloudTimelineConfig custom setting.
- C. Create a new Timeline View Configuration record.
- D. Create a new Timeline record within Setup.

Correct Answer: C

Section:

Explanation:

To use the Enhanced Timeline functionality, a consultant needs to create a new Timeline View Configuration record and specify the object, fields, and filters for the timeline view. This allows the customer to view a patient's health conditions and clinical encounters as a sequence on the patient's Person Account page. Cloning the HCTimeline FlexCard, adding a record to the HealthCloudTimelineConfig custom setting, or creating a new Timeline record within Setup are not required for this functionality¹.

QUESTION 101

Bloomington Caregivers has been using the legacy Health Cloud electronic health record (EHR) data model and wants to move to the FHIR R4 clinical data model.



Which two steps should a consultant take to complete this?

- A. Use the Health Cloud Clinical Transition tool.
- B. Leverage the Health Cloud FHIR API.
- C. Use Data Loader to load the respective data.
- D. Map objects and fields to the target objects.

Correct Answer: B, D

Section:

Explanation:

To migrate from the legacy Health Cloud EHR data model to the FHIR R4 clinical data model, a consultant needs to leverage the Health Cloud FHIR API and map objects and fields to the target objects. The Health Cloud FHIR API enables interoperability between Health Cloud and external systems that use FHIR standards. The mapping process ensures that the data is transformed and loaded into the correct objects and fields in Health Cloud. Using the Health Cloud Clinical Transition tool, using Data Loader to load the respective data, or creating an Apex class and leveraging Intelligent Appointment Management are not recommended steps for this migration².

QUESTION 102

A provider uses an external appointment management system. The default solution provided by Health Cloud is not viable for the provider. How should a consultant implement a robust system for the provider?

- A. Use an electronic health record (EHR) routing system to book the appointment in Health Cloud.
- B. Create a custom FHIR Adapter to make calls to Health Cloud.
- C. Use a package created by ISV (Independent Software Vendor) for Health Cloud.
- D. Create an Apex class and leverage Intelligent Appointment Management.

Correct Answer: C

Section:

Explanation:

To implement a robust appointment management system for a provider that uses an external system, a consultant should use a package created by ISV (Independent Software Vendor) for Health Cloud. This would allow the provider to leverage existing solutions that are integrated with Health Cloud and offer features such as scheduling, reminders, cancellations, rescheduling, and confirmations. Using an EHR routing system, creating a custom FHIR Adapter, or creating an Apex class are not viable options for this requirement³.

QUESTION 103

A payer needs to enable its agents to answer questions from members regarding their benefits coverage. The payer has already set up the required objects to be populated with the necessary information through an integration.

Which Health Cloud component should a consultant recommend for the Member record page?

- A. Benefits Verification
- B. Eligibility Validation
- C. Benefits Coverage
- D. Coverage Confirmation

Correct Answer: C

Section:

Explanation:

To enable agents to answer questions from members regarding their benefits coverage, a consultant should recommend the Benefits Coverage component for the Member record page. This component displays information such as plan name, effective date, termination date, deductible amount, coinsurance percentage, copay amount, and out-of-pocket maximum for each benefit plan that the member is enrolled in. Benefits Verification, Eligibility Validation, or Coverage Confirmation are not components that exist in Health Cloud.

QUESTION 104

Care managers at Bloomington Caregivers call patients after they are discharged from a hospital to ask a series of questions, which the care manager enters into Health Cloud. The patient is then automatically assigned a



personalized care plan based on the answers they provided.

Which two capabilities should a consultant leverage together to fulfill this requirement?

- A. Discovery Framework
- B. Integrated Care Management
- C. Care Programs
- D. Salesforce Surveys

Correct Answer: A, D

Section:

Explanation:

To enable care managers to call patients after they are discharged from a hospital and assign them personalized care plans based on their answers, a consultant should leverage Discovery Framework and Salesforce Surveys together. Discovery Framework is a feature that allows care managers to create assessments with questions and answers that are linked to care plan templates. Salesforce Surveys is a tool that allows care managers to create and send surveys to patients and capture their responses in Health Cloud. By using these two capabilities together, care managers can automate the process of assigning care plans based on patient responses.

QUESTION 105

Bloomington Caregivers wants to show its end users highlighted information about its providers that work at specific facilities, in one place. This would include provider contact details and the provider's specialty at a given facility. Which Health Cloud feature should a consultant implement to fulfill this requirement?

- A. Provider Relationship Card
- B. Provider Network Management
- C. Facility Relationship Center
- D. HCProvider360 FlexCard

Correct Answer: A

Section:

Explanation:

To show end users highlighted information about providers that work at specific facilities, a consultant should implement the Provider Relationship Card feature. This feature allows end users to view information such as provider name, contact details, specialty, role, facility name, and relationship status on a card-like interface on the Facility record page. Provider Network Management, Facility Relationship Center, or HCProvider360 FlexCard are not features that can fulfill this requirement.

QUESTION 106

A customer wants to move its existing Patient-Reported Outcome Measures (PROMs) surveys to Health Cloud. It requires a solution that allows for question banks and version control for this standardized survey. Which solution should a consultant recommend?

- A. Salesforce Feedback Management
- B. Health Cloud Forms
- C. Discovery Framework
- D. Salesforce Surveys

Correct Answer: D

Section:

Explanation:

Salesforce Surveys is the best solution for moving existing PROMs surveys to Health Cloud. It allows for question banks and version control for this standardized survey.

QUESTION 107

A payer needs to implement a program to address the rising healthcare expenses and ensure affordable care for its members. The payer aims to strike a balance between quality care and managing the cost of care effectively by streamlining its approval processes for care requests.



Which capability in Health Cloud helps the payer accomplish this?

- A. Provider Network Management
- B. Intelligent Appointment Management
- C. Utilization Management
- D. Integrated Care Management

Correct Answer: C

Section:

Explanation:

Utilization Management is the capability in Health Cloud that helps the payer accomplish its goal of balancing quality care and managing the cost of care effectively. It enables the payer to streamline its approval processes for care requests using predefined rules and workflows.

QUESTION 108

Bloomington Caregivers is implementing Health Cloud to reduce manual processes for its Contact Center agents. To help streamline caller authentication, the company plans to leverage out-of-the-box Health Cloud features. Which Health Cloud feature should a consultant recommend the company use in this scenario?

- A. Customer Identity OmniScript Templates
- B. Reusable Verification FlexCards
- C. Verify Customer Identity Process Flow
- D. Identity Verification Flow Templates

Correct Answer: D

Section:

Explanation:

To help streamline caller authentication for Contact Center agents, a consultant should recommend Bloomington Caregivers use the Identity Verification Flow Templates feature in Health Cloud. This feature allows agents to launch a flow from the utility bar or a record page to verify a caller's identity before processing their requests involving sensitive information. The flow prompts the agent to search for the caller in Health Cloud, select a reason for the call, ask verification questions based on predefined rules, and capture engagement details. Customer Identity OmniScript Templates, Reusable Verification FlexCards, or Verify Customer Identity Process Flow are not features that exist in Health Cloud.

QUESTION 109

Bloomington Caregivers uses Health Cloud and has an integration setup with an external payer system.

Which three business level APIs should a consultant recommend to help the payer organization electronically receive requests for services?

- A. Admission, Discharge, and Transfer (ADT)
- B. Prior Authorization
- C. Care Services
- D. Benefit Verification
- E. Referral Request

Correct Answer: B, C, E

Section:

Explanation:

To help the payer organization electronically receive requests for services from Bloomington Caregivers, a consultant should recommend the following business level APIs:

Prior Authorization API: This API allows Bloomington Caregivers to create requests for prior authorization for services that require approval from the payer organization. The API also allows Bloomington Caregivers to update or cancel existing requests or query the status of requests⁹.

Care Services API: This API allows Bloomington Caregivers to create requests for care services that are covered by the payer organization's benefit plans. The API also allows Bloomington Caregivers to update or cancel existing requests or query the status of requests¹⁰.

Referral Request API: This API allows Bloomington Caregivers to create requests for referrals to other providers that are part of the payer organization's network. The API also allows Bloomington Caregivers to update or cancel existing requests or query the status of requests¹¹. Admission, Discharge, and Transfer (ADT) API or Benefit Verification API are not business level APIs that can fulfill this requirement.

QUESTION 110

A pharma company wants to leverage Provider Search to help patients find nearby infusion clinics. Which Health Cloud tool should a consultant leverage to drive performance and scalability?

- A. Flow for Industries
- B. Pipeline Analytics
- C. Business Rules Engine
- D. Data Processing Engine

Correct Answer: D

Section:

Explanation:

To drive performance and scalability for Provider Search, a consultant should leverage the Data Processing Engine tool in Health Cloud. This tool allows pharma companies to map and transform the source data from the Provider Data Model into a searchable object called Care Provider Searchable Field. The Data Processing Engine also syncs the data with the Care Provider Searchable Field object once a day or manually as needed¹². This process reduces the search time and improves the accuracy of the results. Flow for Industries, Pipeline Analytics, or Business Rules Engine are not tools that can fulfill this requirement.

QUESTION 111

A clinic is looking to manage its associated physicians within Health Cloud.

Which two objects support Salesforce's recommended approach to model the doctors in the clinic's Health Cloud org?

- A. Person Account
- B. Contact
- C. Healthcare Provider
- D. Healthcare Practitioner



Correct Answer: B, D

Section:

Explanation:

The two objects that support Salesforce's recommended approach to model the doctors in the clinic's Health Cloud org are Contact and Healthcare Practitioner. Contact is used to store the personal information of the doctor, such as name, phone, and email. Healthcare Practitioner is used to store the professional information of the doctor, such as specialty, license, and credentials.

QUESTION 112

A pharma company wants the ability to:

- * Upload a patient's insurance card, including automatic Member Plan record creation
- * Run a benefits verification check
- * Schedule on behalf of the patient with a provider

Which set of Health Cloud capabilities should enable the company to build this business process?

- A. Intelligent Document Automation, Intelligent Appointment Management, Intelligent Document Reader, Benefits Verification
- B. Virtual Care, Intelligent Appointment Management, Intelligent Document Automation, Intelligent Document Reader
- C. Intelligent Appointment Management, Benefits Verification, Intelligent Document Automation, eFax Integration
- D. Utilization Management, Care Management, Intelligent Document Automation, Intelligent Appointment Management

Correct Answer: A

Section:

Explanation:

The set of Health Cloud capabilities that should enable the company to build this business process are Intelligent Document Automation, Intelligent Appointment Management, Intelligent Document Reader, and Benefits Verification. Intelligent Document Automation allows the company to upload a patient's insurance card and automatically create a Member Plan record. Intelligent Appointment Management allows the company to schedule on behalf of the patient with a provider. Intelligent Document Reader allows the company to extract data from the insurance card and populate the Member Plan fields. Benefits Verification allows the company to run a benefits verification check using a third-party service.

QUESTION 113

An administrator for Salesforce Health Cloud wants to ensure that the files in their full sandbox instance are encrypted. Which encryption solution supports the encryption of files in this scenario?

- A. Industry Data Security
- B. Salesforce Data Mask
- C. Classic Encryption
- D. Salesforce Shield

Correct Answer: D

Section:

Explanation:

Salesforce Shield is the encryption solution that supports the encryption of files in this scenario. Salesforce Shield provides platform encryption, which allows the administrator to encrypt files and attachments stored in Salesforce. Platform encryption supports full sandbox instances and complies with data protection regulations

QUESTION 114

Bloomington Caregivers currently has the organization-wide default controlling patient access set to Private. A new respiratory therapist is being added to support a patient at Bloomington Caregivers, and the therapist needs access to the patient's data

a. How should an administrator grant access to the respiratory therapist using out-of-the-box Health Cloud features?

- A. Add the respiratory therapist to the patient's Account Team and default access will be automatically granted.
- B. Add the respiratory therapist to the patient's Care Team and default access will be automatically granted.
- C. Add the respiratory therapist to the patient's Account Team and grant Read or Read/Write access as needed.
- D. Add the respiratory therapist to the patient's Care Team and grant Read or Read/Write access as needed.

Correct Answer: D

Section:

Explanation:

The administrator should add the respiratory therapist to the patient's Care Team and grant Read or Read/Write access as needed. This is the out-of-the-box Health Cloud feature that allows the administrator to share patient data with other users who are involved in the patient's care. The Care Team is a group of users who can collaborate and communicate on a patient's health record.

QUESTION 115

Bloomington Caregivers has decided to enable Integrated Care Management so that its end users can leverage Health Cloud Assessments. Administrators must now configure their org to be able to use Assessments. Which three steps should the administrator take as part of the org setup to enable Assessments?

- A. Enable Discovery Framework in Setup.
- B. Add the Assessment component to the Patient page.
- C. Download and Install OmniStudio.
- D. Update sharing settings in Setup.
- E. Enable users to view and complete Assessments.

Correct Answer: A, B, E

Section:

Explanation:

The three steps that the administrator should take as part of the org setup to enable Assessments are enabling Discovery Framework in Setup, adding the Assessment component to the Patient page, and enabling users to view and complete Assessments. Discovery Framework is a feature that allows the administrator to create and manage assessments in Health Cloud. The Assessment component is a Lightning component that displays the assessments assigned to a patient on their record page. Enabling users to view and complete Assessments requires assigning them the appropriate permission sets and page layouts.

QUESTION 116

Bloomington Caregivers would like to bulk upload information to support Provider Search and Provider Relationship Card. What are the two best practice recommendations to upload this information?

- A. Use Provider Relationship API.
- B. Use Composite API Request.
- C. Use Provider Card API.
- D. Use Data Loader.

Correct Answer: B, D

Section:

Explanation:

The two best practice recommendations to upload information to support Provider Search and Provider Relationship Card are using Composite API Request and Data Loader. Composite API Request is a REST API resource that allows the administrator to execute multiple requests in a single call, which reduces the number of API calls and improves performance. Data Loader is a tool that allows the administrator to insert, update, delete, or export data from Salesforce objects in bulk.

QUESTION 117

A customer is implementing Intelligent Appointment Management in Health Cloud to eliminate swivel chair to other scheduling systems. Which two connectivity options should a consultant leverage as the scheduling engine?

- A. Business Rules Engine
- B. Electronic Health Record (EHR) System
- C. Salesforce Scheduler
- D. Scheduler for Industries



Correct Answer: B, C

Section:

Explanation:

The two connectivity options that a consultant should leverage as the scheduling engine for Intelligent Appointment Management in Health Cloud are Electronic Health Record (EHR) System and Salesforce Scheduler. An EHR System is an external system that stores and manages clinical data and appointments for patients or members. Salesforce Scheduler is a native Salesforce feature that allows users to schedule appointments with customers or prospects.

QUESTION 118

Bloomington Caregivers has set up Health Cloud and needs to analyze patient referrals through Salesforce reports and dashboards. Which Health Cloud unmanaged package should a consultant recommend to deliver a prebuilt dashboard and reports?

- A. Health Cloud Network Management Reports
- B. Health Cloud Reports for Patient Referral Management ...
- C. Health Cloud Referral Management Reports
- D. Health Cloud Member Referral Management Reports

Correct Answer: B

Section:

Explanation:

B is correct because Health Cloud Reports for Patient Referral Management is an unmanaged package that delivers a prebuilt dashboard and reports for analyzing patient referrals. The dashboard shows metrics such as referral volume, referral status, referral source, and referral outcome. The reports provide more details on each metric and allow users to filter by various criteria.

QUESTION 119

A MedTech company needs to manage its run rate business to ensure contract compliance for its customers. Which two features of Health Cloud should a consultant recommend the company use?

- A. Remote Device Monitoring
- B. MedTech Accelerator
- C. Advanced Account Forecasting
- D. Sales Agreements

Correct Answer: A, D

Section:

Explanation:

A is correct because Remote Device Monitoring can help the MedTech company to manage its run rate business by enabling them to monitor the performance and usage of their devices remotely, and alert them of any issues or anomalies that may affect contract compliance.

B is incorrect because MedTech Accelerator is not a feature of Health Cloud, but a program that provides funding and mentorship for early-stage medical device and health technology companies.

C is incorrect because Advanced Account Forecasting is not a feature of Health Cloud, but a feature of Sales Cloud that helps sales teams to predict their revenue and quota attainment.

D is correct because Sales Agreements can help the MedTech company to manage its run rate business by allowing them to create contracts that commit the customer to buy products in a specific quantity or for a specific amount over time, and track the fulfillment and invoicing of those contracts.

QUESTION 120

Bloomington Caregivers is implementing Health Cloud for managing the healthcare data of children under the age of 13.

Which three considerations should the company take into account to ensure compliance with the Children's Online Privacy Protection Act (COPPA)?

- A. Obtaining verified parental consent before collecting and storing any personal information of children
- B. Disclosing the organization's privacy policy to parents and obtaining their consent
- C. Ensuring that Bloomington Caregivers' system implementation partner has met all COPPA regulations during the build phase
- D. Implementing appropriate security measures to safeguard children's personal information
- E. Ensuring information collected about children is protected with at rest and in-transit encryption

Correct Answer: A, B, D

Section:

Explanation:

A is correct because obtaining verified parental consent before collecting and storing any personal information of children is one of the main requirements of COPPA. The consent must be obtained in a way that ensures that the person providing consent is the child's parent or legal guardian, such as using a credit card, digital signature, or video conference.

B is correct because disclosing the organization's privacy policy to parents and obtaining their consent is another requirement of COPPA. The privacy policy must explain what information the organization collects from children, how it uses and discloses it, and what rights parents have to review or delete their children's information.

C is incorrect because ensuring that Bloomington Caregivers' system implementation partner has met all COPPA regulations during the build phase is not a consideration for the company, but for the partner. The company is ultimately responsible for complying with COPPA, regardless of who builds their system.

D is correct because implementing appropriate security measures to safeguard children's personal information is another requirement of COPPA. The organization must establish and maintain reasonable procedures to protect the confidentiality, security, and integrity of personal information collected from children.

QUESTION 121

A pharmaceutical company is looking to support patients throughout their clinical journey. One of the factors the company needs to track is the socioeconomic and cultural barriers that could hinder a patient's process. Which Health Cloud capability should a consultant implement to fulfill this requirement?

- A. Care Blockers
- B. Clinical Barriers
- C. Social Determinants of Health
- D. Utilization Management

Correct Answer: C

Section:

Explanation:

C is correct because Social Determinants of Health (SDOH) are the non-medical factors that influence health outcomes, such as socioeconomic and cultural barriers. Health Cloud provides a feature that allows users to capture and track SDOH data for patients, such as housing status, food security, transportation access, and education level. This feature can help the pharmaceutical company to support patients throughout their clinical journey by identifying and addressing their SDOH needs.

QUESTION 122

A consultant is working with an insurance provider to set up prior authorizations in Health Cloud. The provider requires a display of preauthorization outcomes from its external system which manages the end-to-end prior authorization process

Which solution is appropriate to meet this use case?

- A. Service Preauth and Preauth Detail
- B. Care Request and Care Request Item
- C. Plan Benefit and Plan Benefit Item
- D. Care Preauth and Care Preauth Item

Correct Answer: B

Section:

Explanation:

B is correct because Care Request and Care Request Item are the standard objects in Health Cloud that are used to set up prior authorizations. Care Request represents a request for authorization of a service or procedure, and Care Request Item represents a specific service or procedure within the request. These objects can be integrated with an external system that manages the end-to-end prior authorization process, and display the preauthorization outcomes from that system.

QUESTION 123

A payer is looking for a solution to recruit, credential, and onboard providers into its network. Which Health Cloud add-on should help the payer address these requirements?

- A. Provider Network Management
- B. Contact Center for Payers
- C. Provider Relationship Management
- D. Utilization Management

Correct Answer: C

Section:

Explanation:

C is correct because Provider Relationship Management is a Health Cloud add-on that helps payers to recruit, credential, and onboard providers into their network. Provider Relationship Management provides features and tools that allow payers to manage provider contracts, track provider performance, monitor provider satisfaction, and streamline provider communication.

QUESTION 124

A hospital system wants to track patient relationships to its cardiologist, primary care physician, and oncologist. Which object should a consultant recommend to implement?

- A. Contact-Contact Relationship
- B. Affiliation Relationship
- C. Healthcare Practitioner Facility
- D. Patient Provider Relationship

Correct Answer: D

Section:

Explanation:

D is correct because Patient Provider Relationship is the standard object in Health Cloud that is used to track patient relationships to healthcare practitioners, such as cardiologist, primary care physician, and oncologist. Patient Provider Relationship represents the association between a patient and a healthcare practitioner who provides care for the patient. This object can store information such as the practitioner's specialty, role, contact details, and relationship status.

QUESTION 125

A consultant is implementing Identity Verification for their customer's customer service representatives and needs to add a new search parameter.

Which record should the consultant configure to accomplish this?

- A. Linked Identity Search Detail
- B. Identity Verification Process Detail
- C. Verification Search Feature
- D. Identity Verification Parameter Item

Correct Answer: D

Section:

Explanation:

D is correct because Identity Verification Parameter Item is the record that defines the search parameters for identity verification. A consultant can create and configure Identity Verification Parameter Items to add new search parameters or modify existing ones.

QUESTION 126

A customer compliance department requires encryption at rest, notification of activities, and extensive field tracking. What are some key considerations and recommended practices for supporting compliance in Salesforce?

- A. Use Role Hierarchy to control data access, implement password policies for user accounts, and use IP Restrictions to limit access to trusted ^ networks
- B. Enable Salesforce Shield to monitor data access and usage, configure Data Classification for sensitive data, and use Event Monitoring to track user activity.
- C. Enable Field Audit Trail, implement encryption for sensitive data, and configure two-factor authentication for all users.
- D. Use the Salesforce Security Health Check to identify vulnerabilities, implement custom profiles and permission sets to control data access, and configure Data Loss Prevention policies to prevent data leakage.

Correct Answer: C

Section:

Explanation:

C is correct because enabling Field Audit Trail, implementing encryption for sensitive data, and configuring two-factor authentication for all users are some key considerations and recommended practices for supporting compliance in Salesforce. Field Audit Trail helps to track data changes and retain data history for up to 10 years. Encryption helps to protect data at rest from unauthorized access or theft. Two-factor authentication helps to strengthen user login security and prevent account compromise.

QUESTION 127

Bloomington Caregivers wants to ensure it maintains the privacy of its users' data by enabling data protection details for leads, contacts, and person accounts during the initial Health Cloud install and configuration.

Which entity should the administrator enable within Data Protection and Privacy for Health Cloud to work in this scenario?

- A. Fields
- B. Records
- C. Tasks
- D. Objects

Correct Answer: A

Section:

Explanation:

A is correct because enabling data protection details for fields is the entity that the administrator should enable within Data Protection and Privacy for Health Cloud to work in this scenario. Data protection details for fields

allow users to specify the data protection level and data classification for each field on leads, contacts, and person accounts. This helps to identify and protect sensitive data, such as protected health information (PHI), and comply with privacy regulations, such as General Data Protection Regulation (GDPR).

QUESTION 128

Bloomington Caregivers is looking to migrate from Service Cloud to Health Cloud to take advantage of the prebuilt healthcare features and functionality. Which three prerequisites should Bloomington Caregivers' administrators complete to successfully install the Health Cloud managed package in its org?

- A. Make data protection details available in records
- B. Enable person accounts from Setup.
- C. Enable Chatter settings from Setup.
- D. Enable contacts to relate to multiple accounts.
- E. Log a support case to have person accounts enabled

Correct Answer: B, C, D

Section:

Explanation:

B is correct because enabling person accounts from Setup is a prerequisite to install the Health Cloud managed package. Person accounts are a special type of account that combines the attributes of an account and a contact. Health Cloud uses person accounts to represent patients and members, and to enable various features and functionality, such as household data model, clinical data model, care management, and provider network management.

C is correct because enabling Chatter settings from Setup is a prerequisite to install the Health Cloud managed package. Chatter is a collaboration tool that allows users to communicate and share information with each other. Health Cloud uses Chatter to enable features such as care team collaboration, patient engagement, and social determinants of health.

D is correct because enabling contacts to relate to multiple accounts is a prerequisite to install the Health Cloud managed package. This feature allows users to create relationships between a contact and multiple accounts, and specify the role and status of each relationship. Health Cloud uses this feature to enable features such as actionable relationship center, patient provider relationship, and referral management.

A is incorrect because making data protection details available in records is not a prerequisite to install the Health Cloud managed package, but an optional step that can be done after the installation. Data protection details for records allow users to view and edit the data protection level and data classification for each record on leads, contacts, and person accounts.

E is incorrect because logging a support case to have person accounts enabled is not a prerequisite to install the Health Cloud managed package, but an alternative way to enable person accounts if they are not available in Setup. However, this method requires contacting Salesforce Customer Support and waiting for their response, which may take longer than enabling person accounts from Setup.

QUESTION 129

Bloomington Caregivers wants to use patient or member lists for its care coordinators in its current implementation. What is an important consideration when implementing this in Health Cloud?

- A. An administrator can create an override filter field on the person account.
- B. If a user cannot access a field used in a filter on a patient or member list, they will not be able to see the list
- C. An administrator can create lists or add records to existing lists from the Campaign object
- D. Filter logic for patient or member lists is controlled by formula fields on records.

Correct Answer: B

Section:

Explanation:

B is correct because if a user cannot access a field used in a filter on a patient or member list, they will not be able to see the list. This is because the filter criteria are applied to the user's query, and if the user does not have permission to view the field, the query will return no results. To avoid this issue, the administrator should ensure that the user has the appropriate field-level security settings for the fields used in the filter.