



HEALTH-CLOUD-ACCREDITED- PROFESSIONAL^{Q&As}

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QUESTION 1

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 Three)

- 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: ACE

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 (C) 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 2

Care Requests seek authorization from a health plan for drugs, services, and admissions. They can also contain request for review, appeals, complaints and grievances. Which Care Request review ensure that a member is getting the right care in timely and cost-effective way?

- A. Disposition Review
- B. Concurrent Review
- C. Care Review
- D. Preauthorization Review
- E. Retrospective Review

Correct Answer: B

Explanation: Concurrent review is a type of care request review that ensures that a member is getting the right care in a timely and cost-effective way. It involves reviewing the medical necessity and appropriateness of an ongoing service or admission. Disposition review, care review, preauthorization review, and retrospective review are not the correct terms for this type of review.

QUESTION 3



During set up a salesforce admin is unable to install the health cloud claims unmanaged package. What is the reason?

- A. The health cloud managed package is missing
- B. The health cloud permission set license is missing
- C. The administrator is not registered in AppExchange
- D. The administrator doesn't have health cloud license

Correct Answer: A

Explanation: According to the Salesforce documentation¹, to install the health cloud claims unmanaged package, you need to have the health cloud managed package installed first. The health cloud managed package contains the core objects, fields, tabs, apps, components, and more that are required for health cloud functionality. The health cloud claims unmanaged package is an extension that contains additional objects, fields, tabs, apps, components, and more that are specific to claims management¹.

QUESTION 4

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. Source system identifier
- B. Contacts
- C. Account
- D. Identifier

Correct Answer: A

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 5

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: ABC

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.

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