MB-230 Q&As

Microsoft Dynamics 365 Customer Service

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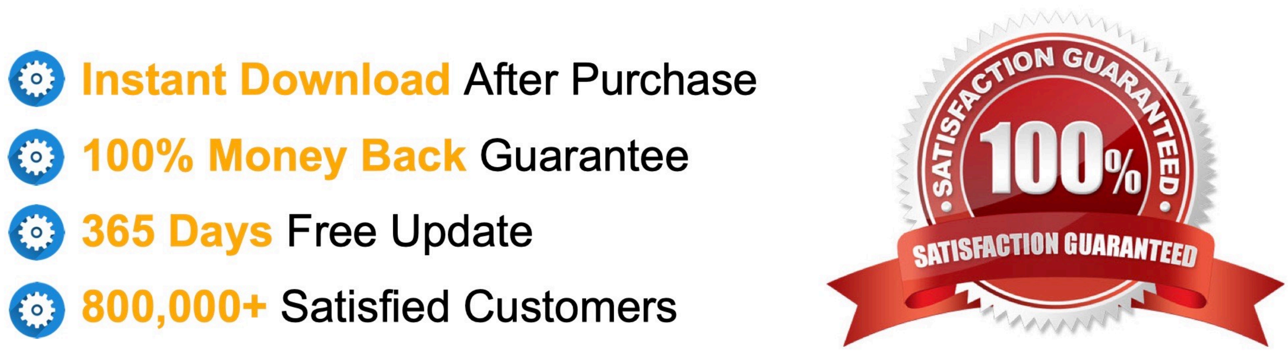

QUESTION 1

A company uses Dynamics 365 Customer Service. A client purchases a premium support package that allows six support incidents over two years.

You need to set up support entitlement enforcement.

Which three attributes should you configure? Each correct answer presents a part of the solution.

NOTE: Each correct selection is worth one point.

A. Specify the remaining item

B. Specify the total term

C. Specify the end date

D. Set the Restrict based on entitlement terms value

E. Specify the service-level agreement (SLA)

Correct Answer: BCD

Reference: https://docs.microsoft.com/en-us/dynamics365/customer-service/create-entitlement-define-support-terms-customer

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QUESTION 2

You are a Dynamics 365 Customer Service system administrator. You work with the Customer Service Hub application.

You need to enable entities for service-level agreements (SLAs).

For which entity can you enable SLAs?

A. Contract

B. Business unit

C. KPIs

D. Customer service schedule

E. Holiday schedule

F. Account

Correct Answer: F

Reference: https://docs.microsoft.com/en-us/dynamics365/customer-service/enable-entities-service-level-agreements

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QUESTION 3

You need to create the SLAs.

Which three SLAs should you create? Each correct answer presents part of the solution.

NOTE: Each correct selection is worth one point.

Case Study Title (Case Study):Case Study

This is a case study. Case studies are not timed separately. You can use as much exam time as you would like to complete each case. However, there may be additional case studies and sections on this exam. You must manage your time to ensure that you are able to complete all questions included on this exam in the time provided.

To answer the questions included in a case study, you will need to reference information that is provided in the case study. Case studies might contain exhibits and other resources that provide more information about the scenario that is described in the case study. Each question is independent of the other questions in this case study.

At the end of this case study, a review screen will appear. This screen allows you to review your answers and to make changes before you move to the next section of the exam. After you begin a new section, you cannot return to this section.

To start the case study To display the first question in this case study, click the Next button. Use the buttons in the left pane to explore the content of the case study before you answer the questions. Clicking these buttons displays information such as business requirements, existing environment, and problem statements. If the case study has an All Information tab, note that the information displayed is identical to the information displayed on the subsequent tabs. When you are ready to answer a question, click the Question button to return to the question.

Background

Humongous Insurance is contracted to process all insurance claims for a health facility that accepts the following types of health insurance:

1.

Health maintenance organization (HMO)

2.

Preferred-provider organization (PPO)

3.

Gold

Cases are classified as new claims, claim disputes, and follow-ups. Each insured person is entitled to open 25 new cases each calendar year.

Support representatives specialize by and process claims by insurance type.

Humongous Insurance currently accepts claims only by telephone. The call center is open from 06:00 GMT to 24:00 GMT daily. Call center staff work one of the following shifts: 06:00 GMT to 12:00 GMT, 12:00 GMT to 18:00 GMT, and 18:00 GMT to 24:00 GMT.

When a case is received by email, a staff member categorizes the case as email and closes the case immediately.

Current environment

1.

Humongous Insurance has three departments to handle claim types: HMO, PPO, and Gold.

2.

The company uses handwritten forms to send claims information to the correct department.

3.

Each department maintains a workbook to record calls received.

Requirements. Support desk

1.

Configure the system to track the number of insurance claims filed each year.

2.

Categorize claims by type as they are opened.

3.

Configure the system to track staff responsiveness to service-level agreements (SLAs).

4.

Ensure that business hours reflect the hours that support staff are scheduled.

Requirements. Case handling

1.

All new cases must be automatically placed into a queue based on insurance type after the type is selected.

2.

All insurance types need to be automatically moved to the proper queue when the subject is picked.

3.

All cases must be created and closed immediately when received.

4.

The status reason must be set to Email Sent or Phone Call.

5.

Information must be restricted by insurance and phone call type.

6.

Managers must be alerted when customers reach their limit of 25 cases for the year.

7.

Changes to cases must not be counted against entitlements until the case is closed.

Requirements. Disputes

1.

Claim disputes must be categorized as low priority.

2.

The status for all disputed cases must be set to Review by a Manager before a disputed case may be closed.

Requirements. Knowledge base

1.

A knowledge base must be used as a repository for all answers.

2.

Representatives must be able to search the knowledge base when opening a new case for similar claims.

3.

Representatives must be able to search across all entities at all times.

4.

Searches must check any field in the entity for matches in a single search.

5.

Searches must return results in a single list and sort the list so that the most relevant results appear at the top of the list.

6.

Representatives must be able to link the knowledge base to cases when applicable.

7.

Representatives must create a new knowledge base article if an answer is not found in the existing knowledge base.

8.

Representatives must be able to use SQL-like syntax to search the knowledge base.

Requirements. Service-level agreements

When a customer calls to open a claim, the company must respond to the caller within the following time frames:

Plan Response time

HMO 24 hours PPO 6 business hours Gold 1 business hour

Requirements. Alerts

1.

Cases must be flagged when they are past the SLA threshold.

2.

An email alert must be sent to the manager to indicate an SLA noncompliance.

3.

An email alert must be sent to representatives for SLA violations as follows: HMO 2 hours prior and PPO 1 hour prior.

4.

Send an email alert to support managers when disputes are ready to be closed.

5.

Send an email alert to customers when cases are closed.

Requirements. Issues

1.

The current process is all manual and not efficient.

2.

There is no easy way to determine whether the company is meeting its SLAs.

3.

Representatives are often inconsistent regarding how they handle customers and answer customer questions.

4.

There is no accountability for any of the representatives who take calls.

A. SLA with 24 hours as the failure time and no warning

B. SLA with 6 hours as the failure time and a one-hour warning

C. SLA with 6 hours as the failure time and no warning

D. SLA with one hour as the failure time and no warning

E. SLA with 24 hours as the failure time and a two-hour warning

Correct Answer: BDE

An email alert must be sent to representatives for SLA violations as follows: HMO 2 hours prior and PPO 1 hour prior.

QUESTION 4

You are employed as a system administrator for your company\\'s Dynamics 365 for Customer Service implementation.

You have been tasked with making sure that customer service representatives have the ability to add service-level agreements (SLAs) to a record manually.

You add the SLA field to the entity form.

Does the action achieve your objective?

A. Yes, it does

B. No, it does not

Correct Answer: A

Reference: https://docs.microsoft.com/en-us/dynamics365/customer-engagement/customer-service/define-service-level-agreements

QUESTION 5

HOTSPOT

A company uses Dynamics 365 Customer Service. The company installs Dynamics 365 Customer Service Insights.

The company wants to use dashboards to report phone calls and emails to monitor the productivity of representatives.

You need to perform the configuration.

Which configuration should you use? To answer, select the appropriate configurations in the answer area.

NOTE: Each correct selection is worth one point.

Hot Area:

Requirement	Configuration
Connection to Customer Service Insights.	Go to the Dynamics 365 Customer Service Insights URL and choose Dynamics 365. Go to the Dynamics 365 Customer Service URL and choose Dynamics 365 Customer Service Insights. Go to the Power Platform administration URL and create a connection to Dynamics 365 Customer Service Insights. Go to the Dynamics 365 Customer Service URL and choose the Dynamics 365 Customer Service Insights dashboard.
Dashboard for phone calls and emails only.	Channel Product Business unit Assigned item

Correct Answer:

Requirement	Configuration
Connection to Customer Service Insights.	Go to the Dynamics 365 Customer Service Insights URL and choose Dynamics 365. Go to the Dynamics 365 Customer Service URL and choose Dynamics 365 Customer Service Insights. Go to the Power Platform administration URL and create a connection to Dynamics 365 Customer Service Insights. Go to the Dynamics 365 Customer Service URL and choose the Dynamics 365 Customer Service Insights dashboard.
Dashboard for phone calls and emails only.	Channel Product Business unit Assigned item

Box 1: Go to the Dynamics 365 Customer Service URL and choose the Dynamics 365 Customer Service Insights dashboard.

Customer Service Insights is now embedded in Dynamics 365 Customer Service. After it is enabled, this experience allows you to start seeing historical analytics directly within the Customer Service environment. Several reports and

dashboards can be viewed by your management team.

Box 2: Channel

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