

DUMPS ARENA

Workday Pro Certification exam

Workday Workday-Pro-Benefits

Version Demo

Total Demo Questions: 6

Total Premium Questions: 63

Buy Premium PDF

<https://dumpsarena.co>

sales@dumpsarena.co

sales@dumpsarena.co
dumpsarena.co

QUESTION NO: 1

A medical plan permits employee-plus-child coverage, but children lose eligibility at age 26. The employee remains eligible for medical coverage after a child reaches the age limit. Where should the consultant configure the rule that prevents the age-ineligible child from being covered?

- A. In the Worker Plan Eligibility field of the health care plan
- B. In the Coverage Dependent Eligibility field of the health care plan
- C. In the Health Care Coverage Targets configuration
- D. In the related person relationship definition for Child

ANSWER: B

Explanation:

Configure the rule in the Coverage Dependent Eligibility field of the health care plan. This field evaluates whether each dependent selected for coverage satisfies the plan's dependent eligibility requirements, including the age limit.

A worker plan eligibility rule would evaluate the employee's eligibility for the medical plan, not the child's eligibility for coverage. Health care coverage targets determine the available election structures, such as employee-plus-child, but do not enforce an age-based dependent eligibility condition.

QUESTION NO: 2

What scenario requires you to include a Health Care Classification in the plan setup?

- A. Health Savings Account plan for Canada
- B. Medical plan for Canada
- C. Medical plan for USA
- D. Health Savings Account plan for USA

ANSWER: C

Explanation:

Medical plan for USA is correct because Health Care Classification is a required setup attribute for U.S. medical coverage in Workday Benefits. The classification identifies the nature of the medical coverage for U.S. health-care compliance processing and supports the reporting and eligibility logic associated with employer-sponsored medical plans. This is particularly relevant to Affordable Care Act administration, where an employer must be able to determine and report whether offered coverage meets applicable coverage requirements. Configuring the classification on the U.S. medical plan ensures that Workday can consistently use the plan's coverage designation when evaluating workers and producing health-care reporting data. The underlying U.S. compliance context is established by Internal Revenue Code section 6056, which requires applicable large employers to report information about health coverage offered to full-time employees; see the [IRS guidance on employer information reporting](#). The [IRS employer shared-responsibility guidance](#) also describes the employer coverage framework that makes accurate medical-plan configuration essential.

QUESTION NO: 3

Open enrollment was launched for three benefit groups. Shortly after launch, the benefits administrator discovers that one of the selected groups should not have received the event. No enrollment results should remain for the incorrectly included group. What should the administrator do first?

- A. Close open enrollment and exclude the incorrect group from future reminders.
- B. Rescind open enrollment.

- C. Remove the incorrectly included employees from their benefit group.
- D. Update the worker eligibility rules on all benefit plans.

ANSWER: B

Explanation:

Rescind open enrollment. Rescinding reverses the open enrollment activity that was generated when the event was launched, allowing the administrator to initiate open enrollment again for the correct benefit-group population.

Changing an eligibility rule or sending communications does not remove the already generated open enrollment events. Closing the event would preserve the incorrect population selection rather than resetting the process.

QUESTION NO: 4

An Adoption enrollment event has Days to Enroll configured as 30. The organization wants employees to receive an error and be unable to report the event through self-service after the 30-day period, rather than allowing them to submit it late. What additional configuration is required?

- A. Select Worker Selectable on the Enrollment Event Type.
- B. Select Do Not Reprocess on the Enrollment Event Type.
- C. Select Employee Cannot Report After Days to Enroll on the Enrollment Event Type.
- D. Select Route to Benefit Partner on the Enrollment Event Type.

ANSWER: C

Explanation:

Select Employee Cannot Report After Days to Enroll on the Enrollment Event Type. Days to Enroll establishes the configured time period, and this checkbox enforces the self-service reporting cutoff after that period has passed.

Worker Selectable controls whether employees can initiate the event at all. Do Not Reprocess and Route to Benefit Partner address different event-processing behavior and do not prevent late employee reporting.

QUESTION NO: 5

An employee attempts to report the April 30 birth of their child on June 30, but they receive an error when submitting the event. Why did they receive an error?

- A. You have not configured coverage types for that event.
- B. The Employee Cannot Report After Days to Enroll checkbox is selected.
- C. You did not activate the employee's Workday account.
- D. The employee belongs to more than one benefit group.

ANSWER: B

Explanation:

The Employee Cannot Report After Days to Enroll checkbox is selected. In Workday Benefits, a birth is processed as a benefit event, and the event's configuration can impose a deadline for the employee to report it. Selecting this control enforces the reporting window defined by the event's Days to Enroll value: after that number of days has elapsed from the event date, the employee can no longer initiate or submit the event through the employee self-service process. Here, the birth occurred on April 30 and reporting was attempted on June 30, approximately 61 days later. If the configured reporting

deadline is shorter than that elapsed period—as is commonly configured for a qualifying life event—Workday returns an error because the self-service reporting period has closed. This behavior supports timely benefit administration by ensuring event changes are submitted within the organization's configured enrollment rules. The configuration is particularly relevant for newborn enrollment because benefit plans commonly require prompt reporting of the dependent addition. Workday describes Benefits as supporting employee self-service and rules-based administration in its [Benefits product overview](#). The time-sensitive nature of enrollment following a birth also aligns with the U.S. Department of Labor's [COBRA information](#), which notes special enrollment rights associated with birth and other qualifying events.

QUESTION NO: 6

Terminated employees' benefits should stay active through the last day of the month. However, their benefits are inactive on their termination date. What would cause this?

- A. On the Enrollment Event Rule termination event, the Coverage End Date is set to On the Half Month.
- B. On the Enrollment Event Rule termination event, the Coverage End Date is set to On Pay Period Begin After Event Date.
- C. On the Enrollment Event Rule termination event, the Coverage End Date is set to Last Day of the Month.
- D. On the Enrollment Event Rule termination event, the Coverage End Date is set to On the Event Date.

ANSWER: D

Explanation:

On the Enrollment Event Rule termination event, the Coverage End Date is set to On the Event Date. This setting causes Workday to end the employee's benefit coverage on the effective date of the termination event itself. Therefore, when an employee is terminated, their associated benefit elections become inactive on that same date rather than remaining active through the calendar month's final day. Coverage timing for life events, including termination, is determined by the enrollment event rule and its coverage begin and end-date logic. To meet a policy requiring coverage through month-end, the termination event's coverage end-date rule must instead calculate the final day of the relevant month. Workday's Benefits functionality is designed to apply benefit eligibility and enrollment rules based on configured events and effective dates, allowing organizations to align coverage processing with their plan and policy requirements. For related Workday Benefits product information, see [Workday Benefits](#). Workday also provides information on how its configurable HCM processes support policy-driven workforce administration at [Workday Human Capital Management](#).