



CLAIMS QUEUE · TWO WAYS TO WORK CLAIMS

**Live claims, one click to an agent,
decisions you can prove**

PART 1

Property & casualty

Every new claim, checked against the policy wording, guidelines, authority limits and past coverage decisions.

page 2

PART 2

Health

The pended claims, worked through eight review steps against the plan, medical policy and past decisions.

page 11

EntPEP

CLAIMS QUEUE · PROPERTY & CASUALTY

Claims pour in. Every decision follows the book.

A live queue of new claims, one click to take a claim, and an agent that checks it against the policy, the guidelines and past decisions before the adjuster decides.

THE PROBLEM

Thousands of claims a day, and a storm can triple them overnight

Every claim is a rule check

Is the policy in force? Which coverage? Any exclusion, sublimit or endorsement? Above whose authority? An SIU referral?

The rules live in documents

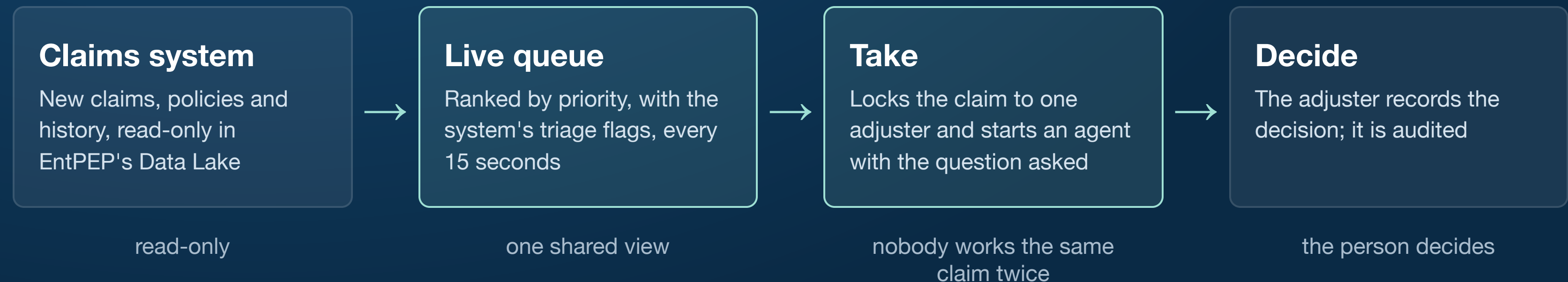
Policy wordings, claims guidelines, authority limits, reserving rules, state deadlines and past coverage decisions.

Inconsistency is expensive

Two adjusters, two answers. Regulators, auditors and litigators ask why a claim was paid or denied.

HOW IT WORKS

From first notice of loss to a decision you can stand behind



THE QUEUE

Every new claim, highest priority first

EntPEP

Claims queue

Updated 8s ago · next in 7s

Property & casualty

Health

Brightwater Mutual · sample data

Refresh

Agents tab →

⚠ CAT-2631 · Northeast wind and hail (Wind/Hail, CT, MA, RI, NY, 2026-10-16 to 2026-10-19). Severe thunderstorms with hail up to 1.75 in. and gusts to 70 mph across central Connecticut, Rhode Island, eastern Massachusetts and the Hudson Valley. While the bulletin is open, desk adjusters may settle these claims up to \$40,000.

365

ARRIVED LAST HOUR

8,676

LAST 24 HOURS

551

IN THE QUEUE

\$9,287,800

ESTIMATED IN QUEUE

3

BEING WORKED

2

DECIDED HERE

17

WITH INJURY

11

FRAUD SCORE 40+

NEW CLAIMS ARRIVING

365 in the last hour · 6.0 a minute · amber: mostly storm claims

Queue 551

My claims 1

Being worked 3

Decided 2

All lines

All states

Any flag

Find a claim, policy, insured or city

PRIORITY	CLAIM	LINE · LOSS	INSURED · PLACE	ESTIMATE	FLAGS	FRAUD
92	CLM-2026-0067359 H0-CT-1017498 · 32 min ago	Homeowners Liability – injury on premises · loss 2026-10-15	Ryan Yardley Glastonbury, CT	\$105,730	Injury Attorney represented Above desk authority	17
“A guest fell from the deck when a railing gave way.”						
75	CLM-2026-0064794 PA-MA-1209605 · 80 min ago	Personal Auto Bodily injury – other party · loss 2026-10-18	Grace Kettering Newton, MA	\$38,980	Injury Attorney represented Above desk authority	19
73	CLM-2026-0068240 PA-NJ-1038011 · 71 min ago	Personal Auto Bodily injury – other party · loss 2026-10-18	Sarah Lockhart Princeton, NJ	\$87,740	Injury Above desk authority	9
63	CLM-2026-0065379 H0-NY-1254548 · 20 min ago	Homeowners Wind/Hail – roof · loss 2026-10-18	Brian Lawson Buffalo, NY	\$119,670	CAT-2631 Above desk authority	12
61	CLM-2026-0061703 H0-NJ-1264757 · 46 min ago	Homeowners Fire · loss 2026-10-16	Kevin Pruitt Toms River, NJ	\$158,080	New policy (50 days) Above desk authority	32
61	CLM-2026-0065029 H0-FL-1083292 · 53 min ago	Homeowners Liability – injury on premises · loss 2026-10-18	Daniel Quimby Orlando, FL	\$57,490	Injury Above desk authority	2
58	CLM-2026-0069301 PA-FL-1267312 · 19 min ago	Personal Auto Collision – intersection · loss 2026-10-18	Paul Ives Orlando, FL	\$19,220	Injury Attorney represented	13
56	CLM-2026-0064734 H0-MA-1164905 · 44 min ago	Homeowners Tree fall · loss 2026-10-17	Ryan Jarrett Worcester, MA	\$65,590	CAT-2631 Above desk authority	11
55	CLM-2026-0061709 PA-FL-1205984 · 29 min ago	Personal Auto Collision – intersection · loss 2026-10-16	Eric Gilchrist Jacksonville, FL	\$28,560	Injury Above desk authority	8
53	CLM-2026-0069037 H0-ME-1222567 · 46 min ago	Homeowners Wind/Hail – roof · loss 2026-10-16	Linda Wexford Portland, ME	\$33,700	CAT-2631 Above desk authority	18
51	CLM-2026-0067800 H0-NJ-1264757 · 46 min ago	Small Commercial Property Wind/Hail – roof · loss 2026-10-16	Barbara Quill Portland, ME	\$400,500	CAT-2631 Above desk authority	15

TAKE

One click locks the claim to you

Queue 551My claims 1Being worked 3Decided 2

All linesAll statesAny flag

Find a claim, policy, insured or city

PRIORITY	CLAIM	LINE · LOSS	INSURED · PLACE	ESTIMATE	FLAGS	FRAUD
34	CLM-2026-0068915 HO-NY-1151902 · 29 min ago	Homeowners Water – leak · loss 2026-10-17	Pamela Goodwin White Plains, NY	\$29,350	Above desk authority	9
						Open agent Record decision Release
87	CLM-2026-0062781 HO-RI-1142697 · 83 min ago	Homeowners Liability – injury on premises · loss 2026-10-14	Omar Sterling Providence, RI	\$71,910	InjuryAttorney representedAbove desk authority	25
						Taken by Dana 2026-10-18 13:38:52
66	CLM-2026-0064501 HO-IL-1235788 · 30 min ago	Homeowners Liability – injury on premises · loss 2026-10-16	Kathleen Langford Naperville, IL	\$19,030	InjuryAttorney represented	18
						Taken by Marcus 2026-10-18 13:35:19

Take locks the claim to you, so nobody else works it, and starts an agent with the claim, its policy and history and the claims guidelines, with the question already asked. Record the decision here when you’ve made it. Flags are the claims system’s triage rules, not a coverage decision.

Everyone else sees "Taken by Dana", so two adjusters never work the same claim. The holder can open the claim's agent, record the decision, or release it back to the queue.

THE AGENT, WITH THE QUESTION ALREADY ASKED

Coverage, red flags, reserve, authority, recommendation, in that order

Help me resolve claim CLM-2026-0068915: water – leak for Pamela Goodwin (Homeowners, White Plains, NY), policy H0-NY-1151902.

Use datalake_query: the claim, the policy, its other claims, average paid for the loss type and state.

Read: the policy wording, claims guidelines, authority limits, SIU red flags, reserving rules, past coverage decisions, state timelines.

Answer: 1 coverage · 2 red flags · 3 reserve · 4 authority · 5 recommendation, citing path:line.

THE ANSWER (ABRIDGED, FROM THE REAL RUN)

1 · COVERAGE

In force (term 2026-04-23 to 2027-04-23). Coverage A applies, but the insured describes a pipe *“dripping... for a while”*, stains *“getting bigger over the past few months”*.

Exclusion 3: *“Continuous or repeated seepage or leakage of water... over a period of weeks, months or years”* homeowners-policy.md:28-30; the mold follows under Exclusion 4.

Precedent **CD-25-04**: essentially identical facts.

2-5 · FLAGS, RESERVE, AUTHORITY, DECISION

SIU: no indicator present; no referral.

Reserve: $\$29,350 - \$1,000 = \$28,350$, plus 8% expense = **\$30,618**; revise down once the estimate is itemized.

Authority: \$29,350 is over the \$25,000 desk limit: a senior adjuster settles it.

Recommendation: partial pay: deny the water and mold damage, pay to open and close the wall, per CD-25-04; letters from templates 2 and 3.

DECIDE

The adjuster decides, not the agent: pay, partial pay, deny, refer to SIU, request information or escalate.

The note records the provision and the precedent relied on.

Take, release and decision are each **audited**, with who and when.

Record decision: CLM-2026-0068915

Pamela Goodwin · Water - leak · estimate \$29,350

☐ Pay

☒ Partial pay

☐ Deny

☐ Refer to SIU

☐ Request information

☐ Escalate

Amount paid or reserved (optional), e.g. 12,400

Partial pay: deny the water and mold damage (Exclusion 3, continuous seepage); pay the cost to open and close the wall, per CD-25-04.

Cancel

Save decision

UNDER YOUR CONTROL

Built for decisions that get second-guessed

- ✓ **Read-only data, time-boxed access.** Agents read claims through a role an admin grants for a set time.
- ✓ **The firm's own rulebook.** Policy wordings, guidelines and past decisions are given to every agent and cited line by line.
- ✓ **One adjuster per claim.** Take locks it; the team sees who holds what.
- ✓ **Everything on the record.** Each agent leaves a Work Record of the queries it ran and the documents it read.
- ✓ **Confidential stays confidential.** Agents run sealed, on your servers; you decide where the data goes and which model sees it.

EntPEP

PENDED HEALTH CLAIMS

The claims that stop for a person, worked by the book in minutes.

A live queue of pended claims, one click to take one, and an agent that runs every review step against the plan, the medical policy and past decisions before the reviewer decides.

Sample data for a fictional health plan, Brightwater Health. Screens from the live demo at insurance.entpep.com.

THE PROBLEM

**Most claims pay themselves.
The rest each need eight checks.**

A pend says where, not what

The automated check stopped on prior authorization, network or coordination of benefits. Often the answer is fine; sometimes it hides another problem.

Eight steps, many sources

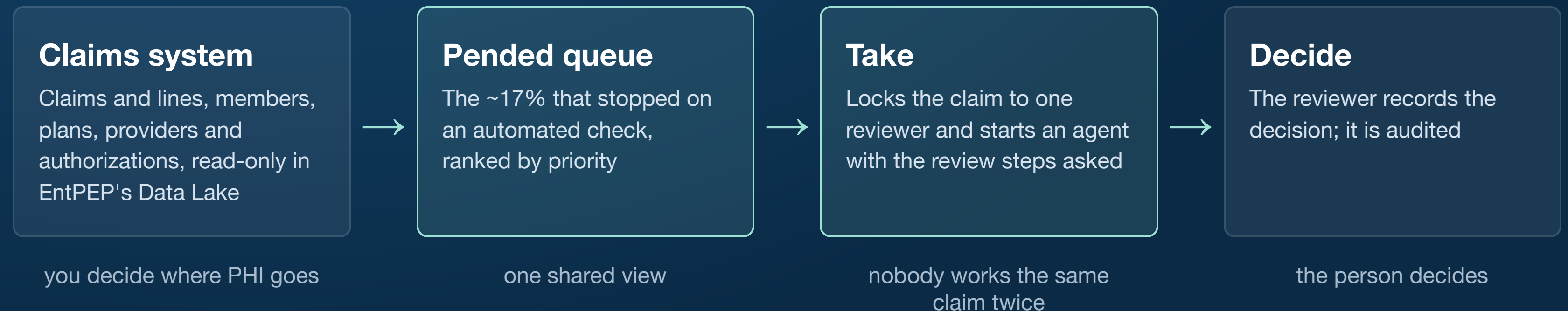
Eligibility, other coverage, timely filing, network and referral, authorization, coding, benefit limits, medical necessity.

Deadlines and appeals

Prompt-pay clocks run, and every denial needs a reason code and the plan provision behind it.

HOW IT WORKS

From a pended claim to a decision with its reason code



THE QUEUE

82% paid automatically. These are the rest.

EntPEP

Pended health claims

Updated 8s ago · next in 7s

Property & casualty

Health

Brightwater Health · sample data

Refresh

Agents tab →

1,723

CLAIMS LAST HOUR

82.1%

PAID AUTOMATICALLY

408

PENDED, WAITING

\$506,887

BILLED IN QUEUE

3

BEING WORKED

2

DECIDED HERE

23

FOR CLINICAL REVIEW

0

OVER \$10,000

NEW CLAIMS ARRIVING

1,723 claims in the last hour · 21.5 a minute · amber: pended for review

Queue 408

My claims 1

Being worked 3

Decided 2

All plans

All specialties

Any pend reason

Find a claim, member, provider or code

TAKE

One click locks the claim to you

Queue 408My claims 1Being worked 3Decided 2

All plansAll specialtiesAny pend reason

Find a claim, member, provider or code

PRIORITY	CLAIM	MEMBER · PLAN	PROVIDER	SERVICE	BILLED	PEND REASONS	FRAUD
47	HCL-2026-0163551 41 min ago	Melissa Holloway BWH700098467 · BWH-PP0-1500	Buffalo Emergency Physicians Group Emergency medicine · Out of network	99284 2026-10-17 · R07.9	\$1,673	Coordination of benefitsOut-of-network	22
							Open agent
							Record decision
							Release
61	HCL-2026-0168542 32 min ago	Nicole Holloway BWH700073684 · BWH-EPO-1000	Miami Diagnostic Radiology Radiology · Out of network	73721 2026-10-03 · M17.11	\$1,512	Prior authorization checkCoordination of benefitsOut-of-network	18
							Taken by Dana 2026-10-18 13:38:52
54	HCL-2026-0169373 4 min ago	Anna Shepard BWH700050969 · BWH-PP0-1500	Denver Diagnostic Radiology Radiology · Out of network	70553 2026-10-13 · R51.9	\$2,743	Prior authorization checkPossible duplicate	30
							Taken by Marcus 2026-10-18 13:35:19

Most claims are paid automatically; these stopped on an automated check, and the pend reason says where to look, not the answer. **Take** locks the claim to you and starts an agent with the claim, the member, plan, provider, authorizations and this year's claims, and the plan's rules, with the review steps already asked. Record the decision here.

Everyone else sees "Taken by Dana". The holder can open the claim's agent, record the decision, or release it back to the queue.

THE AGENT, WITH THE REVIEW STEPS ALREADY ASKED

Every step in order, stopping at the one that decides it

```
Help me work pended health claim HCL-2026-0163551: emergency department visit, high severity, chest pain,
for Melissa Holloway (Brightwater PPO 1500), from Buffalo Emergency Physicians Group (out of network).
It pended on: Coordination of benefits, Out-of-network.
Use datalake_query: the claim and its lines, the member and plan, the provider, authorizations, this
year's claims.
Read: the review guidelines, plan benefits, coding edits, COB rules, medical policy, timelines, reason
codes, past decisions.
Answer: each step · what the pend meant · decision with reason code · deadline and precedent.
```

THE ANSWER (ABRIDGED, FROM THE REAL RUN)

1 Eligibility	Pass: active since 2024-01-05, covers the service date
2 Other coverage	Stops the claim: Medicare Part B is primary and there is no Medicare explanation of benefits health-coordination-of-benefits.md:9-11
Out-of-network	Fine: an emergency for chest pain is covered at the in-network cost share in or out of network health-plan-benefits.md:34-37, as in HD-26-09
Decision	Request information: ask for the Medicare EOB, reason code 22, hold 45 days, as in HD-26-05
Deadline	Decide or ask within 15 business days of the pend: by 2026-11-06

The agent found which pend mattered. The wording is the model's; every fact comes from an audited query and every rule from a cited document.

DECIDE

The reviewer decides, not the agent: pay, adjust the allowed amount, deny, request information, send to clinical review or refer to SIU.

The note records the provision, reason code and precedent relied on.

Take, release and decision are each audited.

Record decision: HCL-2026-0163551

Melissa Holloway · 99284 · billed \$1,673

☐ Pay

☐ Deny

☐ Clinical review

☐ Adjust allowed amount

☒ Request information

☐ Refer to SIU

Amount paid or reserved (optional), e.g. 12,400

Medicare Part B is primary and there is no Medicare EOB: request it (code 22), hold 45 days (COB-2026 3, HD-26-05). The out-of-network pend is fine: emergency for chest pain (HCG 4.4).

Cancel

Save decision

BUILT FOR PROTECTED HEALTH INFORMATION

Help with PHI, without letting it out

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