

CASE STUDY

Reclaiming Control: How a Commercial Auto Payer Cut Settlements by 63%

Is increasing claim complexity and volatility driving up your settlement costs and eroding your margins? Every excessive settlement isn't just a line item, it's a signal that your teams are under-resourced, and you are exposed to unnecessary risk. Legacy claims processes no longer adequately protect you from outside forces that are driving up costs on third-party claims and putting your profitability at risk:

- Social inflation, also referred to by some as legal abuse, is reshaping litigation outcomes, with growing public pressure for larger corporate payouts
- 19% surge in medical costs for third-party claims since 2020 is far outpacing workers' comp (9%) and first-party claims (1%)
- \$44M average nuclear verdicts are being fueled by plaintiff attorneys leveraging advanced Al tools, aggressive advertising and litigation funding

Modern claims environments require data-driven, clinically rigorous processes to evaluate third-party claim settlements. Without expertise grounded in medical knowledge, your team is vulnerable and not ready to meet these challenges.



The Challenge: Overpayments Due to Underprepared Negotiations

A national commercial auto payer with \$500M in annual liability spend realized overpayments on settlements were stemming from inadequately prepared adjusters. To take control over this financial risk, they took action to equip their teams with the tools needed to negotiate from a position of strength.



The Solution: Enlyte's Demand Package Review

The payer piloted Demand Package Review across a group of high-severity claims and saw immediate results. The solution provided key features that made implementation and the adjusters' experience easy:

- > Seamless demand submission through Enlyte's Adjuster Workspace—no IT integration required
- > Comprehensive summaries delivered back to adjusters in just three days
- Informed adjusters of medical cost reductions, treatment gaps and care exceeding expected duration

The combination of bill review with clinical expertise yielded immediate claim savings and efficiency gains.

Advanced Bill Review Technology

- Evaluated charges against usual and customary (UCR) benchmarks, Medicare and Fair Health
- Provided data-backed negotiation benchmarks

Clinical Evaluation Protocol

- Delivered clinical insights on treatment appropriateness
- Identified red flags, validates injury mechanisms, identified treatment gaps and causation factors

Increased Savings

6

reduction in medical specials

65%+

decrease in adjuster processing time



The Impact: Dramatic Cost Savings and Efficiency Gains

In a comparison of 240+ large commercial claims, Enlyte-reviewed demands significantly outperformed the matched control group:

63% average reduction in bodily injury settlements

\$30M

total bodily injury severity savings, reducing average claim costs by \$125K 300+

hours saved in adjuster demand processing and evaluation

By implementing Demand Package Review, the payer armed their adjusters with clinical insights and defensible benchmarks so they were better prepared with a stronger negotiation position. This resulted in reduced settlement cycle times and legal escalations. The leadership team also gained visibility into performance metrics to measure program effectiveness.

Don't Wait for Rising Settlements to Dictate Your Strategy

Reducing settlement amounts isn't just about cost containment, it's necessary to stay competitive, demonstrate accountability and protect your organization. As social inflation and litigation risks continue to surge, the cost of inaction grows exponentially. Take the opportunity to reclaim control over your settlement costs and protect your bottom line.

