Auto Casualty

Why Your Bodily Injury Adjusters Are Overloaded with Work, Hint: You Might Be Asking Them to Focus on the Wrong Things

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4 MIN READ

Workload is the number one cause of stress in the workplace, when compared with other factors including people issues, work-life balance and lack of job security, according to Statista. Overworked employees can lead to stress and burnout, which ultimately has a negative effect on an organization's bottom line, since it can lead to a decrease in productivity, more potential for mistakes and higher turnover rates. Across the insurance industry, many adjusters are facing a crushing amount of work to manage, whether that's due to the overwhelming number of claims assigned to them, an abundance of administrative tasks or other factors. Most insurance carriers are aware of this issue, but it can be difficult to determine the root causes of this problem and find the best solutions for their employees.

Four Reasons Bodily Injury Adjusters Are Overloaded With Work

Bodily injury claim adjusters have a complicated, but extremely important, job. Bodily injury claims can be complex, and it can be difficult to fully understand each claim and effectively negotiate an accurate settlement every time. On top of that, third party adjusters typically face many administrative tasks that can take them away from their core claim resolution duties. Here are four reasons that bodily injury adjusters might be facing an overload of work:

1. Rising Severity Is Causing Increased Claim Complexity

Bodily injury severity has been on the rise and is expected to continue increasing over the next five years as medical inflation is expected to surge, according to the Insurance Information Institute. Rising severity can lead to more complex claims, which typically take more time for adjusters to manage effectively.

2. Adjusters Are Assigned to a Wide Variety of Claim Types

One reason bodily injury adjusters can have challenges managing their workload is if they are assigned different segments of claims. For example, the same adjuster might be assigned a low-dollar unrepresented claim, a catastrophic case and a claim with a notoriously difficult-to-deal-with attorney. Since adjusters don't have an

opportunity to specialize in any one of these areas, it can make it harder for them to easily and quickly come to the best decisions and recommendations for each claim. There can also be hidden costs associated with having adjusters switching between tasks throughout the day. This can mean that though Adjuster A and Adjuster B are both assigned an equal number of claims, there might not actually be an even distribution of work between those two employees since each claim can have drastically different needs.

3. Adjusters Are Overloaded With Administrative Tasks

A day in the life of most bodily injury adjusters includes more than just claim adjusting. Non-core tasks often required of adjusters include keying bills, negotiating payments with providers and managing paperwork. Many of these activities could be automated using technology. By asking adjusters to perform these repetitive and administrative tasks that could otherwise be easily automated or outsourced, claims organizations are taking away from adjusters' time to focus on their core skills and duties and may be adding to their already overloaded pile of work.

4. Adjusters Don't Have Access to the Best Tools and Technology

Another reason your adjuster might be overloaded is if they are using outdated tools and technology—or aren't using any solutions at all to support their third party claim evaluations. A lack of technology can lead to inefficiencies in the claims process resulting in longer claim open times. For example, adjusters could be manually gathering all of the facts of the claim to come up with pain and suffering recommendations and/or manually preparing key points for negotiating with attorneys on represented claims. These processes can take a long time to complete manually considering the amount of paperwork typically associated with bodily injury claims, while technology platforms could automatically perform much of this effort. Well-integrated technology solutions can also eliminate cross-work between software systems and the claims system, and overall help to reduce claim open times.

Managing Bodily Injury Adjusters' Workloads

By assessing and evaluating the potential causes of overworked employees listed above, carriers can begin to craft a plan to better manage adjusters' workloads. Technology can be a big help in this process, as the right tools help adjusters do their jobs more effectively and efficiently, leading to better bodily injury claim outcomes. For example, an end-to-end third party liability solution helps adjusters get a holistic view of high-severity claims and can simplify the process of understanding injuries and evaluating liability and general damages. Technology that facilitates automated triaging could help to assign specific types of claims to certain adjusters to promote specialization in a certain area. Additionally, adding claims automation and joining forces with trusted partners can help to reduce the manual tasks from an adjuster's daily job. Taking a few of these steps can help to relieve adjusters of their stressful workloads, helping them to focus in on the claimant and leading toward better outcomes on bodily injury claims.



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