



[Workers' Comp](#)

Reduce Cost and Complexity in Workers' Comp Ankle and Foot Claims

September 8, 2025

3 MIN READ

[Author profile image](#)

[Kim Radcliffe, DHA, MHA, PT](#)

Senior Vice President of Product Management, Specialty Solutions

Often seen as routine, foot and ankle injuries are among the most frequent and costly musculoskeletal claims in workers' compensation. Representing 10% to 15% of all claims, and up to 20% in high-risk sectors like construction, these injuries average \$28,000 to \$30,000 in combined medical and indemnity costs.

Without early intervention, delayed or fragmented care can turn minor injuries into long-term disability, escalating costs and burdening claims teams with unnecessary touchpoints.

Proactive Oversight Drives Outcomes

Sprains and strains account for 50–60% of all foot and ankle claims. While a Grade I sprain (mild, with a small number of muscle fibers stretched or slightly torn) may be low risk, it can trigger reinjury, instability and prolonged recovery without structured care.

One overlooked factor? Poor proprioceptive recovery—the body's ability to sense joint position, movement, and balance. If balance and neuromuscular control aren't restored, injured employees are significantly more likely to reinjure the same ankle within months.

You can bridge this gap with clinical oversight that ensures:

- Early physical therapy (PT) initiation
- Function-based recovery tracking
- Structured PT protocols including gait retraining, strength assessment and job-matched functional training

Right Care, Right Duration

Following Official Disability Guidelines (ODG), mild-to-moderate injuries typically resolve within **9-12 visits**. Complex surgical cases may require **30-48** with every session outcome-tracked. Our model prevents overtreatment and cuts unproductive care extensions.

Managing Complex Cases with Precision

While high-severity cases make up a smaller portion of claims, they consume a disproportionate share of costs. Crush injuries, Achilles ruptures and intra-articular fractures—those that extend into the joint surface—often demand multidisciplinary coordination, and advanced surgical techniques.

Apricus partners with clients to manage these complex cases through:

- Timely referrals to high-performing specialty providers
- Surgical decision support based on current clinical evidence
- Continuous oversight to eliminate unnecessary escalations

Best Practice Physical Medicine

From low-risk sprains to complex reconstructive surgeries, your injured employees need recovery plans that deliver precision and predictability every step of the way.

Apricus reduces variability in care quality, outcomes, and claims costs while easing administrative load. Unlike static PT models, our approach embeds structured best practices throughout each phase of care, avoiding overtreatment and accelerating recovery.

Licensed physical therapists oversee care from intake to discharge, using ODG-aligned protocols, clinical flags for high-risk cases and outcome tracking at every visit. Therapy isn't just scheduled, but actively managed, structured, and adjusted based on patient progress.

Clinical Impact

- Early triage shortens delays and initiates timely treatment
- Evidence-based protocols reduce variability and improve outcomes
- Clinical decision tools support appropriate, timely interventions

Cost Control

- ODG-aligned utilization tracks PT usage by injury severity to prevent overuse
- Proactive discharge review identifies unproductive extensions before they escalate
- Early oversight reduces unnecessary procedures and escalating spend

Adjuster Experience

- Fewer adjuster touchpoints reduces administrative time and risk of rework
- Return-to-work readiness plans are driven by objective, function-based goals
- Clear, accountable reporting supports faster decisions

A proactive clinical review process doesn't just improve care; it improves claim outcomes. Apricus oversight [case examples](#) include:

- **24 PT sessions avoided** after timely reassessment post-fracture
- **10 sessions avoided** after a mild sprain, enabling earlier return-to-work

Reclaim Control Over Physical Medicine Costs

Every unnecessary PT session avoided, every claims escalation prevented, and faster return to work adds up to a stronger return on investment (ROI) and smoother claim resolution.

Apricus doesn't just coordinate physical medicine. We transform it. With licensed PT-led oversight, structured protocols, and real-time course correction, we turn therapy from a cost driver into a strategic lever for claim resolution.

The Apricus Advantage, By the Numbers

- Reduce number of visits by **15%**
- Evaluations scheduled within **48 hours**
- Therapy scheduled within a **5-mile radius of home or work**

You've felt the rising costs. You've seen the complexity. Now it's time to take back control. A smarter physical medicine strategy can shift the balance toward better outcomes, greater clarity, and lower costs.

[Ready to see the impact for yourself? Contact Apricus today!](#)

Data sources referenced include internal Apricus Physical Medicine analytics and external research from the Journal of Rheumatology (2007), Injury Prevention (2011), and Foot & Ankle Orthopedics (2022).



©2022 Enlyte Group, LLC.

mitchell | genex | coventry