Workers' Comp

Specialty Solutions Spotlight: 5 Details to Watch When Arranging Transportation on a Workers' Comp Claim

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How can I make sure my transportation choice supports recovery?

Transportation can look like one of the simpler pieces of a workers' compensation claim. In practice, medical transportation can be complicated, and injured employees often require more assistance than a traditional taxi or rideshare driver is prepared to provide.

In addition to getting someone from point A to point B, adjusters need to be sure transportation is appropriate, reliable and aligned with the treatment plan. When it is not, an unsuccessful trip can mean a missed medical appointment, delayed treatment and longer claim duration. Paying attention to these five areas will help ensure transportation doesn't derail progress on a claim.

1. Don't Assume "Ambulatory" Means Simple

A transportation request often begins with a category choice such as ambulatory, wheelchair, stretcher or another level of service. This category is important, but it does not capture the whole story. An employee who technically can walk may need extra time getting from an apartment to a vehicle, help carrying belongings or assistance entering and exiting the vehicle. Wheelchair transportation also requires additional detail.

- Is the wheelchair manual or electric?
- Can the employee transfer independently?
- Are there stairs at the residence?
- Is a ramp sufficient, or is a mechanical lift necessary?

- Do height and weight affect the type of vehicle needed?

When reviewing a new transportation request, look beyond the category. Confirm mobility limitations, transfer ability, equipment, environmental barriers and any special assistance the employee needs before a trip is scheduled.

2. Watch for Transportation Problems Before They Become Missed Appointments

Transportation barriers interrupt access to treatment and potentially slow recovery, so adjusters need to address them proactively rather than after the first no-show. When the treatment plan changes, ask whether the employee's transportation needs have changed with it.

Look for these signs throughout the claim.

- Does the employee have driving restrictions?
- Is a family member currently providing rides but becoming unavailable?
- Are appointments becoming more frequent?
- Does the employee have recurring visits that require ongoing transportation?
- Has surgery or a change in condition created new mobility limitations?

3. Confirm the Details, Not Just the Ride

Many transportation problems come down to incomplete or changing information. At a minimum, the scheduling process should confirm the pickup date and time, pickup location, destination and facility information, but other questions are worth considering.

- Is the appointment time confirmed?
- How long is the visit expected to last?
- Is the return trip scheduled or should the driver wait for notification?
- Has the provider changed locations?
- Is the transportation authorized only for a particular destination?
- For recurring treatment, are all appointment dates current?

Pay particular attention to recurring trips and compare transportation schedules against current treatment so canceled or rescheduled appointments do not continue generating unnecessary trips, calls or scheduling work.

A well-managed process includes communication with the injured employee, adjuster or case manager and the transportation resource. It should also confirm the service was completed.

4. Match the Transportation Level With the Employee's Actual Need

Workers' compensation transportation can range from standard ambulatory service to wheelchair, stretcher, basic life support, advanced life support to air transportation.

When choosing transportation adjusters should remember the most convenient option is not always the most appropriate, and the highest level of service is not automatically the safest or best choice. Using more service than necessary increases claim costs and using too little creates safety concerns or failed trips.

This is especially important to consider after surgery, during hospital discharge or when the employee's functional status changes. Adjusters should also evaluate whether a transportation arrangement that worked in the past is still appropriate. Watch for higher-level transportation requests or sudden shifts in service type and determine if anything changed with the employee's condition or functionally to ensure the requested service matches the employee's current needs.

5. Look for Patterns, Not Isolated Transportation Events

One late driver may be an isolated problem, but repeated cancellations, long waits, unsuccessful pickups or frequent last-minute changes suggest a broader issue.

These patterns create administrative burdens but also signal the transportation plan itself needs to change.

- Does the employee need a different vehicle type?
- Should the pickup timing account for mobility limitations?
- Is a rural location requiring more lead time?
- Does a recurring treatment schedule need to be coordinated differently?

When repeated issues occur on a claim escalate patterns early with your transportation provider. Ask for the underlying cause and a corrective plan rather than continuing to reschedule individual trips. A good transportation provider will continually evaluate service quality, provider performance and feedback to identify ways to improve service.

Transportation Can Seem Simple Until It Isn't

The most effective approach is to address transit needs before they disrupt care. Transportation should function as a supporting part of the recovery plan rather than stand in its way. When transportation works as intended, injured employees arrive safely, treatment stays on track and adjusters spend less time resolving avoidable issues.

Apricus coordinates safe, reliable and cost-effective transportation services based on each injured employee's needs. Care coordinators are available 24 hours a day to accept referrals and work with adjusters to facilitate transport, reduce administrative burden and ensure injured employees receive timely services.

This information is meant to serve as a general overview, and any specific questions should be fully reviewed with a health care professional or specialty service provider.

To make a referral for specialty products and services, call 877.203.9899 or email apricus.referrals@enlyte.com.

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