



Spectrum Investigations

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Workers' Compensation

Red Flag Warnings

"Red flags" can help identify suspicious claims

There are numerous "RED FLAGS" that can raise suspicions regarding the validity of an alleged injury, claim or incident. No single "red flag" is necessarily suspicious and the presence of a "red flag" does not firmly establish that a fraud has been committed.

While "RED FLAGS" can assist in evaluating a claim, only a THOROUGH INVESTIGATION can uncover all the facts. "Red flags", identified at anytime during the claims evaluation process, do indicate a need for additional review. If you have doubts about an alleged claim or incident, please call our office. Our job is to assist you in verifying the facts of the claim.

Suspicious Time Element

- Monday/Friday morning injury
- Claim occurs prior to layoff, strike or termination
- Employee has been recently hired
- Employee experiences a "seasonal" or recurrent injury
- Loss reported after employee terminated
- Employee took unexplained or excessive time off prior to the claimed injury
- Co-workers believe the employee was injured while engaged in a recreational activity
- Employee is nomadic and has a history of short-term employment

Malingering

- Complaints persist long after the doctor issues a return to work
- Disability policy provides benefits in addition to those of workers comp
- Lack of cooperation with rehab personnel
- Employee protests about returning to work and never seems to improve
- Employee complains to carrier's CEO or executive management at home office to press for benefits
- Employee refuses to allow visits at home and insists on wanting plenty of advanced notice prior to a visit
- Employee suffers from new symptoms as the doctor is about to release him back to work

continued on back

Nature and Extent of Injury

- Type of injury unusual in the employee's line of work
- Employee has a soft tissue injury; makes subjective complaints that cannot be objectively verified
- Injuries do not coincide with claimed circumstances of accident
- Employee refuses diagnostic procedures to confirm injury
- Accident occurs in an area where employee would not normally be
- Co-workers provide information that indicates the injury is not valid
- Employee is experiencing financial difficulties
- Injury occurred after being denied vacation/personal time off

Ambiguous Claim

- Date, time and place of accident unknown
- Specific details of injury not recalled
- Report of injury not timely and immediate
- Conflict in accident description between employer's report and initial medical evaluation
- Injury/accident not witnessed; witness accounts inconsistent with employee's story
- Pattern of suspicious claims from employee

Claimant Working

- Difficulty reaching claimant at home during normal, daytime hours
- Frequent interstate relocations while receiving benefits
- No permanent address or uses a post office box/rural route
- Frequently missed or cancelled doctor or therapist appointments
- Claimant's lifestyle does not coincide with reported/known income
- Employee is observed with calloused hands and grease under fingernails
- Neighborhood canvass reveals claimant works another job
- Surveillance video appears to verify employment

Legal Considerations

- Immediate representation by attorney
- Employee hires an attorney known to handle suspect claims
- Excessive demands for permanency award
- Same attorney/doctor combination have previously handled similar claims

Medical Considerations

- Prolonged treatment for relatively minor injury
- Prescribed treatments and/or medications do not correspond with claimed injury
- Summary medical bills submitted without itemization
- Medical bills appear excessive; submitted as photocopies
- Treating physician/therapist known for handling suspect claims
- Unnecessary hospitalization
- Psychological overlays claimed
- New or additional medical problems attributed to the original injury
- Evidence of doctor shopping
- Workers compensation insurer and health carrier billed simultaneously with payment accepted from both
- "Boilerplate" reports similar or identical to other reports from doctor/clinic
- Unbundling noted in medical bills
- Injuries are all subjective, i.e., pain, headaches, nausea, inability to sleep
- Treatment dates appear on holidays or other days that facilities would not normally be open
- Diagnosis is inconsistent with treatment



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