

Hip Injuries From Workplace Falls and Your New York Workers' Comp Rights

A Fractured Hip or Torn Labrum Can End a Career. Your Benefits Don't Have to End With It.

Being [hurt at work](#) is frightening enough when the injury is minor. When you've fallen from a ladder, slipped on a wet floor, or been struck by a vehicle and the impact lands on your hip, the picture changes entirely. Hip fractures, labral tears, and femoral neck injuries are among the most disabling outcomes of workplace accidents in New York, and they can mean surgery, months of rehabilitation, and sometimes a hip replacement before a worker can return to any meaningful level of activity. Many injured workers don't realize how much their workers' compensation benefits can cover, or how hard they may have to push to receive all of it.

Our New York workers' compensation lawyers at [Pasternack Tilker Ziegler Walsh Stanton & Romano LLP](#) have represented injured workers with hip injuries for decades, including construction workers who fell from heights, warehouse workers whose hips were fractured in forklift accidents, and hospital employees who slipped in wet corridors. The severity of a hip injury doesn't automatically translate into the benefits the law entitles you to receive, and the gap between what you're owed and what an insurance carrier is willing to pay is exactly where legal representation matters most.

Quick Facts

- **Notice Deadline** – Give your employer written notice of the accident within 30 days.
- **Claim Deadline** – File your claim with the Workers' Compensation Board within two years of the accident.
- **Weekly Wage Benefit** – Lost-wage benefits pay two-thirds of your average weekly wage, up to \$1,281.50 a week for injuries between July 1, 2026, and June 30, 2027.
- **How a Hip Is Rated** – New York rates a permanent hip injury as a loss of use of the leg, which is worth up to 288 weeks of benefits.
- **Hip Replacement Baseline** – Under the Board's impairment guidelines, a hip replacement with a good result starts at a 35% loss of use of the leg.

What Types of Hip Injuries Happen Most Often at Work?

The hip is a ball-and-socket joint built for stability under load, but it's vulnerable to sudden trauma, especially the kind that happens in falls from heights, vehicle impacts, and crush events. Workplace hip injuries range from soft tissue strains that heal with conservative care to [catastrophic fractures](#) that require extensive reconstruction.

The hip injuries our attorneys see most often in workers' compensation claims include:

- **Hip Fractures and Femoral Neck Breaks** – [Falls from ladders](#), scaffolding, and other elevated surfaces frequently fracture the hip, particularly when a worker lands directly on their side. Femoral neck fractures are especially serious because they can cut off blood supply to the femoral head and lead to avascular necrosis, a condition that may eventually require a total hip replacement.
- **Labral Tears From Impact or Repetitive Stress** – The labrum is a ring of cartilage that lines the hip socket, stabilizes the joint, and cushions impact. A hard fall or a single traumatic event at work can tear it, causing deep groin pain, a locking or catching sensation, and lost mobility. Doctors often try physical therapy and injections first, but many labral tears ultimately need arthroscopic surgery.
- **Hip Dislocations** – A high-energy impact, such as being struck by a vehicle or [pinned by a forklift](#), can force the femoral head completely out of the socket. A dislocated hip is a medical emergency that has to be put back in place quickly, and it can damage the sciatic nerve, blood vessels, and surrounding soft tissue even after the joint is repositioned.
- **Acetabular Fractures** – The acetabulum is the socket portion of the hip joint, formed by the pelvis. Crush injuries, [falls from significant heights](#), and serious vehicle accidents can fracture it in patterns that require complex surgical reconstruction and a long recovery.
- **Greater Trochanter Fractures and Bursitis** – The bony prominence on the outer hip, called the greater trochanter, often takes the impact when a worker lands on their side. These fractures can be accompanied by trochanteric bursitis, which can leave a worker with chronic hip pain long after the bone heals.

How a Hip Injury Gets Reported and Claimed in New York

Reporting a workplace hip injury correctly and promptly is the foundation of a successful claim. Under [Workers' Compensation Law § 18](#), you have to give your employer written notice within 30 days of the accident, and under [Section 28](#), you have two years from the accident to file a claim with the Workers' Compensation Board. The Board can excuse late notice in limited circumstances, such as when the employer already knew about the accident, but missing either deadline gives the carrier an argument you don't want it to have.

When a fall causes the injury, document the accident right away. Witness names, photographs of the hazard that caused the fall, the incident report, and the observations of responding emergency personnel all become part of your case. Workers who document the scene thoroughly are in a much better position to answer a carrier's argument that the injury didn't happen at work or isn't as serious as claimed.

After reporting the injury to your employer, you'll need to [seek medical care](#) from a provider authorized by the Workers' Compensation Board, and you should tell every provider that the injury happened at work. Your treating physician's diagnosis and treatment plan drive nearly every benefit that follows, including medical coverage, wage replacement while you can't work, and the eventual evaluation of any permanent impairment.

Getting Hip Surgery and Rehabilitation Approved

A serious hip injury often leads to surgery, either to repair the damaged structures or, in severe cases, to replace the joint. Under New York law, [all necessary medical treatment](#) for a work injury is the insurance carrier's responsibility. That includes the pre-surgical evaluation, the surgery itself, hospital stays, post-operative physical therapy, and medically necessary equipment such as walkers or raised toilet seats during recovery.

The Board's [Hip and Groin Medical Treatment Guidelines](#), in effect since May 2, 2022, set the standard for what care is considered appropriate. When your surgeon recommends treatment that's consistent with those guidelines, the Board says prior authorization isn't required. When the recommended care falls outside the guidelines, your doctor has to request a variance and explain why it's medically necessary for you.

Carriers often deny those requests by arguing that the injury isn't related to the accident or that conservative care hasn't been exhausted. A denial isn't the final word. Depending on how it was denied, your doctor can ask the [Board's Medical Director's Office](#) to review it, or your attorney can take the dispute to a [hearing](#) before a Workers' Compensation Law Judge. Physical therapy works the same way, because recovery from hip surgery can take many months and sometimes more than a year, and sessions beyond the guideline limits need careful documentation from your treating physician.

How New York Rates a Permanent Hip Injury

The hip isn't listed as its own body part in New York's workers' compensation schedule. Instead, a permanent hip injury is rated as a [schedule loss of use](#) of the leg, and under [Workers' Compensation Law § 15\(3\)](#), total loss of use of a leg is worth 288 weeks of benefits. A doctor assigns a percentage of loss once you've reached [maximum medical improvement](#), and that percentage multiplied by 288 gives the number of weeks you're paid at your compensation rate. A 35% loss of use, for example, works out to about 101 weeks of benefits.

The Board's [2018 Impairment Guidelines](#) set starting points for the most serious hip outcomes:

Hip Outcome	How It's Rated	Guideline Starting Point
Hip replacement with a good result	Loss of use of the leg	35%, with more added for lost motion, leg-length difference, or other deficits
Removal of the femoral head and neck without a replacement	Loss of use of the leg	50%, plus additional loss for mobility deficits
Fractured pelvis with lasting hip impairment	Loss of use of the leg, considered at the end of two years	Typically 15% to 20%

Hip Outcome	How It's Rated	Guideline Starting Point
Other hip injuries, such as labral tears and healed fractures	Loss of use of the leg	Based on measured loss of flexion, rotation, and side-to-side motion

Consider a construction worker who falls eight feet from an unprotected platform, fractures his femoral neck, and needs a total hip replacement. He finishes physical therapy and walks without a cane, but he can't go back to physical labor and has chronic pain when he stands or walks for long. At the permanency stage, his attorney presents orthopedic evidence of every measurable deficit, including lost range of motion and any leg-length difference, because each one can add to the 35% baseline. Carriers often send workers to their own examiners, who may argue for a lower percentage, and every percentage point is worth nearly three weeks of benefits.

The schedule award itself is based on the physical loss, not on the job you can no longer do. That's why the worker's inability to return to construction matters in other ways. If a hip injury is rated at 50% or more loss of use of the leg and, by itself, still limits your ability to earn a living after the award runs out, Section 15(3)(v) allows additional compensation for that lost earning capacity. To qualify, you generally have to take part in a Board-approved rehabilitation program, or cooperate with efforts to set one up and be found not to be a feasible candidate. [Vocational rehabilitation](#) can also help a worker who can't return to their prior occupation train for a new one.

The Full Range of Benefits After a Serious Hip Injury

Workers who suffer significant hip injuries in New York are entitled to a range of benefits that goes well beyond the first hospital visit, which often surprises workers who assumed workers' comp would only cover the emergency care.

- **Medical Coverage for All Related Treatment** – Office visits, diagnostic studies, surgery, hospital stays, and rehabilitation connected to the work injury are the carrier's responsibility. That can include follow-up care years later if complications develop from the original injury.
- **Lost Wage Benefits While You Recover** – While you can't work, or while you're [working in a reduced capacity at a lower-paying job](#), workers' comp replaces part of your income. Temporary total disability pays two-thirds of your average weekly wage up to the [state maximum](#), which is \$1,281.50 a week for injuries from July 1, 2026, through June 30, 2027. Partial disability benefits help cover the gap if you return to lighter work at lower pay.
- **A Schedule Loss of Use Award for Permanent Impairment** – Once you've reached maximum medical improvement, the percentage of loss of use assigned to your leg determines the number of weeks in your award, which is often paid in a lump sum.

- **Reimbursement for Medical Travel and Related Costs** – Travel to medical appointments, prescription costs, and certain durable medical equipment are reimbursable under New York workers' comp rules.

An Independent Medical Exam Can Threaten What You've Built

Insurance carriers can schedule an [independent medical examination](#) at various points in your case, and they use those exams strategically. IME doctors hired by the carrier often write reports that minimize the injury, dispute its connection to the accident, or conclude that you can return to work sooner than your treating physician recommends.

New York law gives you real protections at these exams. Under [Workers' Compensation Law § 137](#), you must receive notice at least seven business days in advance, you have the right to bring someone with you, and you have the right to video record or otherwise record the exam. The examiner also has to send the report to you, your attorney, your doctor, the carrier, and the Board on the same day.

The carrier's IME isn't the final word, because your treating physician's findings and the full medical record carry significant weight at a hearing. Workers with [pre-existing conditions](#) are especially likely to face an IME report claiming the hip problem came before the accident. An experienced workers' comp attorney knows how to show that a work accident aggravated an earlier condition and make sure the record reflects that distinction.

When a Fall on a Construction Site Opens a Second Claim

Workers' comp is usually your only remedy against your own employer, but it isn't always your only claim. When a hip injury comes from a fall from a ladder, scaffold, or unprotected platform on a construction site, [New York Labor Law § 240\(1\)](#), often called the Scaffold Law, places responsibility on property owners and general contractors to provide proper fall protection. Under the [Scaffold Law](#), a worker's own carelessness generally doesn't reduce the recovery when a safety device violation was a cause of the fall.

A [third-party lawsuit](#) can recover damages workers' comp never pays, including [pain and suffering](#) and lost earnings beyond what the comp system pays. The comp carrier generally has a lien on that recovery under [Section 29](#), so the two cases need to be handled together from the start. The construction worker in the example above would likely have both claims.

Hip Injuries Don't Have to Define the Rest of Your Working Life

The pain, the surgeries, the months of physical therapy, and the uncertainty about whether you'll ever do the work you did before are all real, and New York's workers' compensation system recognizes them. These benefits exist because the Legislature understood what a serious workplace injury does to a person's life and livelihood.

Hiring a workers' comp attorney costs you nothing up front. Our fee is [approved by the Workers' Compensation Board](#) and paid out of what we recover, and if we don't win, you don't have to pay anything. [Contact us today](#) for a free consultation. We'll review how your injury happened,

explain what you're entitled to receive, and make sure the carrier's doctors and denials aren't the last word on your recovery.