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Strengthening Return-to-Work Outcomes: A Guide to Vocational Case Management for Claims Professionals

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3 MIN READ

When a workplace injury disrupts an employee's ability to work, the path back to productivity can be complex. Vocational case management (VOC) services provide critical support in navigating this journey, ensuring better outcomes for injured or ill employees and greater claims efficiency for adjusters and carriers.

What is Vocational Case Management?

Vocational case management focuses on helping injured or ill employees return to suitable, gainful employment. This involves assessing the individual's skills, education, and physical capabilities; identifying job opportunities; supporting retraining where necessary; and facilitating a structured return to the workforce.

For claims professionals, early involvement of a vocational case manager can make the difference between a prolonged, costly claim and a timely, cost-effective resolution.

When Vocational Case Management is Triggered

Vocational referrals are commonly triggered when:

- An employee cannot return to their pre-injury employer.
- Physical restrictions prevent full-duty work.
- There is limited work history or transferable skills.
- Language barriers, limited education, or literacy issues impact employability.
- Labor market information or wage-earning capacity data is needed to support settlement.

Regulatory Considerations: Why Knowing the Rules Matters

Vocational rehabilitation is not simply a best practice — it is often shaped, and sometimes mandated, by state or federal regulations.

For example:

- Nevada mandates vocational rehabilitation when an injured or ill employee has permanent restrictions that prevent returning to the pre-injury job. Insurers must provide a panel of vocational rehabilitation counselors for selection.
- California, Oregon, and Wisconsin have structured or mandatory vocational rehabilitation programs, while other states offer services case-by-case.
- Federal acts like FELA (Federal Employers' Liability Act), the Defense Base Act, and the Longshore and Harbor Workers' Compensation Act each have unique vocational rehabilitation provisions.

Because vocational requirements vary by jurisdiction, adjusters must stay informed — or partner with vocational experts who understand the regulatory landscape. An experienced vocational case manager can help ensure compliance while positioning the case for optimal resolution.

Core Services Offered

- Vocational case management services typically include:
 - Vocational Assessments: Determining transferable skills and potential career paths.

Overcoming Challenges: Motivation and Resistance

Adjusters know that not every injured or ill employee is motivated to return to work. Vocational case managers are skilled in addressing resistance, building trust, and coaching injured or ill employees through obstacles that delay return to work. When engagement efforts are unsuccessful, the vocational manager documents all activity and consults with the adjuster to determine next steps.

Flexibility and Ease of Referral

Vocational assessments can be completed in-person or remotely, offering flexibility to meet case needs. Referrals are typically simple — one call, email, or web form is all it takes to initiate services.

Why It Matters for Adjusters

Early vocational intervention is an investment in claim closure. By proactively addressing employability barriers, adjusting teams can:

- Shorten claim duration.
- Reduce indemnity and medical spend.
- Support better settlement outcomes.
- Mitigate litigation risk by showing reasonable efforts to facilitate return-to-work.

Vocational case management doesn't just help injured or ill employees — it helps adjusters move claims forward, with better outcomes for everyone involved.

Support injured employees with expert vocational case management. [Learn how our vocational specialists](#) help align capabilities with job opportunities for sustainable return-to-work success.



