

**U.S. Department of Labor**

Office of Workers' Compensation Programs  
Division of Energy Employees Occupational  
Illness Compensation  
Washington, DC 20210



Date: January 4, 2019

MEMORANDUM FOR: RACHEL P. LEITON  
Director  
Division of Energy Employees Occupational Illness Compensation  
Office of Workers' Compensation Programs

THROUGH: JOHN VANCE  
Chief, Branch of Policy  
Division of Energy Employees Occupational Illness Compensation  
Office of Workers' Compensation Programs

FROM: CHRISTOPHER R. ARMSTRONG, MD, MPH, FACPM, FAsMA  
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Office of Workers' Compensation Programs

SUBJECT: Audit of Third Quarter (CY 2018) Contract Medical Consultant  
(CMC) Reports

I conducted an audit of contract medical consultant (CMC) reports billed during the third quarter of Calendar Year 2018 to ensure that appropriate medical specialists are being assigned to advise the Government, and that the reports we receive are well-reasoned, complete, and responsive to the needs of our claims examiners. My audit included a review of 49 randomly selected CMC reports for five distinct services: causation file reviews, clarification of diagnosis, impairment ratings, second opinions, and supplemental file reviews. I used a checklist to assess the reports for adherence to contract requirements and program policies promulgated in the *Procedure Manual* and the *Physician's Reference Manual*. The audit included 16 causation file reviews, 5 clarification of diagnosis reports, 14 impairment ratings, 4 second opinions, and 10 supplemental file reviews.

Twelve of the 49 reports clearly exceeded expectations, 30 met expectations, and seven need improvement. The reports by [REDACTED] were thorough, well-reasoned, informative, and helpful. [REDACTED] each prepared two of the seven reports that need improvement. Three of the seven reports that need improvement were impairment evaluations.

Three of the reports demonstrated inconsistency between the impairment rating assigned and the evidence in the medical record. The CMC based his whole person impairment (WPI) rating on the WPI rating assigned by another CMC in one report and failed to apply the "at least as likely as not" standard in one report. One report included an impairment rating for a condition, which had not been accepted by the Office of Workers' Compensation Programs. The CMC combined more than one WPI rating for the same organ system in one report and failed to answer all of the claims examiner's questions in one report. Several of the reports demonstrated more than one deficiency. Three of the seven reports may have resulted in an inappropriate impairment determination.

#### Follow-Up Action Plan

Victoria Lewis, the Contracting Officer's Technical Representative (COTR), will notify QTC of the reports assessed as exceeding expectations and the deficiencies in the reports assessed as needing improvement. QTC will be given the opportunity to respond, in writing, to each deficiency.