

U.S. Department of Labor

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



Date: June 14, 2018

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
Medical Director
Division of Energy Employees Occupational Illness Compensation
Office of Workers' Compensation Programs

A handwritten signature in blue ink, appearing to read "C. Armstrong", is written over the "FROM:" line.

SUBJECT: Audit of Fourth Quarter (CY 2017) Contract Medical Consultant
(CMC) Reports

I conducted an audit of contract medical consultant (CMC) reports completed during the fourth quarter of Calendar Year 2017 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 four distinct services: causation file reviews, impairment ratings, supplemental file reviews, and second medical opinions. 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 19 causation file reviews, 18 impairment ratings, ten supplemental file reviews (clarification of diagnosis, treatment, or test results), and two second medical opinions.

Five of the 49 reports clearly exceeded expectations, 36 met expectations, and eight need improvement. The reports by [REDACTED] and [REDACTED] were thorough, well reasoned, informative, and helpful. [REDACTED] prepared two of the eight reports that need improvement.

Four of the reports that need improvement demonstrated inappropriate use of the tables in *AMA Guides™ to the Evaluation of Permanent Impairment, Fifth Edition*. The CMC failed to note

that the claimant had achieved maximum medical improvement (MMI) in two of the reports and failed to include the required conflict of interest statement in one of the reports. One of the reports was not consistent with the evidence in the file. One CMC based his whole person impairment (WPI) rating on the WPI rating assigned by another CMC. One report contained errors in arithmetic and the statement of accepted facts (SOAF) was unclear in one case. Several of the reports demonstrated more than one deficiency. Five of the eight reports may have resulted in an inappropriate determination.

Follow-Up Action Plan

██████████ has completed a remediation program approved by us. We have directed QTC to assign him no more than three cases per month, and not to assign him any cases involving claimants in the terminal stages of their illness.

Dionne Perry, the Contracting Officer's Representative, 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.