

**U.S. Department of Labor**

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



Date: August 3, 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 black ink, appearing to be "C. Armstrong", written over the "FROM:" section of the memorandum.

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

I conducted an audit of contract medical consultant (CMC) reports completed during the first 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 50 randomly selected CMC reports for three distinct services: causation file reviews, impairment ratings, 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 20 causation file reviews, 20 impairment ratings, and ten supplemental file reviews (clarification of diagnosis, treatment, or test results).

Three of the 50 reports clearly exceeded expectations, 37 met expectations, and ten need improvement. All ten of reports that need improvement were impairment evaluations. The reports by [REDACTED] (causation), [REDACTED] (supplemental), and [REDACTED] (supplemental) were thorough, well-reasoned, informative, and helpful. Unfortunately, [REDACTED] also prepared three of the ten reports that need improvement.

Five of the reports that need improvement demonstrated inappropriate use of the tables in *AMA Guides™ to the Evaluation of Permanent Impairment, Fifth Edition*. In four of the reports, the

CMC based his whole person impairment (WPI) rating on the WPI rating assigned by another CMC. The CMC combined more than one WPI rating for the same organ system in three of the reports. Two of the reports were not consistent with the evidence in the file. One report included an impairment rating for a condition, which had not been accepted by the Office of Workers' Compensation Programs and the CMC failed to note that the claimant had achieved maximum medical improvement (MMI) in one report. Several of the reports demonstrated more than one deficiency. Nine of the ten reports may have resulted in an inappropriate determination.

#### Follow-Up Action Plan

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.