

**U.S. Department of Labor**

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



Date: November 2, 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

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

I conducted an audit of contract medical consultant (CMC) reports billed during the second 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 six distinct services: causation file reviews, clarification of diagnosis, impairment ratings, referee opinions, 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 19 causation file reviews, 1 clarification of diagnosis, 20 impairment ratings, 1 referee opinion, 1 second opinion, and 8 supplemental file reviews.

Five of the 50 reports clearly exceeded expectations, 36 met expectations, and nine need improvement. Eight of the nine reports that need improvement were impairment evaluations. The reports by [REDACTED] (causation) were thorough, well-reasoned, informative, and helpful. [REDACTED]

The CMC based his whole person impairment (WPI) rating on the WPI rating assigned by another CMC in five of the reports that need impairment. Three of the reports were not consistent with the evidence in the file. Two reports included an impairment rating for a condition, which had not been accepted by the Office of Workers' Compensation Programs. One of the reports demonstrated inappropriate use of the tables in *AMA Guides™ to the Evaluation of Permanent Impairment, Fifth Edition*. 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. Each of the nine reports may have resulted in an inappropriate 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.