AMENDMENT OF SOLICITATION/MODIFIC	CONTRACT ID CODE		PAGE OF	PAGES						
2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE	DATE	4. RE	 :QUISITION/PURCHASE REQ. NO.	5. PR	 DJECT NO.	(If applicable)			
129	11/30/2	010 1	11E	M000586						
6. ISSUED BY CODE	00601		7. AI	OMINISTERED BY (If other than Item 6)	CODE	00601	1			
Richland Operations Office U.S. Department of Energy Richland Operations Office P.O. Box 550, MSIN A7-80 Richland WA 99352			Richland Operations Office U.S. Department of Energy Richland Operations Office P.O. Box 550, MSIN A7-80 Richland WA 99352							
8. NAME AND ADDRESS OF CONTRACTOR (No., street)	et, county, State and	I ZIP Code) (:	(x) 9.	A. AMENDMENT OF SOLICITATION NO.						
COMPLIMED COTENCES CODDODAMIC	\ N T	<u>(</u>	(7.)							
COMPUTER SCIENCES CORPORATIO Attn: MIKE GAFFNEY)IN		9	B. DATED (SEE ITEM 11)						
15245 SHADY GROVE ROAD SUITE 200										
ROCKVILLE MD 208506247			x 10A. MODIFICATION OF CONTRACT/ORDER NO. DE-AC06-04RL14383							
			1	0B. DATED (SEE ITEM 13)						
CODE 053506312	FACILITY COI	DE		01/06/2004						
	11. THIS ITE	EM ONLY APPLIES TO AN	MEND	MENTS OF SOLICITATIONS						
THE PLACE DESIGNATED FOR THE RECEIPT OF virtue of this amendment you desire to change an of to the solicitation and this amendment, and is received 12. ACCOUNTING AND APPROPRIATION DATA (If respectively) Not Applicable 13. THIS ITEM ONLY APPLIES TO 1	fer already submit ed prior to the ope equired)	ted, such change may be ning hour and date specifi	made ied.		r letter r	makes refere				
Section I.1 - 52.243-2 -	Changes -	See Block 14 for	r Co	IGES SET FORTH IN ITEM 14 ARE MADE IN T entinuation of Modification Au IDMINISTRATIVE CHANGES (such as changes Y OF FAR 43.103(b).	thori	ty				
C. THIS SUPPLEMENTAL AGREEME	NT IS ENTERED	INTO PURSUANT TO AU	JTHO	RITY OF:						
D. OTHER (Specify type of modification	n and authority)									
E. IMPORTANT: Contractor X is not.	is required t	o sign this document and i	returi	n 0 copies to the issuin	g office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION Continuation of Block 13A -	Cost Rei	mbursement (A	ug	1987), Alternate II (Ap	r 19					
a. The purpose of this modereduction in service to the Work Section C.9.f is revise Assistance services effective	Pacific ed to dis	Northwest Nat continue PNNL	ion se	ervices with the excepti	Stat on o	ement f Empl	Loyee			
b. AMH is directed to prove receipt of this modification follows:		_	-	-						
Continued										
Except as provided herein, all terms and conditions of 15A. NAME AND TITLE OF SIGNER (<i>Type or print</i>)	the document refe	erenced in Item 9A or 10A,		eretofore changed, remains unchanged and in full NAME AND TITLE OF CONTRACTING OFFICE.						
						, c or print)				
4FD CONTRACTOR (CETTER)		Leo Barr 2:2:		ssell D. Walter		1	DATE OF STREET			
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		. UNITED STATES OF AMERICA		160	C. DATE SIGNED			
(Signature of person authorized to sign)			-	ignature on File (Signature of Contracting Officer)		_ 12	2/14/2010			
(i	1	, . J		1				

 CONTINUATION SHEET
 REFERENCE NO. OF DOCUMENT BEING CONTINUED DE-AC06-04RL14383/129
 PAGE DE-AC06-04RL14383/129
 OF DE-AC06-04RL14383/129

NAME OF OFFEROR OR CONTRACTOR

COMPUTER SCIENCES CORPORATION

EM NO.	SUPPLIES/SERVICES	QUANTITY		UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
- 	Proposal: 45 Days*		Н		
	Commence Negotiations: 75 days				
	Mutual agreement of definitization of change:				
	120 days				
	Submission of current cost or pricing data (if				
	over \$650,000): 120 days				
	Definitization of contract modification: 140 days				
	*The number of days specified are the number of				
	calendar days after contractor receipt of this				
	modification.				
	FOB: Destination				
	Period of Performance: 01/06/2004 to 09/30/2011				
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d. Monitored Care

- 1. Monitored care of ill or injured employees by occupational medical physicians is highly desirable, to maximize recovery and safe return to work and to minimize lost time and associated costs. Hanford Site contractor and DOE management have the responsibility to advise the Contractor when an employee has been absent because of an illness or injury for 5 or more consecutive workdays, or has experienced excessive absenteeism.
- 2. Performance Objective No. C.9.d.2. The Contractor shall:
 - i. Monitor worker's compensation cases, when appropriate, through appropriate return visits, contractor communication with the DOE-RL third party Workers' Compensation claims processor (the third party claims processor for DOE-RL is CCS Holdings, L.P., as of 03/01/03), and physician-to-physician communication with private physicians where applicable. The goal is to assist the employees in their recovery and to facilitate their return to duty at the earliest practical time. Reasonable accommodations or restrictions may be a part of this rehabilitation process and need to be closely coordinated with the human resources department and line management of site contractors and DOE.
 - ii. Include a work conditioning program(s) as part of the monitored care program to support/expedite fulfillment of fitness-for-duty, work capacity, and qualification requirements.
 - iii. Make medical fitness-for-duty recommendations regarding employees for all conditions that may influence performance or work suitability.

e. Legacy Health Issues

- 1. Performance Objective No. C.9.e.1. The Contractor shall implement testing and monitoring programs as needed to manage legacy health issues (e.g., chronic beryllium disease/beryllium sensitivity, asbestosis, silicosis, etc.).
- 2. Inform, via personal letter, all current and past participants in the voluntary medical screening program for beryllium that the results of their examination will be kept confidential unless the individual tests positive for beryllium sensitization or chronic beryllium disease.
- 3. The risk communication specialist shall engage local medical societies in order to raise awareness of the signs, symptoms and treatment of chronic beryllium disease.

f. Employee Counseling and Health Promotion*

- 1. Performance Objective No. C.9.f.1. The Contractor shall operate employee counseling and health promotion programs that include:
 - i. Employee Assistance and Wellness Programs,
 - ii. Health and wellness education (e.g., smoking cessation, hearing protection, ergonomics, fitness and diet, etc.), and

- iii. An immunization program (e.g., influenza immunizations).
- * With the exception of Employee Assistance services, PNNL does not receive the services in C.9.f.
 - g. Occupational Health Process Improvement
 - 1. Necessary Condition No. C.9.g.1. The Contractor shall:
 - i. Assess and implement Hanford Occupational Health Process (HOHP) improvements (e.g., use of technology to improve automation/accessibility/usefulness), and
 - ii. Operate, maintain and improve the Employee Job Task Analysis (EJTA) system. The EJTA system is a Hanford-developed software system used to document workers' essential job functions, physical job requirements, medical qualifications, potential exposures, etc.
 - The EJTAs will be prepared by DOE and the Site contractors and provided to the Contractor for processing in the Risk Management Medical Surveillance (RMMS) system.
 - iii. Operate, maintain and improve the RMMS system. The RMMS system is a Hanford-developed software system that analyzes EJTA data and assigns medical monitoring and qualification requirements.
 - iv. Confer to DOE all rights of ownership and use of any electronic data management application developed by the Contractor under this contract, including all documentation for the use of the application.

h. Records Management

- 1. Necessary Condition No. C.9.h.1. The Contractor shall:
 - i. Operate, maintain and improve the existing medical records system.
 - ii. Protect the privacy of employees and the confidentiality and physical security of all employee medical records,
 - iii. Provide access to employee medical and behavioral health records in a manner consistent with:
 - A. The Privacy Act as codified in 10 CFR 1008, and
 - B. "Access to Exposure and Medical Records" as codified in 29 CFR 1910.1020 (OSHA Standard),
 - iv. Provide copies of medical records to other professional medical and behavioral health providers and third-party medical claims processor(s) as appropriate and in a manner consistent with applicable laws and standards (e.g., the Privacy Act, the Health Insurance Portability and Accountability Act),