

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT			1. CONTRACT ID CODE	PAGE OF PAGES 1 2
2. AMENDMENT/MODIFICATION NO. M007	3. EFFECTIVE DATE See Block 16C	4. REQUISITION/PURCHASE REQ. NO. 06-05RL14661.502	5. PROJECT NO. (if applicable)	
6. ISSUED BY U.S. Department of Energy Richland Operations Office P. O. Box 550, MSIN A7-80 Richland, WA 99352		7. ADMINISTERED BY (if other than item 6) Same as item 6.		
8. NAME AND ADDRESS OF CONTRACTOR (No. Street, county, State and ZIP Code) CCSI, L.P. 300 East Royal Lane Suite 200 Irving, TX 75039 ATTN: Lisa McManus		(7)	9A. AMENDMENT OF SOLICITATION NO.	
CODE			9B. DATED (SEE ITEM 11)	
FACILITY CODE			10A. MODIFICATION OF CONTRACT/ORDER NO. DE-AC06-05RL14661	
			10B. DATED (SEE ITEM 11) 08/23/2004	

11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS

The above numbered solicitation is amended as set forth in item 14. The hour and data specified for receipt of Offers is extended, is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods:
 (a) By completing items 8 and 15, and returning one (1) copy of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATA SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and data specified.
 12. ACCOUNTING AND APPROPRIATION DATA (if required)

13. THIS ITEM APPLIES ONLY TO MODIFICATIONS OF CONTRACTS/ORDERS, IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.

(7)	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.
	B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation data, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:
X	D. OTHER Specify type of modification and authority Contract Clause F.3 titled "Reporting Requirements" & Mutual Agreement of the Parties

E. IMPORTANT: Contractor is not, is required to sign this document and return 1 copy(ies) to the issuing office.

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible)
 The purpose of this modification is to change contract Section H.

REPLACEMENT PAGE H-12 ATTACHED.

Except as provided herein, all terms and conditions of the document referenced in item 2A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print) Lisa M. McManus President	16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print) Jan Osso
15B. CONTRACTOR/OFFEROR	16B. UNITED STATES OF AMERICA
(Signature of person authorized to sign)	(Signature of Contracting Officer)
15C. DATE SIGNED 14 APR 2006	15C. DATE SIGNED 4-17-2006

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PREVIOUS EDITION UNUSABLE

30-105
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STANDARD FORM 30 (REV. 10-83)
Prescribed by GSA
FAR (48 CFR) 83.243

Workers' Compensation Claims Services
 Contract No. DE-AC06-05RL14661
 Modification M007

Part I
 Section H

- ii. determined related to employment, on a more-probable-than-not basis, and
- iii. attested-to by signature from a licensed physician.

Diagnostic testing for all beryllium exposure claims will be provided at either Harborview Hospital in Seattle, Washington or at National Jewish Hospital in Denver, Colorado (or at other locations deemed acceptable by RL/ORP).

Expenses associated with travel to Harborview or National Jewish for the purpose of diagnosing Beryllium Sensitivity or Chronic Beryllium Disease and surveillance examinations of either condition will be paid; based on the L&I allowable rates. All other travel expenses will be paid in accordance with RCW Title 51.

b. Application Guidelines

- 1. For workers with previously-validated Beryllium Sensitivity:

It is the opinion of medical experts that individuals diagnosed with Beryllium Sensitivity do not suffer any symptoms and no treatment is required other than surveillance exams on an annual basis or as otherwise specified by the physician. Therefore, the Contractor shall not authorize payment of any treatment that is submitted as related to a Beryllium Sensitivity condition, except for annual surveillance examinations.

- 2. For workers with previously-validated Chronic Beryllium Disease (CBD) claims:

According to medical experts, Chronic Beryllium Disease usually originates in the lungs. Research has found that people with Chronic Beryllium Disease often suffer from a variety of other, non-pulmonary illnesses, believed to be caused by CBD.

Accordingly, CCSI shall accept all Workers' Compensation claims for conditions diagnosed as a manifestation of CBD, when such claims are based upon the diagnosis of a physician who specializes in diagnosing and treating CBD, consistent with the criteria set forth in subsection (a.1) above. In such cases, CCSI is authorized to rely solely upon the diagnosis provided by such physician to support the diagnosis and relationship.

- 3. Workers without previously-validated CBD or Beryllium Sensitivity claims:

CCSI shall not authorize/approve any CBD or Beryllium Sensitivity related claim that does not meet with the Valid Claim requirements of subsection (a.1) above.

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