

2. AMENDMENT/MODIFICATION NO. 0008	3. EFFECTIVE DATE See Block 16C	4. REQUISITION/PURCHASE REQ. NO. 18EM004208	5. PROJECT NO. (If applicable)
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6. ISSUED BY Richland Operations Office U.S. Department of Energy Richland Operations Office P.O. Box 550, MSIN A7-80 Richland WA 99352	CODE 00601	7. ADMINISTERED BY (If other than Item 6) Richland Operations Office U.S. Department of Energy Richland Operations Office P.O. Box 550, MSIN A7-80 Richland WA 99352	CODE 00601
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8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code) HPM CORPORATION Attn: Erin Phillips 4304 W. 24TH AVE. SUITE 100 KENNEWICK WA 99382320	(x)	9A. AMENDMENT OF SOLICITATION NO.
		9B. DATED (SEE ITEM 11)
	x	10A. MODIFICATION OF CONTRACT/ORDER NO. DE-EM0002043 DE-DT0012690
		10B. DATED (SEE ITEM 13) 01/05/2017
CODE 012911892	FACILITY CODE	

11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS

The above numbered solicitation is amended as set forth in Item 14. The hour and date 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 _____ copies 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 ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE 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 date specified.

12. ACCOUNTING AND APPROPRIATION DATA (If required)
See Schedule

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

CHECK ONE	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 date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).
X	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF: Base Contract I.139 FAR 52.216-18 and H.43, Task Order Clause FAR 52.243-3, and FAR 43.103(a)
	D. OTHER (Specify type of modification and authority)

E. IMPORTANT: Contractor is not. is required to sign this document and return 1 copies to the issuing office.

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)
DUNS Number: 012911892
This Task Order is subject to base Contract DE-EM0002043 Clause I.70 FAR 52.232-18 Availability of Funds and Task Order Clause FAR 52.232-7 Payments Under Time-and-Materials and Labor-Hour Contracts. In accordance with base Contract Clause I.139 FAR 52.216-18 Ordering, all Terms and Conditions of Contract DE-EM0002043 are incorporated by reference. A. The purpose of this modification is to definitize the change order for changes within the general scope of the Task Order for assistance with the implementation of the Government Furnished Electronic Health Record (EHR). This task order is for special consultative services and additional occupational medical services in support of the EHR in accordance with base Contract Section C.2.3.

Continued ...
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print)	16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print) Marcy J. Aplet-Zelen
15B. CONTRACTOR/OFFEROR (Signature of person authorized to sign)	15C. DATE SIGNED
	16B. UNITED STATES OF AMERICA Signature on File (Signature of Contracting Officer)
	16C. DATE SIGNED 03/09/2018

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT		1. CONTRACT ID CODE	PAGE OF PAGES 1 8
2. AMENDMENT/MODIFICATION NO. 0008	3. EFFECTIVE DATE See Block 16C	4. REQUISITION/PURCHASE REQ. NO. 18EM004208	5. PROJECT NO. (If applicable)
6. ISSUED BY Richland Operations Office U.S. Department of Energy Richland Operations Office P.O. Box 550, MSIN A7-80 Richland WA 99352	CODE 00601	7. ADMINISTERED BY (If other than Item 6) Richland Operations Office U.S. Department of Energy Richland Operations Office P.O. Box 550, MSIN A7-80 Richland WA 99352	CODE 00601
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code) HPM CORPORATION Attn: Erin Phillips 4304 W. 24TH AVE. SUITE 100 KENNEWICK WA 993382320		9A. AMENDMENT OF SOLICITATION NO. <input checked="" type="checkbox"/> (x)	
CODE 012911892		9B. DATED (SEE ITEM 11)	
FACILITY CODE		X 10A. MODIFICATION OF CONTRACT/ORDER NO. DE-EM0002043 DE-DT0012690	
		10B. DATED (SEE ITEM 13) 01/05/2017	

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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 _____ copies 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 ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE 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 date specified.

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

<input type="checkbox"/>	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.
<input type="checkbox"/>	B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).
<input checked="" type="checkbox"/>	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF: Base Contract I.139 FAR 52.216-18 and H.43, Task Order Clause FAR 52.243-3, and FAR 43.103(a)
<input type="checkbox"/>	D. OTHER (Specify type of modification and authority)

E. IMPORTANT: Contractor is not. is required to sign this document and return 1 copies to the issuing office.

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DUNS Number: 012911892

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Continued ...

Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print) Erin Phillips Business & Contracts Manager	16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print) Marcy J. Aplet-Zelen
15B. CONTRACTOR/OFFEROR 	16B. UNITED STATES OF AMERICA
15C. DATE SIGNED 3-9-2018	16C. DATE SIGNED
(Signature of person authorized to sign)	(Signature of Contracting Officer)

CONTINUATION SHEET

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NAME OF OFFEROR OR CONTRACTOR
HPM CORPORATION

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>Details of this Contract change is included on the SF30 Continuation Page of this modification.</p> <p>LIST OF CHANGES: Reason for Modification : Definitize Change Order Period Of Performance End Date changed from 09-MAR-18 to 30-SEP-18 Total Amount for this Modification: \$295,184.19 New Total Amount for this Version: \$682,834.17 New Total Amount for this Award: \$682,834.17</p> <p>CHANGES FOR LINE ITEM NUMBER: 1 Description changed from Total labor with the ceiling of \$374,330.48 which the Contractor exceeds at its own risk. DE-EM0002043 CLIN 0013 OCCMED Hanford - Option Period 3 (Year Five) IDIQ New labor categories with fully burdened fixed hourly rates (direct and subcontracted) as proposed. Labor categories with fully burdened fixed hourly rates in accordance with base Contract Section B.14 as proposed. DE-EM0002043 CLIN 0016 OCCMED Hanford - Option Period 4 (Year Six) IDIQ Labor categories with fully burdened fixed hourly rates in accordance with base Contract Section B.17 as proposed.</p> <p>To Labor (direct and subcontract)</p> <p>Total labor with the ceiling of \$680,155.85 which the Contractor exceeds at its own risk. DE-EM0002043 CLIN 0013 OCCMED Hanford - Option Period 3 (Year Five) IDIQ Fiscal Year 2017 - labor categories with fully burdened fixed hourly rates (direct and subcontract) as proposed in contractor's proposal 17HPM001S-Reissue. Labor categories with fully burdened fixed hourly rates in accordance with base Contract Section B.14 as proposed. DE-EM0002043 CLIN 0016 OCCMED Hanford - Option Period 4 (Year Six) IDIQ Fiscal Year 2018 - labor categories with fully burdened fixed hourly rates (direct and subcontract) as proposed in contractor's proposal 18-HPMC-OMS-PM-044. Labor categories with fully burdened fixed hourly rates in accordance with base Contract Section Continued ...</p>				

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NAME OF OFFEROR OR CONTRACTOR
HPM CORPORATION

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>B.17 as proposed.</p> <p>Total Amount changed from \$374,330.48 to \$680,155.85 Obligated Amount for this modification: \$10,641.18 Incremental Funded Amount changed from \$374,330.48 to \$384,971.66 End Date changed from 09-MAR-18 to 30-SEP-18</p> <p>CHANGES FOR LINE ITEM NUMBER: 2 Description changed from Total Other Direct Costs/Cost Reimbursables ceiling of \$13,319.50 which the Contractor exceeds at its own risk. DE-EM0002043 CLIN 0013 OCCMED Hanford - Option Period 3 (Year Five) IDIQ and DE-EM0002043 CLIN 0016 OCCMED Hanford - Option Period 4 (Year Six) IDIQ Other Direct Costs/Cost Reimbursables as proposed.</p> <p>To Other Direct Costs/Cost Reimbursables</p> <p>Total Other Direct Costs/Cost Reimbursables ceiling of \$2,678.32 which the Contractor exceeds at its own risk. DE-EM0002043 CLIN 0013 OCCMED Hanford - Option Period 3 (Year Five) IDIQ and DE-EM0002043 CLIN 0016 OCCMED Hanford - Option Period 4 (Year Six) IDIQ Other Direct Costs/Cost Reimbursables as proposed for Fiscal Year 2017 in HPMC proposal 17HPM001S-Reissue and Fiscal Year 2018 in contractor's proposal 18-HPMC-OMS-PM-044.</p> <p>Total Amount changed from \$13,319.50 to \$2,678.32 Obligated Amount for this modification: -\$10,641.18 Incremental Funded Amount changed from \$13,319.50 to \$2,678.32 End Date changed from 09-MAR-18 to 30-SEP-18 Delivery Location Code: 00601 Richland Operations Office U.S. Department of Energy Richland Operations Office P.O. Box 550, MSIN A7-80 Richland WA 99352 US</p> <p>Continued ...</p>				

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NAME OF OFFEROR OR CONTRACTOR
HPM CORPORATION

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
00001	<p>Payment: OR for Richland U.S. Department of Energy Oak Ridge Financial Service Center P.O. Box 4307 Oak Ridge TN 37831</p> <p>FOB: Destination Period of Performance: 01/05/2017 to 09/30/2018</p> <p>Change Item 00001 to read as follows (amount shown is the total amount):</p> <p>Labor (direct and subcontract)</p> <p>Total labor with the ceiling of \$680,155.85 which the Contractor exceeds at its own risk.</p> <p>DE-EM0002043 CLIN 0013 OCCMED Hanford - Option Period 3 (Year Five) IDIQ Fiscal Year 2017 - labor categories with fully burdened fixed hourly rates (direct and subcontract) as proposed in contractor's proposal 17HPM001S-Reissue. Labor categories with fully burdened fixed hourly rates in accordance with base Contract Section B.14 as proposed.</p> <p>DE-EM0002043 CLIN 0016 OCCMED Hanford - Option Period 4 (Year Six) IDIQ Fiscal Year 2018 - labor categories with fully burdened fixed hourly rates (direct and subcontract) as proposed in contractor's proposal 18-HPMC-OMS-PM-044. Labor categories with fully burdened fixed hourly rates in accordance with base Contract Section B.17 as proposed. Line item value is: \$680,155.85 Incrementally Funded Amount: \$384,971.66</p> <p>Accounting Info: Fund: 01250 Appr Year: 2017 Allottee: 34 Report Entity: 421601 Object Class: 25610 Program: 1111556 Project: 0001525 WFO: 0000000 Local Use: 0000000 Funded: \$0.00</p> <p>Accounting Info: Fund: 01250 Appr Year: 2017 Allottee: 34 Report Entity: 421601 Object Class: 25610 Program: 1111556 Project: 0001525 WFO: 0000000 Local Use: 0000000 Continued ...</p>				680,155.85

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NAME OF OFFEROR OR CONTRACTOR
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ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
00002	<p>Funded: \$0.00 Accounting Info: Fund: 01250 Appr Year: 2017 Allottee: 34 Report Entity: 421601 Object Class: 25610 Program: 1111668 Project: 0004626 WFO: 0000000 Local Use: 0000000 Funded: \$0.00 Accounting Info: Fund: 01250 Appr Year: 2017 Allottee: 34 Report Entity: 421601 Object Class: 25610 Program: 1111668 Project: 0004626 WFO: 0000000 Local Use: 0000000 Funded: \$0.00 Accounting Info: Fund: 01250 Appr Year: 2017 Allottee: 34 Report Entity: 421601 Object Class: 25610 Program: 1111556 Project: 0001525 WFO: 0000000 Local Use: 0000000 Funded: \$0.00 Accounting Info: Fund: 01250 Appr Year: 2017 Allottee: 34 Report Entity: 421601 Object Class: 25610 Program: 1111668 Project: 0004626 WFO: 0000000 Local Use: 0000000 Funded: \$0.00 Accounting Info: Fund: 01250 Appr Year: 2017 Allottee: 34 Report Entity: 421601 Object Class: 25610 Program: 1111668 Project: 0004626 WFO: 0000000 Local Use: 0000000 Funded: \$10,641.18</p> <p>Change Item 00002 to read as follows (amount shown is the total amount):</p> <p>Other Direct Costs/Cost Reimbursables</p> <p>Total Other Direct Costs/Cost Reimbursables ceiling of \$2,678.32 which the Contractor exceeds at its own risk.</p> <p>DE-EM0002043 CLIN 0013 OCCMED Hanford - Option Period 3 (Year Five) IDIQ and DE-EM0002043 CLIN 0016 OCCMED Hanford - Option Period 4 (Year Six) IDIQ</p> <p>Other Direct Costs/Cost Reimbursables as proposed for Fiscal Year 2017 in contractor's proposal 17HPM001S-Reissue and for Fiscal Year 2018 in contractor's proposal 18-HPMC-OMS-PM-044. Continued ...</p>				2,678.32

CONTINUATION SHEET

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NAME OF OFFEROR OR CONTRACTOR
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ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	Line item value is: \$2,678.32 Incrementally Funded Amount: \$2,678.32 Accounting Info: Fund: 01250 Appr Year: 2017 Allottee: 34 Report Entity: 421601 Object Class: 25610 Program: 1111556 Project: 0001525 WFO: 0000000 Local Use: 0000000 Funded: \$0.00 Accounting Info: Fund: 01250 Appr Year: 2017 Allottee: 34 Report Entity: 421601 Object Class: 25610 Program: 1111668 Project: 0004626 WFO: 0000000 Local Use: 0000000 Funded: \$0.00 Accounting Info: Fund: 01250 Appr Year: 2017 Allottee: 34 Report Entity: 421601 Object Class: 25610 Program: 1111556 Project: 0001525 WFO: 0000000 Local Use: 0000000 Funded: \$0.00 Accounting Info: Fund: 01250 Appr Year: 2017 Allottee: 34 Report Entity: 421601 Object Class: 25610 Program: 1111668 Project: 0004626 WFO: 0000000 Local Use: 0000000 Funded: \$0.00 Accounting Info: Fund: 01250 Appr Year: 2017 Allottee: 34 Report Entity: 421601 Object Class: 25610 Program: 1111668 Project: 0004626 WFO: 0000000 Local Use: 0000000 Funded: -\$10,641.18				

SF30 BLOCK 14 CONTINUATION:

- B. This modification extends the period of performance from March 9, 2018 to September 30, 2018.

This modification changes contract line item number (CLIN) 001 for Labor to include the negotiated labor categories with fully burdened fixed hourly rates (direct and subcontract) for fiscal year (FY) 2018 in accordance with the contractor's proposal 18-HPMC-OMS-PM-044.

This modification changes CLIN 002 for Other Direct Costs (ODC)/Cost Reimbursables to include the negotiated ODCs for FY2018 in accordance with the contractor's proposal 18-HPMC-OMS-PM-044.

This modification moves unused funds of \$10,641.18 from CLIN 002 to CLIN 001 in accordance with the contractor's proposal 18-HPMC-OMS-PM-044.

- C. As full equitable adjustment, the total amount of the Task Order is increased from \$387,649.98 to \$682,834.17 by \$295,184.19. The Ceiling for the Task Order is increased from \$387,649.98 to \$682,834.17 by \$295,184.19.

As full equitable adjustment, the total amount of CLIN 001 is increased from \$374,330.48 to \$680,155.85 by \$305,825.37. The obligation amount for CLIN 001 is increased from \$374,330.48 to \$384,971.66 by \$10,641.18.

As full equitable adjustment, the total amount and obligation amount for CLIN 002 is decreased from \$13,319.50 to \$2,678.32 by \$10,641.18.

- D. The total obligation amount of the Task Order remains \$387,649.98. This modification does not obligate additional funds to the Task Order. This modification is within funds obligated to the Task Order. Accordingly, work under the Task Order, such as described herein, must be performed within the amounts of funds which have been incrementally allotted to the Task Order in accordance with Task Order Clause FAR 52.232-7, "Payments Under Time-and-Materials and Labor-Hour Contracts."
- E. Contractor's Statement of Release: In consideration of the modification agreed to herein as complete equitable adjustment for the contractor's proposal 18-HPMC-OMS-PM-044 in response to the Notice-to-Proceed for Task Order DE-DT0012690 for FY2018, the Contractor hereby releases the Government from any and all liability under this Task Order for further equitable adjustments attributed to the facts or circumstances giving rise to the proposal for adjustment.

Additional adjustments that may result from audits and approval of billing rates of the above-listed negotiated proposal, as stipulated in the Reopener Clause, below, are not subject to this release.

Reopener Clause: At the time of Task Order definitization, the billing rates had not been audited or approved. Therefore, the parties agree that the negotiated fully burdened rates are subject to adjustment based on the results of subsequent audits and approvals. If the results of audits and approval of billing rates indicate a variance from the rates used in this equitable adjustment, the Contracting Officer will make a determination as to whether the variance warrants an adjustment to this Task Order price. Any resultant price change shall be adjusted through negotiation.

All other terms and conditions remain unchanged. End of Modification 008.