Notice of Award

Title of Program: (OASS) Older Americans Act Title III - Supportive Services Award Authority: P.L. 116-131 (OAA)

Grantee: Missouri The Missouri Department of Health and Senior Services Division of Senior Services Director PO Box 570 JEFFERSON CITY, MISSOURI 65102 0507		rvices Grant No.: 2001 Award Instrume Project Period:	Date: July 31, 2020 Grant No.: 2001MOOASS-03 Award Instrument: Grant (Formula) Project Period: 10-01-2019 - 09-30-2021 Budget Period: 10-01-2019 - 09-30-2021	
EIN: DUNS#: 878092600	CFDA : 93	CFDA: 93.044 Object Class Code: 41.15		
Appropriation	CAN	Award This Action	Cumulative Grant Award to Date	
75-20-0142	2020,2994315	\$259,489.00	\$7,284,265.00	
	Total	\$259,489.00	\$7,284,265.00	

ACL Contact Information:

Please find your assigned ACL programmatic and fiscal contacts on ACL's website at <u>https://www.acl.gov/grants/acl-mandatory-grants-programmatic-and-fiscal-contacts</u>.



Terms and Conditions:

1. This grant award is issued under Older Americans Act of 1965, as amended through P.L. 116-131, enacted March 25, 2020. The terms and conditions of this Notice of Award (NoA) and other requirements have the following order of precedence: (1) statute; (2) executive order; (3) program regulation; (4) administrative regulation found in 45 CFR Part 75; (5) agency policies; and (6) Any additional terms and conditions and remarks on NoA.

Please visit ACL's website at https://www.acl.gov/grants/managing-grant to view some of these terms and conditions such as:

SAM.gov / DUNS Requirement

• National Policies including Trafficking Victims Protection Act, Whistleblower Protections, and DOMA: Implementation of Same-Sex Spouses/Marriages

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- Federal Funding Accountability and Transparency Act (FFATA)
- Federal Awardee Performance and Integrity Information System (FAPIIS)

2. By requesting or receiving funds under this award, the recipient assures that it will carry out the project/program described in its approved state plan(s) and will comply with the terms and conditions and other requirements of this award.

3. SF-425 Financial Reporting: Grantee is required to submit SF-425s on a semi-annual basis. Beginning with this FFY2020 grant, the SF-425 and the "AoA Title III supplemental form to the SF-425" shall be submitted using the HHS' Payment Management System (PMS). The "AoA Title III supplemental form to the SF-425" should be attached to the SF-425 in PMS. PMS website is located at: https://pms.psc.gov. Reports are due within 30 days for the periods ending March 31 and September 30 (i.e., due April 30 and October 30), through September 30, 2021, a final PMS drawdown and a final SF-425 are due within 90 days after September 30, 2021 (i.e., due December 30, 2021). If a final SF-425 report will be submitted by December 30, 2021, a semi-annual report is not required to be filed by October 30, 2021.

4. Federal participation cannot exceed 75% of the total State and Area plan administration costs. The remaining 25% represents the State and local matching share. Federal participation cannot exceed 85% of the total III-B (less Long Term Care Ombudsman services outlays), C-1 and C-2 service costs. Of the remaining 15% matching share, one third (5%) must come from State sources. Federal participation cannot exceed 75% of the total III-E costs. The remaining 25% represents the State and local matching share.

5. Federal Cash Reporting: On the SF-425 form, lines 10 a. through c. are reported on a quarterly calendar year basis (for the periods ending 12/31, 3/31, 6/30, 9/30) at the HHS' Payment Management System (PMS). PMS website is located at: https://pms.psc.gov. Reconciliation of advances and disbursements is required for each quarter and the report must be completed within 30 days of the end of each quarter (i.e., by 1/30, 4/30, 7/30, 10/30). This reporting requirement is separate from completing the entire SF-425 as denoted in the financial reporting term.

Remarks:

1. The grant award for this program to your state under the approved plan of the state agency has been approved for the current period of the fiscal year in the amount shown above. Award level represents FY 2020 final funding.

2. Payment under this award will be made available through the HHS Departmental Payment Management System (PMS). PMS provides instructions for making withdrawals of Federal funds. When requesting payment from PMS, please use your P account login and reference the Grant No. listed above for payment. Instructions regarding payments can be obtained at https://pms.psc.gov/training/pms-user-guide.html#Request, or contact your PSC Account Liaison; 1-877-614-5533; PMSSupport@psc.gov.