

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

CDC Procurement and Grants Office

2920 Brandywine Road
Atlanta, GA 30341

NOTICE OF AWARD

AUTHORIZATION (Legislation/Regulations)
301A,311BC,317K2(42USC241A,243BC247BK2)

1. DATE ISSUED MM/DD/YYYY 06/12/2015
2. CFDA NO. 93.752
3. ASSISTANCE TYPE Cooperative Agreement

1a. SUPERSEDES AWARD NOTICE dated
except that any additions or restrictions previously imposed remain
in effect unless specifically rescinded

4. GRANT NO. 5 NU58DP003924-04-00
Formerly 3U58DP003924-03S1
5. ACTION TYPE Non-Competing Continuation

6. PROJECT PERIOD MM/DD/YYYY
From 06/30/2012 Through 06/29/2017

7. BUDGET PERIOD MM/DD/YYYY
From 06/30/2015 Through 06/29/2016

8. TITLE OF PROJECT (OR PROGRAM)
MO PROGRAMS FUNDED THROUGH: COMPREHENSIVE CANCER, CANCER REGISTRY

9a. GRANTEE NAME AND ADDRESS
Missouri Dept. of Health and Senior Services/DSS&R
920 WILDWOOD DR
COMMUNITY AND PUBLIC HEALTH
JEFFERSON CITY, MO 65109-5796

9b. GRANTEE PROJECT DIRECTOR
Belinda Heimericks
PO BOX 570 920 Wildwood Drive
Jefferson City, MO 65102-0570
Phone: 573-522-2800

10a. GRANTEE AUTHORIZING OFFICIAL
Mr. Bret Fischer
920 Wildwood Dr
Division of Administration
Jefferson City, MO 65102-0570
Phone: 5737516014

10b. FEDERAL PROJECT OFFICER
Jamilla Fonseca
4770 Buford Highway
Chamblee, GA 30341
Phone: 770-488-4296

ALL AMOUNTS ARE SHOWN IN USD

11. APPROVED BUDGET (Excludes Direct Assistance)	
I Financial Assistance from the Federal Awarding Agency Only	<input checked="" type="checkbox"/>
II Total project costs including grant funds and all other financial participation	<input type="checkbox"/>
a. Salaries and Wages	135,170.00
b. Fringe Benefits	56,348.00
c. Total Personnel Costs	191,518.00
d. Equipment	0.00
e. Supplies	544.00
f. Travel	2,428.00
g. Construction	0.00
h. Other	49,120.00
i. Contractual	1,117,882.00
j. TOTAL DIRECT COSTS	1,361,492.00
k. INDIRECT COSTS	36,771.00
l. TOTAL APPROVED BUDGET	1,398,263.00
m. Federal Share	1,398,263.00
n. Non-Federal Share	399,858.00

12. AWARD COMPUTATION	
a. Amount of Federal Financial Assistance (from item 11m)	1,398,263.00
b. Less Unobligated Balance From Prior Budget Periods	0.00
c. Less Cumulative Prior Award(s) This Budget Period	0.00
d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION	1,398,263.00
13. Total Federal Funds Awarded to Date for Project Period	13,644,298.00

14. RECOMMENDED FUTURE SUPPORT (Subject to the availability of funds and satisfactory progress of the project):			
YEAR	TOTAL DIRECT COSTS	YEAR	TOTAL DIRECT COSTS
a. 5		d. 8	
b. 6		e. 9	
c. 7		f. 10	

15. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:		<input checked="" type="checkbox"/>
a. DEDUCTION		
b. ADDITIONAL COSTS		
c. MATCHING		
d. OTHER RESEARCH (Add / Deduct Option)		
e. OTHER (See REMARKS)		

16. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY, THE FEDERAL AWARING AGENCY ON THE ABOVE TITLED PROJECT AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE IN THE FOLLOWING:

a. The grant program legislation
b. The grant program regulations.
c. This award notice including terms and conditions, if any, noted below under REMARKS.
d. Federal administrative requirements, cost principles and audit requirements applicable to this grant.

In the event there are conflicting or otherwise inconsistent policies applicable to the grant, the above order of precedence shall prevail. Acceptance of the grant terms and conditions is acknowledged by the grantee when funds are drawn or otherwise obtained from the grant payment system.

REMARKS (Other Terms and Conditions Attached - Yes No)

GRANTS MANAGEMENT OFFICER: **Merlin Williams**

17. OBJ CLASS 41.51	18a. VENDOR CODE	18b. EIN	19. DUNS 878092600	20. CONG. DIST. 90
FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	AMT ACTION FIN ASST	APPROPRIATION
21. a. 5-921Z1RU	b. 003924DP14	c. DP	d. \$47,155.00	e. 75150948
22. a. 5-939ZRBL	b. 003924DP14	c. DP	d. \$1,100,000.00	e. 75150948
23. a. 0-9390541	b. 003924DP14	c. DP	d. \$251,108.00	e. 75150948

AWARD ATTACHMENTS

Missouri Dept. of Health and Senior
Services/DSS&R

5 NU58DP003924-04-00

1. MO Year 04 Terms & Conditions
2. MO Year04 Funding Spreadsheet
3. MO_MLC Technical Review
4. MO_NCCCP Technical Review
5. MO_NPCR Technical Review

Funding Opportunity Announcement (FOA) Number: DP12-120504PPHF2015

Award Number: 5 U58 DP003924-04

Award Type: Cooperative Agreement

Applicable Regulations: 45 Code of Federal Regulations (CFR) Part 75, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards

45 CFR Part 75 Supersedes regulations at 45 CFR Part 92 and Part 74

AWARD INFORMATION

Incorporation: The Centers for Disease Control and Prevention (CDC) hereby incorporates Funding Opportunity Announcement number DP12-120504PPHF, entitled Cancer Prevention and Control Programs for State, Tribal and Territorial Organizations, and application dated February 26, 2015, as may be amended, which are hereby made a part of this Non-Research award hereinafter referred to as the Notice of Award (NoA). The Department of Health and Human Services (HHS) grant recipients must comply with all terms and conditions outlined in their NoA, including grants policy terms and conditions contained in applicable HHS Grants Policy Statements, and requirements imposed by program statutes and regulations and HHS grant administration regulations, as applicable; as well as any requirements or limitations in any applicable appropriations acts. The term grant is used throughout this notice and includes cooperative agreements.

Approved Funding: Funding in the amount of \$1,398,263 is approved for the Year 04 budget period, which is June 30, 2015 through June 29, 2016. All future year funding will be based on satisfactory programmatic progress and the availability of funds.

Note: Refer to the Payment Information section for draw down and Payment Management System (PMS) subaccount information.

Approved funding for the National Breast and Cervical Cancer Early Detection Program (NBCCEDP) is funded under a separate award.

Award Funding: Not funded by the Prevention and Public Health Fund

Direct Assistance (DA): Not Applicable

Use of Unobligated Funds: Not Applicable

Technical Review Statement Response Requirement: NCCCP: The review comments on the strengths and weaknesses of the proposal are provided as part of this award. A response to the weaknesses in these statements must be submitted to and approved, in writing, by the Grants Management Specialist/Grants Management Officer (GMS/GMO) noted in the Staff Contacts section of this NoA, no later than 30 days from the budget period start date. Failure to submit the required information by the due date, July 30, 2015, will cause delay in programmatic progress and will adversely affect the future funding of this project.

Budget Revision Requirement: Not Applicable.

Program Income: Any program income generated under this grant or cooperative agreement will be used in accordance with the Addition alternative.

Addition alternative: Under this alternative, program income is added to the funds committed to the project/program and is used to further eligible project/program objectives.

Note: The disposition of program income must have written prior approval from the GMO.

FUNDING RESTRICTIONS AND LIMITATIONS

Funding Opportunity Announcement (FOA) Restrictions: Funding restrictions noted in CDC FOA DP12-1205 and DP12-120504PPHF2015 remain firm and in full effect.

Administrative Restriction(s): None.

Programmatic Restriction(s): None.

Indirect Costs: Indirect costs are approved based on the Indirect Cost Rate Agreement dated January 1, 2014, which calculates indirect costs as follows: "Fixed" and is approved at a rate of 19.20% of the base, which includes direct salaries and wages including all fringe benefits. The effective dates of this indirect cost rate are from July 1, 2014 to June 30, 2015.

Matching Funds Requirement:

NPCR: To maintain the \$3:\$1 Non-Federal Match required by Public Law 102-515, as amended, the level of Non-Federal financial participation is \$366,667. This amount is the required ratio of cost sharing. The amount reflected on this Notice of Award, \$374,747 is the amount reflected in your submitted budget and **exceeds** the required ratio of cost sharing.

CFDA: 93.283

NCCCP: Cost sharing funds are encouraged in an amount not less than ten percent of Federal funds awarded under this program. Cost sharing funds may be cash, in-kind, or donated services or equipment. Contributions may be made directly or through donations from public or private entities. Public Law 93-638 authorizes tribal organizations contracting under the authority of Title 1 to use funds received under the Indian Self-Determination Act as cost sharing funds. The encouraged level of Non-Federal financial participation is \$25,111. This amount represents the encouraged ratio of cost sharing. The amount reflected on this Notice of Award, \$25,111 is the amount reflected in your submitted budget and **equals** the encouraged ratio of cost sharing.

CFDA: 93.283

Please note that the match amount depicted on the attached NCA is the amount reflected in your application. In order for the Procurement and Grants Office to adjust match to appropriately reflect the required amount of non-Federal financial participation, the recipient is required to furnish revised match documentation that is proportionate to the amount of federal funds received. After receipt of revised match documentation, PGO will issue an amended Notice of Cooperative Agreement Award. When the grantee is not able to meet the required level of matching funds, the CDC must be notified immediately. CDC shall reduce the amount of the Federal share of cooperative agreement so that the maximum Federal share of total project costs is not exceeded.

Matching is calculated on the basis of the federal award amount and is comprised of grantee contributions proposed to support anticipated costs of the project during a specific budget period (confirmation of the existence of funding is supplied by the grantee via their Federal Financial Report). The grantee must be able to account separately for stewardship of the federal funding and for any required matching; it is subject to monitoring, oversight, and audit. The grantee may not use matching expenditures to count toward any Maintaining State Funding requirement.

When a grantee requests a carryover of unobligated funds from prior year(s), matching funds equal to the new requirement must be on record in the CDC grant file, or the grantee must provide evidence with the carryover request.

Maintenance of Effort (MOE) Requirement: MOE represents an applicant/grantee historical level of contributions related to Federal programmatic activities which have been made prior to the receipt of Federal funds "expenditures (money spent)." MOE is used as an indicator of non-federal support for public health security before the infusion of Federal funds. These expenditures are calculated by the grantee without reference to any Federal funding that also may have contributed to such programmatic activities in the past. Awardees must stipulate the total dollar amount in their grant applications. Grantees must be able to account for MOE separately from accounting for Federal funds and separately from accounting for any matching funds requirement; this accounting is subject to ongoing monitoring, oversight, and audit. MOE may not include any matching funds requirement.

NPCR: Grantee calculated MOE is \$240,753.

Cost Limitations as Stated in the Consolidated and Further Continuing Appropriations Act, 2015 (Items A through E)

A. Cap on Salaries (Sec. 203): None of the funds appropriated in this title shall be used to pay the salary of an individual, through a grant or other extramural mechanism, at a rate in excess of Executive Level II.

Note: The salary rate limitation does not restrict the salary that an organization may pay an individual working under an HHS contract or order; it merely limits the portion of that salary that may be paid with Federal funds.

B. Gun Control Prohibition (Sec. 217): None of the funds made available in this title may be used, in whole or in part, to advocate or promote gun control.

C. Lobbying Restrictions (Sec. 503):

- 503(a): No part of any appropriation contained in this Act or transferred pursuant to section 4002 of Public Law 111-148 shall be used, other than for normal and recognized executive-legislative relationships, for publicity or propaganda purposes, for the preparation, distribution, or use of any kit, pamphlet, booklet, publication, electronic communication, radio, television, or video presentation designed to support or defeat the enactment of legislation before the Congress or any State or local legislature or legislative body, except in presentation of the Congress or any State or local legislature itself, or designed to support or defeat any proposed or pending regulation, administrative action, or order issued by the executive branch of any State or local government itself.
- 503 (b): No part of any appropriation contained in this Act or transferred pursuant to section 4002 of Public Law 111-148 shall be used to pay the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before the Congress or any State government, State legislature or local legislature or legislative body, other than normal and recognized executive legislative relationships or participation by an agency or officer of an State, local or tribal government in policymaking and administrative processes within the executive branch of that government.
- 503(c): The prohibitions in subsections (a) and (b) shall include any activity to advocate or promote any proposed, pending or future Federal, State or local tax increase, or any proposed, pending, or future requirement or restriction on any legal consumer product, including its sale or marketing, including but not limited to the advocacy or promotion of gun control.

For additional information, see Additional Requirement 12 at

<http://www.cdc.gov/grants/additionalrequirements/index.html> and Anti Lobbying Restrictions for CDC Grantees at http://www.cdc.gov/grants/documents/Anti-Lobbying_Restrictions_for_CDC_Grantees_July_2012.pdf

D. Needle Exchange (Sec. 521): Notwithstanding any other provision of this Act, no funds appropriated in this Act shall be used to carry out any program of distributing sterile needles or syringes for the hypodermic injection of any illegal drug.

E. Blocking access to pornography (Div. H, Title V, Sec. 526): (a) None of the funds made available in this Act may be used to maintain or establish a computer network unless such network blocks the viewing, downloading, and exchanging of pornography; (b) Nothing in subsection (a) shall limit the use of funds necessary for any Federal, State, tribal, or local law enforcement agency or any other entity carrying out criminal investigations, prosecution, or adjudication activities.

Rent or Space Costs: Grantees are responsible for ensuring that all costs included in this proposal to establish billing or final indirect cost rates are allowable in accordance with the requirements of the Federal award(s) to which they apply, including 45 CFR Part 75, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards. The grantee also has a responsibility to ensure sub-recipients expend funds in compliance with applicable federal laws and regulations. Furthermore, it is the responsibility of the grantee to

ensure rent is a legitimate direct cost line item, which the grantee has supported in current and/or prior projects and these same costs have been treated as indirect costs that have not been claimed as direct costs. If rent is claimed as direct cost, the grantee must provide a narrative justification, which describes their prescribed policy to include the effective date to the assigned Grants Management Specialist (GMS) identified in the CDC Contacts for this award.

Trafficking In Persons: This award is subject to the requirements of the Trafficking Victims Protection Act of 2000, as amended (22 U.S.C. Part 7104(g)).

Cancel Year: 31 U.S.C. Part 1552(a) Procedure for Appropriation Accounts Available for Definite Periods states the following, On September 30th of the 5th fiscal year after the period of availability for obligation of a fixed appropriation account ends, the account shall be closed and any remaining balances (whether obligated or unobligated) in the account shall be canceled and thereafter shall not be available for obligation or expenditure for any purpose. An example is provided below:

Fiscal Year (FY) 2012 funds will expire September 30, 2017. All FY 2012 funds should be drawn down and reported to Payment Management Services (PMS) prior to September 30, 2017. After this date, corrections or cash requests will not be permitted.

REPORTING REQUIREMENTS

Annual Federal Financial Report (FFR, SF-425): The Annual Federal Financial Report (FFR) SF-425 is required and must be submitted through eRA Commons no later than 90 days after the end of the calendar quarter in which the budget period ends. The FFR for this budget period is due to the GMS/GMO by September 30, 2016. Reporting timeframe is June 30, 2015 through June 29, 2016.

The FFR should only include those funds authorized and disbursed during the timeframe covered by the report. The final FFR must indicate the exact balance of unobligated funds and may not reflect any unliquidated obligations. There must be no discrepancies between the final FFR expenditure data and the Payment Management System's (PMS) cash transaction data. All Federal reporting in PMS is unchanged.

Failure to submit the required information in a timely manner may adversely affect the future funding of this project. If the information cannot be provided by the due date, the grantee is required to contact the Grants Officer listed in the contacts section of this notice before the due date.

FFR (SF-425) instructions for CDC Grantees are available at <http://grants.nih.gov/grants/forms.htm>. For further information, contact GrantsInfo@nih.gov. Additional resources concerning the eFSR/FFR system, including a User Guide and an on-line demonstration, can be found on the [eRA Commons](http://grants.nih.gov/support/) Support Page: <http://grants.nih.gov/support/>.

PROGRESS/PERFORMANCE REPORTING:

A. The Interim Progress Report (IPR) will serve as the non-competing continuation application. A due date and specific IPR guidance will be provided at a later date.

The report must contain the following:

- Status/Progress of Current Budget Period Goals and Objectives
- Also include key organizational changes, key staff changes, and an implementation plan for each activity.
- Current Budget Period Financial Progress and amount of estimated unobligated balances
- New Budget Period Program Proposed Activity Objectives and timelines
- Ensure Objectives are specific, measurable, appropriate, realistic, and time-phased.
- Measures of Effectiveness.
- Additional requested information.
- Detailed Line-Item Budget and Justification.
- Use the SF424 forms: http://www.whitehouse.gov/omb/grants/grants_forms.html
- For the Budget details and justification follow the Budget Guidelines at:

<http://www.cdc.gov/od/pgo/funding/grantmain.htm>

B. ANNUAL PROGRESS REPORT (APR):

The Annual Progress Report is required no later than 90 days after the end of the budget period, which is September 29, 2016. All manuscripts published as a result of the work supported in part or whole by the cooperative agreement will be submitted with the progress reports.

NOTE: THE PROGRESS REPORTS SHOULD ADDRESS EACH OF THE APPLICABLE PROGRAM COMPONENTS:

- NCCCP
- NBCCEDP
- MLC
- NPCR
- INNOVATIVE (Not Applicable to all grantees)

The following elements should be included in the Progress Reports:

- Comparison of actual accomplishments to the goals established for the period
- The reasons for failure, if established goals were not met
- Current Budget Period Activities/Objectives Progress
- Current Budget Period Financial Progress
- Measures of Effectiveness
- Other pertinent information including, when appropriate, analysis and explanation of performance costs significantly higher than expected

Additional Reporting Requirements: NCCCP Program recipients: Measures of Effectiveness are addressed for selected activities noted in the Interim Progress Report (IPR).

Audit Requirement:

Domestic Organizations (***including US-based organizations implementing projects with foreign components***): An organization that expends \$750,000 or more in a fiscal year in Federal awards shall have a single or program-specific audit conducted for that year in accordance with the provisions of 45 CFR Part 75. The audit period is an organization's fiscal year. The audit must be completed along with a data collection form (SF-SAC), and the reporting package shall be submitted within the earlier of 30 days after receipt of the auditor's report(s), or nine (9) months after the end of the audit period. The audit report must be sent to:

Federal Audit Clearing House Internet Data Entry System

Electronic Submission: [https://harvester.census.gov/facides/\(S\(0vkw1zaelyzjibnahocga5i0\)\)/account/login.aspx](https://harvester.census.gov/facides/(S(0vkw1zaelyzjibnahocga5i0))/account/login.aspx)

AND

Procurement & Grants Office, Risk Management & Compliance Activity

Electronic Copy to: PGO.Audit.Resolution@cdc.gov

After receipt of the audit report, CDC will resolve findings by issuing Final Determination Letters.

This paragraph applies to both Domestic and Foreign organizations. Audit requirements for Subrecipients: The grantee must ensure that the subrecipients receiving CDC funds also meet these requirements. The grantee must also ensure to take appropriate corrective action within six months after receipt of the subrecipient audit report in instances of non-compliance with applicable Federal law and regulations (45 CFR 75 Subpart F and HHS Grants Policy Statement). The grantee may consider whether subrecipient audits necessitate adjustment of the grantee's own accounting records. If a subrecipient is not required to have a program-specific audit, the grantee is still required to perform adequate monitoring of subrecipient activities. The grantee shall require each subrecipient to permit the independent auditor access to the subrecipient's records and financial statements. The grantee must include this requirement in all subrecipient contracts.

Note: The standards set forth in 45 CFR Part 75 Subpart F will apply to audits of fiscal years beginning on or after December 26, 2014.

Federal Funding Accountability and Transparency Act (FFATA):

In accordance with 2 CFR Chapter 1, Part 170 Reporting Sub-Award And Executive Compensation Information, Prime Awardees awarded a federal grant are required to file a FFATA sub-award report by the end of the month following the month in which the prime awardee awards any sub-grant equal to or greater than \$25,000.

Pursuant to A-133 (see Section_.205(h) and Section_.205(i)), a grant sub-award includes the provision of any commodities (food and non-food) to the sub-recipient where the sub-recipient is required to abide by terms and conditions regarding the use or future administration of those goods. If the sub-awardee merely consumes or utilizes the goods, the commodities are not in and of themselves considered sub-awards.

2 CFR Part 170: http://www.ecfr.gov/cgi-bin/text-idx?tpl=/ecfrbrowse/Title02/2cfr170_main_02.tpl

FFATA: www.fsrs.gov.

Reporting of First-Tier Sub-awards

Applicability: Unless you are exempt (gross income from all sources reported in last tax return is under \$300,000), you must report each action that obligates \$25,000 or more in Federal funds that does not include Recovery funds (as defined in section 1512(a)(2) of the American Recovery and Reinvestment Act of 2009, Pub. L. 111-5) for a sub-award to an entity.

Reporting: Report each obligating action of this award term to www.fsrs.gov. For sub-award information, report no later than the end of the month following the month in which the obligation was made. (For example, if the obligation was made on November 7, 2010, the obligation must be reported by no later than December 31, 2010). You must report the information about each obligating action that the submission instructions posted at www.fsrs.gov specify.

Total Compensation of Recipient Executives: You must report total compensation for each of your five most highly compensated executives for the preceding completed fiscal year, if:

- The total Federal funding authorized to date under this award is \$25,000 or more;
- In the preceding fiscal year, you received—
 - 80 percent or more of your annual gross revenues from Federal procurement contracts (and subcontracts) and Federal financial assistance subject to the Transparency Act, as defined at 2 CFR Part 170.320 (and sub-awards); and
 - \$25,000,000 or more in annual gross revenues from Federal procurement contracts (and subcontracts) and Federal financial assistance subject to the Transparency Act, as defined at 2 CFR Part 170.320 (and sub-awards); and
 - The public does not have access to information about the compensation of the executives through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. Part 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986. (To determine if the public has access to the compensation information, see the U.S. Security and Exchange Commission total compensation filings at <http://www.sec.gov/answers/execomp.htm?explorer.event=true>).

Report executive total compensation as part of your registration profile at <http://www.sam.gov>. Reports should be made at the end of the month following the month in which this award is made and annually thereafter.

Total Compensation of Sub-recipient Executives: Unless you are exempt (gross income from all sources reported in last tax return is under \$300,000), for each first-tier sub-recipient under this award, you must report the names and total compensation of each of the sub-recipient's five most highly compensated executives for the sub-recipient's preceding completed fiscal year, if:

- In the sub-recipient's preceding fiscal year, the sub-recipient received—

- 80 percent or more of its annual gross revenues from Federal procurement contracts (and subcontracts) and Federal financial assistance subject to the Transparency Act, as defined at 2 CFR Part 170.320 (and sub-awards); and
- \$25,000,000 or more in annual gross revenues from Federal procurement contracts (and subcontracts), and Federal financial assistance subject to the Transparency Act (and sub-awards); and
- The public does not have access to information about the compensation of the executives through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. Part 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986. (To determine if the public has access to the compensation information, see the U.S. Security and Exchange Commission total compensation filings at <http://www.sec.gov/answers/execomp.htm>).

You must report sub-recipient executive total compensation to the grantee by the end of the month following the month during which you make the sub-award. For example, if a sub-award is obligated on any date during the month of October of a given year (i.e., between October 1st and 31st), you must report any required compensation information of the sub-recipient by November 30th of that year.

Definitions:

- Entity means all of the following, as defined in 2 CFR Part 25 (Appendix A, Paragraph(C)(3)):
 - Governmental organization, which is a State, local government, or Indian tribe;
 - Foreign public entity;
 - Domestic or foreign non-profit organization;
 - Domestic or foreign for-profit organization;
 - Federal agency, but only as a sub-recipient under an award or sub-award to a non-Federal entity.

- Executive means officers, managing partners, or any other employees in management positions.

- Sub-award: a legal instrument to provide support to an eligible sub-recipient for the performance of any portion of the substantive project or program for which the grantee received this award. The term does not include the grantees procurement of property and services needed to carry out the project or program (for further explanation, see 45 CFR Part 75). A sub-award may be provided through any legal agreement, including an agreement that the grantee or a sub-recipient considers a contract.

- Sub-recipient means an entity that receives a sub-award from you (the grantee) under this award; and is accountable to the grantee for the use of the Federal funds provided by the sub-award.

- Total compensation means the cash and non-cash dollar value earned by the executive during the grantee's or sub-recipient's preceding fiscal year and includes the following (for more information see 17 CFR Part 229.402(c)(2)):
 - Salary and bonus
 - Awards of stock, stock options, and stock appreciation rights. Use the dollar amount recognized for financial statement reporting purposes with respect to the fiscal year in accordance with the Statement of Financial Accounting Standards No. 123 (Revised 2004) (FAS 123R), Shared Based Payments.
 - Earnings for services under non-equity incentive plans. This does not include group life, health, hospitalization or medical reimbursement plans that do not discriminate in favor of executives, and are available generally to all salaried employees.
 - Change in pension value. This is the change in present value of defined benefit and actuarial pension plans.
 - Above-market earnings on deferred compensation which is not tax-qualified.
 - Other compensation, if the aggregate value of all such other compensation (e.g. severance, termination payments, value of life insurance paid on behalf of the employee, perquisites or property) for the executive exceeds \$10,000.

GENERAL REQUIREMENTS

Travel Cost: In accordance with HHS Grants Policy Statement, travel costs are only allowable where such travel will provide direct benefit to the project or program. There must be a direct benefit imparted on behalf of the traveler as it applies to the approved activities of the NoA. To prevent disallowance of cost, the grantee is responsible for ensuring that only allowable travel reimbursements are applied in accordance with their organization's established travel policies and procedures. Grantees approved policies must meet the requirements of 45 CFR Part 75, as applicable.

Food and Meals: Costs associated with food or meals are allowable when consistent with federal regulations, HHS Federal regulations, Program Regulations, HHS policies and guidance. In addition, costs must be proposed in accordance with grantee approved policies and a determination of reasonableness has been performed by the grantees. Grantee approved policies must meet the requirements of 45 CFR Part 75, as applicable.

Prior Approval: All requests, which require prior approval, must bear the signature of an authorized official of the business office of the grantee organization as well as the principal investigator or program or project director named on this NoA. The grantee must submit these requests by February 28, 2016. Any requests received that reflect only one signature will be returned to the grantee unprocessed. Additionally, any requests involving funding issues must include an itemized budget and a narrative justification of the request.

The following types of requests require prior approval.

- Use of unobligated funds from prior budget period (Carryover)*
- Lift funding restriction, withholding, or disallowance
- Redirection of funds
- Change in scope
- Implement a new activity or enter into a sub-award that is not specified in the most recently approved budget
- Apply for supplemental funds
- Change in key personnel
- Extensions
- Conferences or meetings that exceed cost threshold

Templates for prior approval requests can be found at:

<http://www.cdc.gov/grants/alreadyhavegrant/priorapprovalrequests.html>

Key Personnel: In accordance with 45 CFR Part 75.308, CDC grantees must obtain prior approval from CDC for (1) change in the project director/principal investigator, business official, authorized organizational representative or other key persons specified in the FOA, application or award document; and (2) the disengagement from the project for more than three months, or a 25 percent reduction in time devoted to the project, by the approved project director or principal investigator.

Inventions: Acceptance of grant funds obligates grantees to comply with the standard patent rights clause in 37 CFR Part 401.14.

Publications: Publications, journal articles, etc. produced under a CDC grant support project must bear an acknowledgment and disclaimer, as appropriate, for example:

This publication (journal article, etc.) was supported by the Grant or Cooperative Agreement Number, 5 U58 DP003924, funded by the Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention or the Department of Health and Human Services.

Acknowledgment Of Federal Support: When issuing statements, press releases, requests for proposals, bid solicitations and other documents describing projects or programs funded in whole or in part with Federal money, all awardees receiving Federal funds, including and not limited to State and local governments and grantees of Federal research grants, shall clearly state:

- percentage of the total costs of the program or project which will be financed with Federal money

- dollar amount of Federal funds for the project or program, and
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Equipment and Products: To the greatest extent practicable, all equipment and products purchased with CDC funds should be American-made. CDC defines equipment as tangible non-expendable personal property (including exempt property) charged directly to an award having a useful life of more than one year AND an acquisition cost of \$5,000 or more per unit. However, consistent with grantee policy, a lower threshold may be established. Please provide the information to the Grants Management Officer to establish a lower equipment threshold to reflect your organization's policy.

The grantee may use its own property management standards and procedures, provided it observes provisions of in applicable grant regulations and 45 CFR Part 75.

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FISMA applies to CDC grantees only when grantees collect, store, process, transmit or use information on behalf of HHS or any of its component organizations. In all other cases, FISMA is not applicable to recipients of grants, including cooperative agreements. Under FISMA, the grantee retains the original data and intellectual property, and is responsible for the security of these data, subject to all applicable laws protecting security, privacy, and research. If/When information collected by a grantee is provided to HHS, responsibility for the protection of the HHS copy of the information is transferred to HHS and it becomes the agency's responsibility to protect that information and any derivative copies as required by FISMA. For the full text of the requirements under Federal Information Security Management Act (FISMA), Title III of the E-Government Act of 2002 Pub. L. No. 107-347, please review the following website:
http://frwebgate.access.gpo.gov/cgi-bin/getdoc.cgi?dbname=107_cong_public_laws&docid=f:publ347.107.pdf

Pilot Program for Enhancement of Contractor Employee Whistleblower Protections: Grantees are hereby given notice that the 48 CFR section 3.908, implementing section 828, entitled "Pilot Program for Enhancement of Contractor Employee Whistleblower Protections," of the National Defense Authorization Act (NDAA) for Fiscal Year (FY) 2013 (Pub. L. 112-239, enacted January 2, 2013), applies to this award.

Federal Acquisition Regulations

As promulgated in the Federal Register, the relevant portions of 48 CFR section 3.908 read as follows (note that use of the term "contract," "contractor," "subcontract," or "subcontractor" for the purpose of this term and condition, should be read as "grant," "grantee," "subgrant," or "subgrantee"):

3.908 Pilot program for enhancement of contractor employee whistleblower protections.

3.908-1 Scope of section.

(a) This section implements [41 U.S.C. 4712](#).

(b) This section does not apply to-

(1) DoD, NASA, and the Coast Guard; or

(2) Any element of the intelligence community, as defined in section 3(4) of the National Security Act of 1947 (50 U.S.C. 3003(4)). This section does not apply to any disclosure made by an employee of a contractor or subcontractor of an element of the intelligence community if such disclosure-

(i) Relates to an activity of an element of the intelligence community; or

(ii) Was discovered during contract or subcontract services provided to an element of the intelligence community.

3.908-2 Definitions.

As used in this section-

"Abuse of authority" means an arbitrary and capricious exercise of authority that is inconsistent with the mission of the executive agency concerned or the successful performance of a contract of such agency.

"Inspector General" means an Inspector General appointed under the Inspector General Act of 1978 and any Inspector General that receives funding from, or has oversight over contracts awarded for, or on behalf of, the executive agency concerned.

3.908-3 Policy.

(a) Contractors and subcontractors are prohibited from discharging, demoting, or otherwise discriminating against an employee as a reprisal for disclosing, to any of the entities listed at paragraph (b) of this subsection, information that the employee reasonably believes is evidence of gross mismanagement of a Federal contract, a gross waste of Federal funds, an abuse of authority relating to a Federal contract, a substantial and specific danger to public health or safety, or a violation of law, rule, or regulation related to a Federal contract (including the competition for or negotiation of a contract). A reprisal is prohibited even if it is undertaken at the request of an

executive branch official, unless the request takes the form of a non-discretionary directive and is within the authority of the executive branch official making the request.

(b) Entities to whom disclosure may be made.

- (1) A Member of Congress or a representative of a committee of Congress.
- (2) An Inspector General.
- (3) The Government Accountability Office.
- (4) A Federal employee responsible for contract oversight or management at the relevant agency.
- (5) An authorized official of the Department of Justice or other law enforcement agency.
- (6) A court or grand jury.
- (7) A management official or other employee of the contractor or subcontractor who has the responsibility to investigate, discover, or address misconduct.

(c) An employee who initiates or provides evidence of contractor or subcontractor misconduct in any judicial or administrative proceeding relating to waste, fraud, or abuse on a Federal contract shall be deemed to have made a disclosure.

3.908-9 Contract clause.

Contractor Employee Whistleblower Rights and Requirement to Inform Employees of Whistleblower Rights (Sept. 2013)

(a) This contract and employees working on this contract will be subject to the whistleblower rights and remedies in the pilot program on Contractor employee whistleblower protections established at [41 U.S.C. 4712](#) by section 828 of the National Defense Authorization Act for Fiscal Year 2013 (Pub. L. 112-239) and FAR [3.908](#).

(b) The Contractor shall inform its employees in writing, in the predominant language of the workforce, of employee whistleblower rights and protections under [41 U.S.C. 4712](#), as described in section [3.908](#) of the Federal Acquisition Regulation.

(c) The Contractor shall insert the substance of this clause, including this paragraph (c), in all subcontracts over the simplified acquisition threshold.

PAYMENT INFORMATION

Automatic Drawdown (Direct/Advance Payments): Payment under this award will be made available through the Department of Health and Human Services (HHS) Payment Management System (PMS). PMS will forward instructions for obtaining payments.

PMS correspondence, mailed through the U.S. Postal Service, should be addressed as follows:

Director, Payment Management Services
P.O. Box 6021
Rockville, MD 20852
Phone Number: (877) 614-5533
Email: PMSSupport@psc.gov
Website: <http://www.dpm.psc.gov/help/help.aspx?explorer.event=true>

Note: To obtain the contact information of PMS staff within respective Payment Branches refer to the links listed below:

- University and Non-Profit Payment Branch:
http://www.dpm.psc.gov/contacts/dpm_contact_list/univ_nonprofit.aspx?explorer.event=true
- Governmental and Tribal Payment Branch:
http://www.dpm.psc.gov/contacts/governmental_and_tribal.aspx?explorer.event=true
- Cross Servicing Payment Branch:
http://www.dpm.psc.gov/contacts/cross_servicing.aspx?explorer.event=true

- International Payment Branch:
Bhavin Patel (301) 492-4918
Email: Bhavin.patel@psc.hhs.gov

If a carrier other than the U.S. Postal Service is used, such as United Parcel Service, Federal Express, or other commercial service, the correspondence should be addressed as follows:

U.S. Department of Health and Human Services
Division of Payment Management
7700 Wisconsin Avenue, Suite 920
Bethesda, MD 20814

To expedite your first payment from this award, attach a copy of the Notice of Grant/Cooperative Agreement to your payment request form.

Payment Management System Subaccount: Effective October 1, 2013, a new HHS policy on subaccounts requires the CDC setup payment subaccounts within the Payment Management System (PMS) for all grant awards. Funds awarded in support of approved activities have been obligated in a newly established subaccount in the PMS, herein identified as the "P Account". A P Account is a subaccount created specifically for the purpose of tracking designated types of funding in the PMS.

All award funds must be tracked and reported separately. Funds must be used in support of approved activities in the FOA and the approved application.

The grant document number and subaccount title (below) must be known in order to draw down funds from this P Account.

Grant Document Number: 003924DP14
Subaccount Title: DP121205CANPREPRO14

Acceptance of the Terms of an Award: By drawing or otherwise obtaining funds from the grant Payment Management Services, the grantee acknowledges acceptance of the terms and conditions of the award and is obligated to perform in accordance with the requirements of the award. If the recipient cannot accept the terms, the recipient should notify the Grants Management Officer within thirty (30) days of receipt of this award notice.

Certification Statement: By drawing down funds, the grantee certifies that proper financial management controls and accounting systems, to include personnel policies and procedures, have been established to adequately administer Federal awards and funds drawn down. Recipients must comply with all terms and conditions outlined in their NoA, including grant policy terms and conditions contained in applicable HHS Grant Policy Statements, and requirements imposed by program statutes and regulations and HHS grants administration regulations, as applicable; as well as any regulations or limitations in any applicable appropriations acts.

CDC ROLES AND RESPONSIBILITIES

Roles and Responsibilities: Grants Management Specialists/Officers (GMO/GMS) and Program/Project Officers (PO) work together to award and manage CDC grants and cooperative agreements. From the pre-planning stage to closeout of an award, grants management and program staff have specific roles and responsibilities for each phase of the grant cycle. The GMS/GMO is responsible for the business management and administrative functions. The PO is responsible for the programmatic, scientific, and/or technical aspects. The purpose of this factsheet is to distinguish between the roles and responsibilities of the GMO/GMS and the PO to provide a description of their respective duties.

Grants Management Officer: The GMO is the federal official responsible for the business and other non-programmatic aspects of grant awards including:

- Determining the appropriate award instrument, i.e.; grant or cooperative agreement
- Determining if an application meets the requirements of the FOA
- Ensuring objective reviews are conducted in an above-the-board manner and according to guidelines set forth in grants policy

- Ensuring grantee compliance with applicable laws, regulations, and policies
- Negotiating awards, including budgets
- Responding to grantee inquiries regarding the business and administrative aspects of an award
- Providing grantees with guidance on the closeout process and administering the closeout of grants
- Receiving and processing reports and prior approval requests such as changes in funding, carryover, budget redirection, or changes to the terms and conditions of an award
- Maintaining the official grant file and program book

The GMO is the only official authorized to obligate federal funds and is responsible for signing the NoA, including revisions to the NoA that change the terms and conditions. The GMO serves as the counterpart to the business officer of the recipient organization.

GMO Contact: See Staff Contacts below for the assigned GMO

Grants Management Specialist: The GMS is the federal staff member responsible for the day-to-day management of grants and cooperative agreements. The GMS is the primary contact of recipients for business and administrative matters pertinent to grant awards. Many of the functions described above are performed by the GMS on behalf of the GMO.

GMS Contact: See Staff Contacts below for the assigned GMS

Program/Project Officer: The PO is the federal official responsible for the programmatic, scientific, and/or technical aspects of grants and cooperative agreements including:

- The development of programs and FOAs to meet the CDC's mission
- Providing technical assistance to applicants in developing their applications e.g. explanation of programmatic requirements, regulations, evaluation criteria, and guidance to applicants on possible linkages with other resources
- Providing technical assistance to grantees in the performance of their project
- Post-award monitoring of grantee performance such as review of progress reports, review of prior approval requests, conducting site visits, and other activities complementary to those of the GMO/GMS

Programmatic Contacts:

MLC

George-Ann Townsend, Project Officer

Telephone: 770) 488-4780

Email: gas7@cdc.gov

NCCCP

Jamila Fonseca, Project Officer

Telephone: 770) 488-4296

Email: jcf0cdc.gov

NPCR

Castine Clerkin, Project Officer

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Email: hhe2@cdc.gov

Business Management Contacts

Annie Harrison-Camacho, Grants Management Specialist

Telephone: (770) 488-2098

Email: atc4@cdc.gov

Pamela Render, Grants Management Specialist

Telephone: 770) 488-2712

Email: plr3@cdc.gov

Grantee:
Award Number:
Attachment 1

Missouri Dept of Health
5 U58 DP003924-04

Federal Cost Categories	NCCCP	NCCCP	NPCR	NPCR	MLC	Year 04 Approved Budget
		Programmatic Encouraged Cost Share: 10%		Match 3:1		
Salaries and Wages	\$105,439	-	\$3,887	-	\$25,844	\$135,170
Fringe Benefits	\$41,709	-	\$1,717	-	\$12,922	\$56,348
Supplies	\$544	-	\$0	-	\$0	\$544
Equipment	\$0	-	\$0	-	\$0	\$0
Travel Costs	\$2,428	-	\$0	-	\$946	\$3,374
Other Costs	\$48,026	-	\$148	-	\$0	\$48,174
Consortium/Contractual Cost	\$24,710	-	\$1,093,172	-	\$0	\$1,117,882
Consultant	\$0	-	\$0	-	\$0	\$0
Total Direct Costs	\$222,856	-	\$1,098,924	-	\$39,712	\$1,361,492
<i>Indirect Costs</i>	\$28,252	-	\$1,076	-	\$0	\$29,328
Non-Federal Share Requirement	\$0	-		\$366,667	-	\$366,667
Programmatic Encouraged Cost Share	-	\$25,111	-	-	-	\$25,111
Total Approved Budget	\$251,108	\$25,111	\$1,100,000	\$366,667	\$39,712	\$1,782,597

Direct Assistance (DA) for SAS:	\$0	-	\$0	-	-	\$0
Non-Federal Share Provided:	-	\$0	-	\$374,747	-	\$374,747
Non-Federal Share Required:	-	-	-	\$366,667	-	\$366,667
Excess Non-Federal Share:	-	-	-	\$8,080	-	\$8,080
Programmatic Encouraged Cost Share Provided:	-	\$25,111	-	-	-	\$25,111
Programmatic Encouraged Cost Share	-	\$25,111	-	-	-	\$25,111
Excess Encouraged Cost Share:	-	\$0	-	-	-	\$0

Note: NPCR: Grantee calculated MOE: \$240,753

**FY 2015 – Funding Opportunity Announcement DP12-1205
Cancer Prevention and Control Programs for State, Territorial and Tribal Organizations
Interim Progress Report
Technical Review Form**

Grantee's Name: Missouri Department of Health & Senior Services - MLC Program

Grantee #: U58/CCU/1205/3924-04

Component: #1 YES MLC #2 __ NCCCP #3 __ NBCCEDP #4 __ NPCR #5 __ Innovative

SAS License Requests: {NO} Amount of DA recommended/approved \$ -0-

Technical Reviewer's Name: **George-Ann Stokes-Townsend**

Signature: *George-Ann Stokes-Townsend* **Date:** March 24, 2015

After a complete review of the DP12-1205 Year 04 IPR and significant discussion with the Grantee regarding the Year 04 IPR/Technical Review, the Grantee is to submit the following (check all that apply):

- **Response to Technical Review**
_____ **The Recipient must respond to the major weaknesses cited within 30 days. Responses should be submitted to the assigned CDC Project Officer and should be reflective only of the weaknesses identified, not a resubmission of the entire application.**
_____ **NO response to Technical Review is needed.**

- **Revised Budget and Work plan**
_____ **Revised Budget and Work plan is needed due to significant reduction of proposed budget, which will affect the proposed activities. The revised budget and work plan should be reflective of the amount of the actual Notice of Award (NGA).**
_____ **Revised Budget and Work plan is NOT needed.**

- **Revised Work plan**
_____ **Revised Work plan is needed due to -- provide reason(s):**

_____ **Revised Work plan is NOT needed.**

- **Revised Budget**
_____ **Revised Budget is needed due to -- provide reason(s):**

_____ **Revised Budget is NOT needed.**

Summary of Major Strengths (Please use bullets):

- Missouri's **Management, Leadership & Coordination (MLC)**, component #1 is an excellent program with solid management and leadership, which operates with high standards and qualified staff, led this program.
- Well-written Interim Progress Report (IPR); Missouri submitted all of the required documents to support their MLC program activities and linkages between sections and department with other state agencies.
- Long established history of collaborations with American Cancer Society, Komen Foundation, Federal Qualified Medical Centers/Clinics as well as numerous local cancer organizations in the state.
- Strong leadership, management and coordination with solid direction for all program collaboration by the key MLC staff on levels.
- MLC proactive in leadership, management, program planning and development are well established within the Missouri MLC program.
- Well established linkages & growing partnerships with local, state and county agencies to enhance the MLC program as well as the Comprehensive Cancer Control Program. Additionally, MLC program connects with the other Cancer Control Programs as are the joint projects and events planned for the FY-04 year.

Summary of Major Weaknesses (Please use bullets):

- One management position, Bureau Chief, Cancer Control Programs is vacant at this time in the MLC program.

Recommendations:

- Missouri is encouraged to fill this key MLC management position in a timely manner.
- Continue with quarterly MLC staff conference calls, which are beneficial for information and program sharing with all MO Cancer Control Programs housed in the Department of Health & Senior Services (DOHSS).

Research Determination – DP12-1205 is only for non-research activities supported by CDC. For the definition of research, please see the CDC Web site at the following Internet address: <http://www.cdc.gov/od/ads/opspoll1.htm>

- No research activities have been proposed
 Research activities have been proposed, but were disapproved/disallowed

Reviewer Comments

Progress towards Objectives:

- Overall, progresses on the MLC SMART objectives are reasonable and realistic as well as the program objectives are expected to be completed by the end of June 29, 2016.
- MO continues to increase the number of partnerships through multiple program activities outlined in the IPR.
- Quarterly meetings are routine for the MLC Coordinator to keep all parties updated on policies and coordination events and activities throughout the budget year.
- MO MLC program provides comprehensive updates on the ongoing progress of their activities, goals and objectives.
- Outlined clearly throughout the IPR are the accomplishments and the successful progress made by the MO MLC to surpassing their objectives.
- Innovative activities and time-phased program objectives are described within in the MLC work plan.
- Accomplishments are outlined effectively to illustrate how each activity and partnership was established.
- Oversight and management of the MO MLC appears to very capable to achieve the proposed goals and objectives described in the work plan.
- Well-written Interim Progress Report (IPR) submitted by the Missouri MLC program, which includes all required budget narrative and justification in the DP12-1205/FY-04 guidance documents.

Proposed Objectives:

- Overall goals are reasonable and aligned with FOA priorities, except for the one vacant position in the Missouri MLC program at this time.
- MO used SMART objectives throughout their MLC program Interim Progress Report (IPR).
- The MLC program proposed smart objectives are linked with each budget line items outlined in the FY-04 budget narrative and justification section of the continuation application.
- As for future activities, MLCP proposes to leverage their resources both financially and with central office staff.
- Proposed objectives are creative and unique as described in the FY-04 budget year.
- New partnerships, joint events, and projects are planned for the year to continue to reach new partners with innovative events planned for FY-04.
- Close monitoring of program expenditures especially with MLC meetings to ensure sufficient funds support essential activities.

Other Relevant Comments:

- One key management MLC position is vacant at this time at the Missouri Department of Health & Senior Services.

Itemized Budget:

SAS License Requests: No, SAS license has been requested by Missouri MLCP.

- Missouri MLC program submitted a detailed-budget which is within the scope of the program announcement DP12-1205.
- The MLC budget amount of **\$47,155** is a reasonable and realistic as well as within the scope of work for the proposed program activities.

**Amount of DA recommended/approved -0-
(Transfer amount to front page)**

**FY 2015 – Funding Opportunity Announcement DP12-1205
Cancer Prevention and Control Programs for State, Territorial and Tribal Organizations
Interim Progress Report
Technical Review Form**

Grantee's Name: Missouri CCC

Grantee #: U58/CCU003924-04

Component: #1 ___ MLC #2 x NCCCP #3 ___ NBCCEDP #4 ___ NPCR
#5 ___ Innovative

SAS License Requests: Amount of DA recommended/approved \$ N/A

Technical Reviewer's Name: Jamila Fonseca

Signature: Jamila Fonseca

Date: 4/6/2015

After a complete review of the DP12-1205 Year 04 IPR and significant discussion with the Grantee regarding the Year 04 IPR/Technical Review, the Grantee is to submit the following (check all that apply):

• **Response to Technical Review**

x The Recipient must respond to the major weaknesses cited within 30 days. Responses should be submitted to the assigned CDC Project Officer and should be reflective only of the weaknesses identified, not a resubmission of the entire application.
___ NO response to Technical Review is needed.

• **Revised Budget and Workplan**

___ Revised Budget and Workplan is needed due to significant reduction of proposed budget, which will affect the proposed activities. The revised budget and workplan should be reflective of the amount of the actual Notice of Award (NGA).

x Revised Budget and Workplan is **NOT** needed.

• **Revised Workplan**

___ Revised Workplan is needed due to -- provide reason(s):

___ Revised Workplan is **NOT** needed.

• **Revised Budget**

___ Revised Budget is needed due to -- provide reason(s):

_____ Revised Budget is **NOT** needed.

Summary of Major Strengths (Please use bullets):

- Program has effectively used cancer burden data to create key cancer burden documents which have been critical to reviewing progress on the current State Plan 2012- 2015 and revising and updating the Missouri Cancer Plan.
- Program has collaborated with Tobacco Control Program to provide technical assistance to communities to implement regional cancer plans, and specifically tobacco-free community polices, to include smoke-free college campuses, tobacco-free soccer fields, college smoking cessation and counselling services. Program documents 26 communities with smoke-free ordinances.
- Program has developed and is implementing a robust media plan; coordinates social media messages with paid advertising campaigns as well as coordination opportunities with Local Public Health Agencies for awareness activities. Program has coordinated with Missouri Cancer Consortium and other entities to extend reach and complement activities when applicable

Summary of Major Weaknesses (Please use bullets):

- Year 02 Evaluation Report has not been submitted
- Year 03 Evaluation Plan has not been submitted.
- No 0.5 FTE PSE subject matter expert

Recommendations:

- Recommend Program works with CDC consultant for guidance to complete submission on Year 02 Evaluation Report.
- Recommend Program use CCC Tool Kit and continues to work with CDC Program Consultant in developing Year 03 Evaluation Plan: recommend Program builds on Missouri's Year 02 Evaluation plan as template.
- Recommend Year 03 and Year 04 Evaluation plan include specific strategies that support evaluating PSE approaches across primary, secondary and tertiary interventions.
- Recommend Program considers other options if PSE position is not filled by March 2015, such as working with members of the coalition to identify and contract for PSE technical assistance (e.g., ACS).

Research Determination – DP12-1205 is only for non-research activities supported by CDC. For the definition of research, please see the CDC Web site at the following Internet address:

<http://www.cdc.gov/od/ads/opspoll1.htm>

_____ No research activities have been proposed

___ Research activities have been proposed, but were disapproved/disallowed

Reviewer Comments

Progress towards Objectives:

Program reports progress on objectives and activities in FOA strategies 2 -5 that reflect alignment with current program guidance and performance measures. Program is non-compliant with program guidelines and performance measures in FOA strategies 1 and 6, as Program does not report a PSE staffer, or the development of Year 03 evaluation plan, respectively.

FOA strategy 1: Program Management

- Program Manager position was filled November 1, 2014. Program has experienced considerable staff turnover in Year 03, including resignation of CCC Program Director in July 2014 which has impacted progress on the Year 03 Action Plan. New Program Director is orienting well to the program and striving to develop relationships with the Missouri Cancer Coalition for implementing the Missouri Cancer Plan and Year 03 Action Plan.
- Program does not have a 0.5 FTE PSE staffer. Position has been vacant since August 2014. Program working to fill this position by March 2015. **Program is non-compliant with current program guidance and performance measures.**
- Program has 0.33 % evaluator on staff
- Program has worked with the Office of Epidemiology to develop and distribute Missouri Cancer Burden and Cancer at a Glance documents to constituents, including Missouri Cancer Coalition and which has been key to updating the Missouri Cancer Plan and other cancer plan initiatives; Program has worked with the Coalition to plan the Cancer Summit for 2015, and which will include sessions on training in tobacco policies.
- Program developed and is implementing a robust media plan; coordinates social media messages with paid advertising campaigns as well as coordination opportunities with Local Public Health Agencies for awareness activities. Program has coordinated with Missouri Cancer Consortium and other entities to extend reach and complement activities when applicable. Program provides limited process and impact data on media plan.
- Program submitted timely final IPR, APR, and Year 03 Media Plan. Program has not submitted Year 02 Evaluation Report and Year 03 Evaluation Plan. Program plans to submit Year 02 Evaluation Report in March 2015; and to address Year 03 program enhancements with evaluation findings; Program is in the process of developing Year 03 Evaluation Plan.

FOA strategy 2: Fiscal Management

- Program allocates approximately 40% for local implementation efforts based on local implementation contracts, and allocation of in-kind staffing resources for evaluation, PSE, and programmatic TA.
- Program contracts with three community-based organizations to implement strategies in the Regional Cancer Plans.
- Program and sub-recipient funding are in alignment with Missouri Cancer Plan priorities to include: CRC screening, prostate cancer screening; tobacco use reduction, survivor QOL.
- Program meets 10% cost-sharing from consortium member professional rate contribution and media match.

FOA strategy 3: Use of Cancer Surveillance data

- Progress report lacks clear information as to any evaluation activities being implemented to assess cancer burden quality, accuracy and representativeness within the last two years. Epidemiology office has provided Missouri Cancer Burden 2014 and ‘Cancer –At –A- Glance which has comprised part of the annual cancer data review by the Missouri Cancer coalition and being used to assess progress on the current Missouri state Plan 2012- 2015 and revise and update it. Suggests issues of quality and accuracy have been addressed. It would be helpful and strengthen program data use efforts to report on quality assurance activities.

FOA strategy 4: Support Collaborate and Coordinate with existing cancer coalition

- Coalition is comprised of a wide array of partners to including representation from priority populations (Hispanic Women Against Cancer) those from other chronic disease and risk factor programs, and non-health sectors such as faith-based, advocacy and academia communities. Most partners associated with implementing the Action Plan appear to be from government entities.
- Program works with internal and external partners to implement activities related to State Cancer Plan. Joint activities include implementation of media plan, tobacco and survivorship activities.
- Staff turnover in Missouri Coalition organizations has resulted in membership losses. Program intends to conduct a membership survey in latter half of Year 2014; to expand membership by recruitment at the Missouri Cancer Summit and when soliciting for input and fill gaps on the revised Missouri State cancer plan. Program plans to conduct an annual satisfaction survey in the second part of 2014 budget year.
- Program has used most current Missouri Cancer Burden Data 2014 to assess and revise the State Cancer Plan. There is no clear documentation whether a systematic cancer plan

assessment activity was conducted in relation to implementation of key components of FOA and State Cancer Plan.

FOA strategy 5: Maintain, Implement and Periodically Revise a Comprehensive Cancer Control Plan

- Missouri Cancer Consortium has collaborated in the process of updating and revising the State Cancer Plan, and strategically organized into four teams.
- Program reports more detailed progress on CCC activities with partners in the Health Department: Program has collaborated with Tobacco Program to provide technical assistance to communities to implement regional cancer plans, and specifically tobacco-free community environments. Program documents 26 communities with smoke-free ordinances.
- Program has collaborated with Tobacco Control Program to implement a targeted media campaign using TIPs materials and promoting Quitline callers.
- Program has worked with the Office of Epidemiology to purchase BRFSS module on prostate screening.
- Program provides limited information on activities related to other priorities (e.g., CRC screening; survivorship and physical activity program) and in relation with other partners. Some of the activities are slated for the second half of the 2014 budget year. Program reports being in process of collecting information on other local efforts.

FOA strategy 6: Demonstrate outcomes through evaluation

Program is non-compliant with program guidance and performance measures as evidenced by:

- No Year 02 Evaluation Report and no Year 03 Evaluation Plan submitted. Program plans to submit Year 02 Evaluation Report in March 2015; and to address Year 03 program enhancements with evaluation findings; Program is in the process of developing Year 03 Evaluation Plan.

Proposed Objectives:

FOA strategy 1: Program Management

- Program proposes AO 1.1 related to maintain a 0.5 FTE PSE subject matter expert. Currently position is vacant. Program lacks any AOs or AAs related to maintaining other key staff such as Program Manager and 0.33 FTE.

FOA strategy 2: Fiscal Management

- Program proposes AO 1.2 related to working with fiscal staff to execute contracts and monitor and track expenditure. Activities are consistent with achieving the objective.

FOA strategy 3: Use of Cancer Surveillance Data

- Program proposes AO 1.3 to use cancer data to update plan and develop materials for stakeholders and other constituents on disease burden and risk behaviors.
- BRFSS data used to set baselines and targets for four PPOs.

FOA strategy 4: Support, Collaborate and Coordinate with Existing Cancer Coalition

- Program proposes AO 1.4 to expand and coordinate with the coalition. Related annual activities include an annual satisfaction survey and skills analysis and are appropriate and consistent to achieving the objective.

FOA strategy 5: Maintain, Implement, and Periodically Revise a Comprehensive Cancer Control Plan

- Action plan has one PPO focused on primary prevention (tobacco use), with two AOs (Quitline referrals and smoke-free ordinances) related to a PSE approach and which is consistent with PSE strategies in the Missouri Cancer Plan. Related annual activities appear consistent to achieving the AO.
- Action Plan has two PPOs focused on secondary prevention (PPO 3 CRC screening; PPO 7 PSA screening and IDM) with AOs that include activities for developing PSE strategies (client reminders, structural barriers; policy development).
- For AO 3.1 (increase CRC screening) –Program provides a general description of potential PSE strategies, and lacks specificity for achieving AO 3.1. Details are not clearly documented.
- Action plan has one PPO on survivorship. No clear annual objective that addresses a survivorship PSE. Program appears to be promoting existing physical activity programs and unsure how this activity is a PSE. Recommend Program clarifies intent of AO 4.1 or Program needs to consider PSE related interventions (**reducing barriers to exercise programs**, care plans; palliative care programs).

FOA strategy 6: Demonstrate Outcomes through Evaluation to Improve Program Performance

- Program proposes AO 5.1 to develop an annual evaluation plan using CCCB evaluation tool kit. Activities are appropriate and consistent to achieving the objective.

Other Relevant Comments:

FOA strategy 1: Program Management

- Recommend Program consider expanding or developing an AO related to maintaining other key CCC-required staff.
- Recommend Program considers other options if PSE position is not filled by March

2015, such as working with members of the coalition to identify and contract for PSE technical assistance (e.g., ACS).

Media Plan

- Program efforts would be strengthened if Program implemented and reported preliminary process and impact measures of the media plan.

FOA strategy 3: Use of Cancer Surveillance Data

- Recommend Program uploads the latest Missouri Cancer Burden Reports to CDC CDMIS.

FOA strategy 4: Support, collaborate and Coordinate with Existing Cancer Coalition

- Recommend Program also consider utilizing the Cancer Plan Assessment Tool to augment Cancer Plan update, and evaluate Cancer Plan's applicability to current cancer burden and develop steps to address any discrepancies.

FOA strategy 5: Maintain, Implement and Periodically Revise a Comprehensive Cancer Control Plan

- Recommend program develop and implement a tracking log of partner activities so as to facilitate more information on collaborations and accomplishments with other non-health department partners on implementing the Missouri Cancer Plan.
- Recommend program provide process data on planning activities with the partner, at a minimum, to demonstrate progress and as it relates to accomplishment of the objectives, and to be more fully compliant with program guidelines.

Secondary Prevention

- Recommend Program work with the Coalition to identify specific PSE strategies that have potential for implementation, regarding CRC screening, and develop action steps to implement the strategy.

Survivorship

- Recommend Program clarifies intent of AO 4.1 or Program needs to consider PSE related interventions (**reducing barriers to exercise programs**, care plans; palliative care programs).

FOA strategy 6: Demonstrate Outcomes through Evaluation to Improve Program Performance

- Recommend Program use CCC Tool Kit and continues to work with CDC Program Consultant in developing Evaluation Plan: recommend Program builds on Missouri's Year 02 Evaluation plan as template.
- Recommend Year 03 and Year 04 Evaluation plan include specific strategies that support evaluating PSE approaches across primary, secondary and tertiary interventions.

Itemized Budget:

Budget is appropriate and consistent with Action Plan.

SAS License Requests:

- SAS License Requests, requested in the previous Oct, were properly reflected as direct assistance (DA) in the line-item budget and justification.
- The budget request included the same number of licenses received and were reflected for the correct component(s).

Amount of DA recommended/approved \$ N/A
(Transfer amount to front page)

**FY 2015 – Funding Opportunity Announcement DP12-1205
Cancer Prevention and Control Programs for State, Territorial and Tribal Organizations
Interim Progress Report
Technical Review Form**

Grantee's Name: Missouri Cancer Registry and Research Center

Grantee #: U58/CCU003924-04

Component: #1 MLC #2 NCCCP #3 NBCCEDP #4 NPCR
#5 Innovative

SAS License Requests: Amount of DA recommended/approved \$ 0

Technical Reviewer's Name: Castine Clerkin

Signature:  Date: 4/8/2015

After a complete review of the DP12-1205 Year 04 IPR and discussion with the Grantee regarding the Year 04 IPR/Technical Review, the Grantee is to submit the following (check all that apply):

• **Response to Technical Review**

The Recipient must respond to the major weaknesses cited within 30 days. Responses should be submitted to the assigned CDC Project Officer and should be reflective only of the weaknesses identified, not a resubmission of the entire application.

NO response to Technical Review is needed.

• **Revised Budget and Workplan**

Revised Budget and Workplan is needed due to significant reduction of proposed budget, which will affect the proposed activities. The revised budget and workplan should be reflective of the amount of the actual Notice of Award (NGA).

Revised Budget and Workplan is **NOT** needed.

• **Revised Workplan**

Revised Workplan is needed due to -- provide reason(s):

Revised Workplan is **NOT** needed.

• **Revised Budget**

Revised Budget is needed due to -- provide reason(s):

Revised Budget is **NOT** needed.

Summary of Major Strengths (Please use bullets):

- Continues to maintain high quality, complete and timely cancer registry data.
- Significant progress made on nearly all work plan goals and where little progress was made limitations are described.
- Streamlining staff activities and developing efficiencies in registry operations to accommodate reduced staffing.
- Excellent data use and collaboration, both internally and externally.
- Detailed work plan includes ongoing education, quality assurance, data linkages, and collaboration to maintain a well-functioning registry.

Summary of Major Weaknesses (Please use bullets):

- None noted

Recommendations:

- In future progress reports, discuss possible solutions to address areas with noted limitations.
- Explore ways to incorporate efficient approaches to follow back on missing cases identified through ePath. Consider performing test linkage on a sample of cases (e.g. primary sites that tend to be missed) to determine the number/type of missing cases and determine the level of added value from matched cases.
- Follow back on missing cases identified through linkage with Show Me Healthy Women.

Research Determination – DP12-1205 is only for non-research activities supported by CDC.

For the definition of research, please see the CDC Web site at the following Internet address:

<http://www.cdc.gov/od/ads/opspoll1.htm>

No research activities have been proposed

Research activities have been proposed, but were disapproved/disallowed

Reviewer Comments

Progress towards Objectives:

- In the midst of staff changes and funding reductions, grantee has strategically consolidated various job responsibilities, utilized graduate students, and identified ways to operate more efficiently.
- Engaged in significant inter-state data exchange with increased reporting from other central cancer registries.
- New data use agreements in place with all three Missouri VA facilities, but two are awaiting a patch to remove confidential information in text fields.
- MU2 activities are on hold until DHSS has their cancer reporting website running.
- Audits have been automated to save time and staff resources.
- Collected and reported high quality, complete, and timely data, likely meeting the 12-month reporting standards.
- Completed linkages with vital statistics, Show Me Health Women, NDI, and IHS.
- Offered and participated in various training opportunities, including a joint training with Oklahoma and Kansas.
- Excellent data use and collaboration activities with DHSS, including a report on breast and cervical cancer survival, an interactive web-based mapping tool, and proposed modifications to cancer reporting regulations that will enhance compliance.
- Staff actively involved in cancer surveillance community workgroups and assists CDC with software testing/improvements.

Proposed Objectives:

- Grantee includes very detailed goals, objectives, and activities that align with the NPCR Program Standards.
- New objectives added for Year 4, including strategic planning to assess organizational structure, building capacity to implement directly assigned TNM and Summary Stage 2000, and providing cancer incidence data for state lawmakers.

Other Relevant Comments:

- Non-hospital unit has been reduced from 3 FTEs to a 0.5 FTE position, impacting grantees ability to receive and process cases from these facilities.
- Little progress associated with utilizing ePath reports to increase the number of cases.
- Follow-back on missing cases from Show Me Health Women is not occurring.

Itemized Budget:

- Requested budget for Year 4 was \$1,123,970, \$107,942 above the Year 3 award.
- Although the proposed budget was appropriate, justified, and reasonable, it was not recommended to be fully funded due to lack of funds.
- Recommended award is \$1,100,000.