1. DATE ISSUED MM/DD/YYYY 1a. SUPERSEDES AWARD NOTICE dated 06/21/2020 except that any additions or restrictions previously imposed remain in effect unless specifically rescinded			DEPARTMENT OF HEALTH AND HUMAN SERVICES Centers for Disease Control and Prevention						
	ovative State and Lo se and Stroke	cal Public Health	Strategies to Preven	nt and Manage Diabetes and		Centers for Diseas	e Control a	ina Prev	ention
3. ASSISTANC	E TYPE Cooperativ	ve Agreement				2939 Br	andywine Ro	ad	
4. GRANT NO.	5 NU58DP006658	03-00	5. TYPE OF AWA	RD			a, GA 30341		
Formerly			Other						
4a. FAIN NU5	8DP006658		5a. ACTION TYPE	Non-Competing Continuatio	n				
6. PROJECT F	A. FAIN NOSoDP000000 5a. ACTION TYPE Non-Competing Continuation			NOTICE OF AWARD					
F	rom 09/3	0/2018	Through	09/29/2023		-	-		ons)
7. BUDGET PE		DD/YYYY 0/2020	Through	MM/DD/YYYY 09/29/2021		AUTHORIZATION (Legislation/Regulations) [AWARD AUTHORITY NOT DEFINED FOR DP16-1601]			
8. TITLE OF P	ROJECT (OR PRO			00,20,2021					
			rograms-Innovative	State and Local Public Health	Strategies to	Prevent and Manage Diabetes and He	art Disease and	Stroke	
920 Wildw		10E3, 1VII3300R	I DEPARTMENT OF	-		eve Cramer /ildwood Dr			
	y and Public Health	-DUP				son City, MO 65109-5796			
	City, MO 65109-579				Phone: 573-522-2806				
10a. GRANTER	AUTHORIZING O	FFICIAL			10b. FEDE	RAL PROJECT OFFICER			
	a Mahaney				Mr. Robert Montierth				
920 Wildw		•			4770 Buford Hwy				
	City, MO 65109-579 3-751-6014	6			Atlanta, GA 30341-3717 Phone: 404.498.5378				
Flidile. 57	3-731-0014				1 1010. 404.400.0010				
				ALL AMOUNTS ARE	SHOWN IN L	ISD			
11. APPROVED	BUDGET (Exclude	s Direct Assistanc	ce)		12. AWARD	COMPUTATION			
	istance from the Fe				a. Amount	of Federal Financial Assistance (from	item 11m)		1,600,000.0
II Total project	costs including gran	t funds and all oth	ner financial participa	ation	b. Less Unobligated Balance From Prior Budget Periods 0.				
a. Salari	es and WageS			34,362.00	c. Less Cumulative Prior Award(s) This Budget Period			0.0	
b. Fringe	e Benefits			20,618.00			1,600,000.0		
c. To	tal Personnel Costs			54,980.00		MENDED FUTURE SUPPORT	oject Period		4,800,000.0
				0.00		the availability of funds and satisfactor	y progress of the	project):	
d. Equip	ment				YEAR	TOTAL DIRECT COSTS	YEAR	τοτα	L DIRECT COSTS
e. Suppli	es			2,100.00	a. 4	1,600,000.00	d. 7	1016	
f. Travel				4,684.00	b. 5	1,600,000.00	e. 8		
g. Const	ruction			0.00	c. 6		f. 9		
h. Other				89,236.00	15. PROGRAM	I INCOME SHALL BE USED IN ACCORD WITH (ONE OF THE FOLLOW	/ING	
i. Contra	ctual			1,437,240.00	a. b.	DEDUCTION ADDITIONAL COSTS			b
j. T(OTAL DIRECT COS	ts –	▶	1,588,240.00	c. MATCHING				
,	ECT COSTS			11,760.00	e.	OTHER (See REMARKS)			
I. TOTAL APPROVED BUDGET 1,600,000.00		16. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY, THE FEDERAL AWARDING 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 legislations.							
m. Feder	al Share		•	1,600,000.00	c. d.	This award notice including terms and conditions Federal administrative requirements, cost princip	, if any, noted below un les and audit requirem	nder REMARKS. ents applicable to	o this grant.
1 6461	ederal Share			0.00	prevail. Accept	ere are conflicting or otherwise inconsistent p otance of the grant terms and conditions is act the grant payment system.			

GRANTS MANAGEMENT OFFICIAL:

Stephanie Latham, Team Lead, Grants Management Officer 2939 Flowers Rd. South TV-2 Atlanta, GA 30333 Phone: 770.488.2917

17.0BJ CLA	ASS 41.51	18a. VENDOR CODE	18b.	. EIN		19. DUNS	878092600	20. CONG. DIST.	03
FY	-ACCOUNT NO.	DOCUMEN	IT NO.	ADMINISTRA	TIVE CODE	AMT AC	TION FIN ASST	APPROPRIAT	ION
21. a.	0-921Z5SG	b. 19NU58DI	P006658 C.	E)P	d.	\$800,000.00	e. 75	5-20-0948
22. a.	0-9390E1S	b. 19NU58DI	P006658 C.	E)P	d.	\$500,000.00	e. 7	5-X-0948
23. a.	0-939ZQZH	b. 19NU58DI	P006658 C.	Γ)P	d.	\$300,000.00	e. 75	-20-0948

PAGE 2 of 3	DATE ISSUED
	06/21/2020

GRANT NO. 5 NU58DP006658-03-00

Direct Assistance

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$0.00	\$0.00	\$0.00
Fringe Benefits	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$0.00	\$0.00	\$0.00
Contractual	\$0.00	\$0.00	\$0.00
Construction	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00

NOTICE OF AWARD (Continuation Sheet)

PAGE 3 of 3	DATE ISSUED
	06/21/2020

GRANT NO. 5 NU58DP006658-03-00

Federal Financial Report Cycle					
Reporting Period Start Date	Reporting Period End Date	Reporting Type	Reporting Period Due Date		
09/30/2018	09/29/2019	Annual	06/12/2020		
09/30/2019	09/29/2020	Final	12/29/2020		

AWARD ATTACHMENTS

Missouri Department of Health

5 NU58DP006658-03-00

1. Terms and Conditions

2. Technical Review

AWARD INFORMATION

Incorporation: In addition to the federal laws, regulations, policies, and CDC General Terms and Conditions for Non-research awards at

https://www.cdc.gov/grants/federalregulationspolicies/index.html, the Centers for Disease Control and Prevention (CDC) hereby incorporates Notice of Funding Opportunity (NOFO) number, DP18-1817, entitled Diabetes and Heart Disease & Stroke Prevent Programs-Innovative State and Local Public Health Strategies to Prevent and Manage Diabetes and Heart Disease and Stroke, and application date April 14, 2020 as may be amended, which are hereby made a part of this Non-research award, hereinafter referred to as the Notice of Award (NOA).

Approved Funding: Funding in the amount of \$1,600,000 is approved for the Year 03 budget period, which is September 30, 2020 through September 29, 2021. All future year funding will be based on satisfactory programmatic progress and the availability of funds.

The federal award amount is subject to adjustment based on total allowable costs incurred and/or the value of any third-party in-kind contribution when applicable.

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

Component/Project Funding: The NOFO provides for the funding of multiple components under this award. The approved component funding levels for this notice of award are:

NOFO Component	Amount
Diabetes	\$ 800,000
Heart Disease and Stroke Prevention	\$ 800,000

Financial Assistance Mechanism: Cooperative Agreement

Substantial Involvement by CDC: This is a cooperative agreement and CDC will have substantial programmatic involvement after the award is made. Substantial involvement is in addition to all post-award monitoring, technical assistance, and performance reviews undertaken in the normal course of stewardship of federal funds.

CDC program staff will assist, coordinate, or participate in carrying out effort under the award, and recipients agree to the responsibilities therein, as detailed in the NOFO.

- Supporting recipients in implementing cooperative agreement requirements and meeting program outcomes;
- Providing technical assistance to revise annual work plans;
- Assisting recipients in advancing program activities to achieve project outcomes;
- Providing scientific subject matter expertise (e.g., engaging non-physician team members, implementing and sustaining the National Diabetes Prevention Program) and resources in support of the selected strategies;
- Collaborating with recipients to develop and implement rigorous evaluation plans that align with CDC evaluation activities;
- Providing technical assistance on recipients' evaluation and performance measurement plans;
- Providing technical assistance to define and operationalize performance measures;

- Using webinars and other social media for recipients and CDC to communicate and share tools and resources;
- Establishing learning communities to facilitate the sharing of information among recipients;
- Providing professional development and training opportunities either in person or through virtual, web-based training formats for the purpose of sharing the latest science, best practices, success stories, and program models;
- Participating in relevant meetings, committees, conference calls, and working groups related to the cooperative agreement requirements to achieve outcomes;
- Coordinating communication and program linkages with other CDC programs and Federal agencies, such as the Health Resources and Services Administration (HRSA), Centers for Medicare & Medicaid Services (CMS), Indian Health Service (IHS), and the National Institutes of Health (NIH);
- Providing surveillance technical assistance and state-specific data collected by CDC;
- Providing technical expertise to other CDC programs and Federal agencies on how to interface with recipients;
- Translating and disseminating lessons learned through publications, meetings, and other means on promising and best practices to expand the evidence base; and
- Hosting a meeting/training during the first year of the project period and later in the project period (for a total of two meetings/trainings for recipients).

Additionally, CDC will:

- Ensure that recipients have access to expertise found throughout the National Center for Chronic Disease Prevention and Health Promotion.
- Collaborate with recipients to explore appropriate flexibilities needed to meet public health outcomes and goals. Flexibility in cooperative agreements includes recipients' ability to propose alternative methods to achieve the outcomes and goals of the cooperative agreement that align with recipient's opportunities for success, infrastructure, partner and stakeholder buy-in, demographics, and burden. This includes bringing together resources from multiple cooperative agreements to jointly advance the goals of each and expanding the dialogue to bring in other CDC and recipient staff to reach a win/win solution.
- o Create greater efficiencies and consistency across NCCDPHP programs. For example,
- Jointly developed resources and tools that focus on cross-cutting functions, settings, domains, risk factors, conditions and diseases to ensure consistent messages and to meet technical assistance needs.
- Joint training and technical assistance opportunities that help state health departments produce policies and programs that are more holistic.
- Continue and expand support for recipients to leverage National Center for Chronic Disease Prevention and Health Promotion resources to address cross-cutting functions, domains, settings, risk factors, and diseases.

Technical Review Statement Response Requirement: 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 CDC 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, October 30, 2020, will cause delay in programmatic progress and will adversely affect the future funding of this project.

Budget Revision Requirement: By October 30, 2020 the recipient must submit a revised budget with a narrative justification.

Salaries and Wages

Provide a breakdown and document what is included in the staff fringe benefits that make up 60 percent of total personnel salaries.

Contractual

Category A:

- Additional justification details are required about the funding for CHW's in the St. Louis Health department. Funding of CHW salaries is not permitted for direct patient care. If the role filled by the CHW is standing up efforts with administrative responsibilities at new sites, the percentage of time allocated for that is justifiable. Still, a breakdown of that time will be needed.
- Funding of advanced lifestyle coach training must align with the available courses from a CDC MOU training entity. Additional trainings for lifestyle coaches and the specific costs allowed would need to be discussed with the project officer.
- The recipient should provide the specific deliverables that will be obtained from the contract with the Missouri Pharmacy Association.

Category B:

- The recipient should reference the strategies related to each contract in the scope of work to help demonstrate alignment with the work plan.
- Contract positions for community health workers and community resource coordinators are the same as those requested in Year two. The recipient should provide a detailed description to support these positions again in Year three.
- Under contracts, the statement of work for each community health worker and community resource coordinator lacks specificity as it relates to the work for Category A and Category B. The recipient should be prepared to discuss with the project officers during TA calls: what category each position is responsible for, a description of the work, whether these positions are servicing a new location and the sustainability plan going forward.

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, you are required to contact the GMS/GMO identified in the CDC Staff Contacts section of this notice before the due date.

Expanded Authority: The recipient is permitted the following expanded authority in the administration of the award.

Carryover of unobligated balances from one budget period to a subsequent budget period. Unobligated funds may be used for purposes within the scope of the project as originally approved. Recipients will report use, or intended use, of unobligated funds in Section 12 "Remarks" of the annual Federal Financial Report. If the GMO determines that some or all of the unobligated funds are not necessary to complete the project, the GMO may restrict the recipient's authority to automatically carry over unobligated balances in the future, use the balance to reduce or offset CDC funding for a subsequent budget period, or use a combination of these actions.

FUNDING RESTRICTIONS AND LIMITATIONS

Notice of Funding Opportunity (NOFO) Restrictions: CDC-RFA-DP18-1817

o Recipients may not use funds for research.

- Recipients may not use funds for clinical care except as allowed by law.
- Recipients may use funds only for reasonable program purposes, including personnel, travel, supplies, and services.
- Generally, recipients may not use funds to purchase furniture or equipment. Any such proposed spending must be clearly identified in the budget.
- Reimbursement of pre-award costs generally is not allowed, unless the CDC provides written approval to the recipient.
- Other than for normal and recognized executive-legislative relationships, no funds may be used for:
 - publicity or propaganda purposes, for the preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body
 - 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 any legislative body
- See <u>Additional Requirement (AR) 12</u> for detailed guidance on this prohibition and <u>additional guidance on lobbying for CDC recipients</u>.
- The direct and primary recipient in a cooperative agreement program must perform a substantial role in carrying out project outcomes and not merely serve as a conduit for an award to another party or provider who is ineligible.

In accordance with the United States Protecting Life in Global Health Assistance policy, all nongovernmental organization (NGO) applicants acknowledge that foreign NGOs that receive funds provided through this award, either as a prime recipient or subrecipient, are strictly prohibited, regardless of the source of funds, from performing abortions as a method of family planning or engaging in any activity that promotes abortion as a method of family planning, or to provide financial support to any other foreign non-governmental organization that conducts such activities. See Additional Requirement (AR) 35 for applicability (https://www.cdc.gov/grants/additionalrequirements/ar-35.html).

Indirect Costs: Indirect costs are approved based on the negotiated indirect cost rate agreement dated January 24, 2019, which calculates indirect costs as follows, a Provisional is approved at a rate of 21.40% 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, 2020 to June 30, 2022.

REPORTING REQUIREMENTS

Required Disclosures for Federal Awardee Performance and Integrity Information System (FAPIIS): Consistent with 45 CFR 75.113, applicants and recipients must disclose in a timely manner, in writing to the CDC, with a copy to the HHS Office of Inspector General (OIG), all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Subrecipients must disclose, in a timely manner in writing to the prime recipient (pass through entity) and the HHS OIG, all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Disclosures must be sent in writing to the CDC and to the HHS OIG at the following addresses:

CDC, Office of Grants Services Patricia French, Grants Management Officer/Specialist Centers for Disease Control and Prevention Branch 5 Supporting Chronic Diseases and Injury Prevention 2939 Flowers Road S MS TV-2 Chamblee, GA 30341 Email: pff6@cdc.gov (Include "Mandatory Grant Disclosures" in subject line)

AND

U.S. Department of Health and Human Services Office of the Inspector General ATTN: Mandatory Grant Disclosures, Intake Coordinator 330 Independence Avenue, SW Cohen Building, Room 5527 Washington, DC 20201

Fax: (202)-205-0604 (Include "Mandatory Grant Disclosures" in subject line) or Email: <u>MandatoryGranteeDisclosures@oig.hhs.gov</u>

Recipients must include this mandatory disclosure requirement in all subawards and contracts under this award.

Failure to make required disclosures can result in any of the remedies described in 45 CFR 75.371. Remedies for noncompliance, including suspension or debarment (See 2 CFR parts 180 and 376, and 31 U.S.C. 3321).

CDC is required to report any termination of a federal award prior to the end of the period of performance due to material failure to comply with the terms and conditions of this award in the OMB-designated integrity and performance system accessible through SAM (currently FAPIIS). (45 CFR 75.372(b)) CDC must also notify the recipient if the federal award is terminated for failure to comply with the federal statutes, regulations, or terms and conditions of the federal award. (45 CFR 75.373(b))

PAYMENT INFORMATION

The HHS Office of the Inspector General (OIG) maintains a toll-free number (1-800-HHS-TIPS [1-800-447-8477]) for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. Information also may be submitted by e-mail to <u>hhstips@oig.hhs.gov</u> or

by mail to Office of the Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington DC 20201. Such reports are treated as sensitive material and submitters may decline to give their names if they choose to remain anonymous.

Payment Management System Subaccount: Funds awarded in support of approved activities have been obligated in a subaccount in the PMS, herein identified as the "P Account". Funds must be used in support of approved activities in the NOFO and the approved application.

The grant document number identified on the bottom of Page 1 of the Notice of Award must be known in order to draw down funds.

CDC Staff Contacts

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

GMS Contact:

Patricia French, Grants Management Specialist/Officer Centers for Disease Control and Prevention Branch 5 Supporting Chronic Diseases and Injury Prevention 2939 Flowers Road S MS TV2 Atlanta, GA 30341 Telephone: 770.488.2849 Email: pff6@cdc.gov

Program/Project Officer: The PO is the federal official responsible for monitoring the programmatic, scientific, and/or technical aspects of grants and cooperative agreements, as well as contributing to the effort of the award under cooperative agreements.

Programmatic Contact:

Robert Montierth, Project Officer Centers for Disease Control and Prevention Telephone: 770.488.5378 Email: nxv9@cdc.gov

CDC-RFA-DP-18-1817 Innovative State and Local Public Health Strategies to Prevent and Manage Diabetes and Heart Disease and Stroke Technical Review: Year 2 Annual Performance Report (APR)/Year 3 Work Plan

Recipient: Missouri

Date Reviewed: April 30, 2020

Award Number: DP006658

Funding Amount Requested: \$ 1,600,000

Funding Recommendation: Approved with budget modifications

Lead Project Officer: Robert Montierth

Year 2 APR Comments

Category A

- The recipient provided a Year 2 APR that demonstrates initial progress toward achieving the strategy-specific outcomes.
- The recipient's activities to help engage community health workers (CHWs) in making referrals
 to the YMCA for the National Diabetes Prevention Program (National DPP) lifestyle change
 program have resulted in a significant increase in referrals. The utilization of CHWs
 is one of the most significant successes so far and continues to be one of the greatest
 opportunities for engagement as the project moves forward. In addition, the recipient's
 activities to strengthen the relationship between the YMCA and other partners has also been
 pivotal in increasing referrals.

Category B

- In collaboration with the National Association of Chronic Disease Directors, the recipient joined E-Connect with The Missouri Health Connection (MHC) – one of the largest health information exchange (HIE) networks in the United States and the only secure, statewide, private, non-profit HIE in the state. This created a clinical link to MHC, which will be available to all clinics connected to the HIE.
- The recipient has demonstrated its dedication to developing a statewide CHW infrastructure that will include advanced training components in trauma awareness, mental health first aid, health literacy translation, anti-racism training and other key topics determined by The Alliance partners (a collaboration of 5 public health and medical care organizations) to address social determinants of health among its vulnerable populations. These advanced training opportunities are available to Community Resource Coordinators, pharmacists and health care providers, and will improve the health outcomes of those seeking services.

Year 3 Work Plan

Overarching Comments

- The recipient is required to work with its CDC project officers and evaluators post award to further refine the work plan, performance measure targets, and evaluation and performance measurement plan (EPMP), as needed.
- Moving into Year 3, the recipient plans to carry out activities that continue and build upon the work from Year 2.

Category A

Recommendations on Activities:

- Activity A.1.c. The recipient should include more details on the number of trainings for the referral system to the National DPP lifestyle change program and the targets that will be reached.
- Activity A.1.d is vaguely written. The recipient should provide additional information about how it will be working on expanding existing bidirectional referral capacity with National DPP providers.
- Activities A.2.d and e with pharmacies (there are two A.2.d's). The recipient should quantify the number of sites/locations that it will focus on in Year 3.
- Activity A.3.a. The recipient should specify the number of success stories/testimonials that will be created for the recruitment campaign.
- Strategy A.4.a. The recipient should discuss with the project officer during a monthly call the plan to select advanced lifestyle coach trainings offered by CDC approved training entities and the plan to train the coaches.
- Strategy A.5, activities b, c, d and f. The recipient should provide additional details on the proposed activities and expected outcomes.
- Activities A.2.d(1), A.6.f and A.6.c are broadly written/non-specific. The recipient should include a more detailed description of the major milestones that will be accomplished in Year 3 to address these strategies and achieve progress on the performance measures.

Recommendations on Performance Measure Targets:

• The recipient submitted complete information for the Year 3 performance measure targets. Please continue to work with CDC evaluators on possible refinements to the performance measure targets and supporting information.

Recommendations on the Evaluation and Performance Measurement Plan:

• None—The recipient indicated no changes to the EPMP.

Category B

Recommendations on Activities:

- Several activities are broadly written and did not align with the performance measures. The recipient should address these items during technical assistance calls with the project officer and CDC program evaluator.
- B.3: The recipient should provide a description of what changes are expected at the clinical level as a result of using lessons learned from the Identify Assess Act (I-A-A) Framework learning collaborative. In addition, the recipient should discuss how these changes will help to meet the performance measures.
- B.5.a, c, B.6, and B.8: The recipient will need to provide greater details on the program activities and specify how these activities will support the performance measures.

Recommendations on Performance Measure Targets:

 The recipient did not submit complete information for Year 3 targets and/or notes for performance measures B.2a(ii), B.4a, B.7a, B.7b, B.8a, B.9, B.10a. For future reporting periods, please provide measure narrative and settings that align with your programmatic goals for all performance measures. Please continue to work with your CDC evaluator on possible refinements to the performance measure targets and supporting information.

Recommendations on the Evaluation and Performance Measurement Plan:

• There was not a requirement to submit an updated Category B EPMP. The recipient did not indicate any revisions or updates to their EPMP.

Research Determination

DP18-1817 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)

 \Box No research activities have been proposed.

 \Box Research activities have been proposed but were disapproved/disallowed.