Notice of Award

Award# 5 NU62PS924577-05-00

FAIN# NU62PS924577

Federal Award Date: 12/16/2021

Recipient Information

1. Recipient Name

HEALTH AND SENIOR SERVICES, MISSOURI DEPARTMENT OF

920 Wildwood Dr

Missouri Dept. of Health and Senior Services Jefferson City, MO 65109-5796

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2. Congressional District of Recipient

- 3. Payment System Identifier (ID)
- 4. Employer Identification Number (EIN)
- 5. Data Universal Numbering System (DUNS)
- 6. Recipient's Unique Entity Identifier
- 7. Project Director or Principal Investigator

Alicia Jenkins

ALICIA.JENKINS@HEALTH.MO.GOV

5737516431

8. Authorized Official

Mrs. Marcia Mahaney
Director, Division of Admnistration
marcia.mahaney@health.mo.gov
573-751-6014

Federal Agency Information

CDC Office of Financial Resources

9. Awarding Agency Contact Information

Terrian Dixon

Grants Management Officer

thd4@cdc.gov

770-488-2774

10.Program Official Contact Information

Rita Volpitta ynt0@cdc.gov 404-639-0479

Federal Award Information

11. Award Number

5 NU62PS924577-05-00

12. Unique Federal Award Identification Number (FAIN) NU62PS924577

13. Statutory Authority

301(A)AND317(K)(2)PHS42USC241(A)247B(K)2

14. Federal Award Project Title

Integrated HIV Surveillance and Prevention Programs for Health Departments

15. Assistance Listing Number

93 940

16. Assistance Listing Program Title

HIV Prevention Activities Health Department Based

17. Award Action Type

Non-Competing Continuation

18. Is the Award R&D?

No

Summary Federal Award Financial Information

19	Rudget Period Start Date	01/01/2022	- End Date	12/31/2022	

	0	
20.	Total Amount of Federal Funds Obligated by this Action	\$1,298,471.00
	20a. Direct Cost Amount	\$1,222,075.00
	20b. Indirect Cost Amount	\$76,396.00
21.	Authorized Carryover	\$0.00
22.	Offset	\$0.00
23.	Total Amount of Federal Funds Obligated this budget period	\$0.00
24.	Total Approved Cost Sharing or Matching, where applicable	\$0.00

25. Total Federal and Non-Federal Approved this Budget Period

27. Total Amount of the Federal Award including Approved

26. Project Period Start Date 01/01/2018 - End Date 12/31/2022

Cost Sharing or Matching this Project Period Not Available

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Mr. Arthur Lusby

Grants Management Officer, Team Lead

30. Remarks

Non-Competing Continuation: Financial Assistance in the amount of \$1,298,471

\$1,298,471.00

Notice of Award

Award# 5 NU62PS924577-05-00

FAIN# NU62PS924577

Federal Award Date: 12/16/2021

Recipient Information

Recipient Name

HEALTH AND SENIOR SERVICES, MISSOURI DEPARTMENT OF

920 Wildwood Dr

Missouri Dept. of Health and Senior Services

Jefferson City, MO 65109-5796

Congressional District of Recipient

03

Payment Account Number and Type

Employer Identification Number (EIN) Data

Universal Numbering System (DUNS)

878092600

Recipient's Unique Entity Identifier

Not Available

31. Assistance Type

Cooperative Agreement

32. Type of Award

Other

33.	Approved	Bud	lget
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(Excludes Direct Assistance)

- I. Financial Assistance from the Federal Awarding Agency Only
- II. Total project costs including grant funds and all other financial participation

a. Salaries and Wages	\$245,849.00
b. Fringe Benefits	\$156,232.00
c. TotalPersonnelCosts	\$402,081.00
d. Equipment	\$0.00
e. Supplies	\$122,291.00
f. Travel	\$25,956.00
g. Construction	\$0.00
h. Other	\$32,135.00
i. Contractual	\$639,612.00
j. TOTAL DIRECT COSTS	\$1,222,075.00
k. INDIRECT COSTS	\$76,396.00
1. TOTAL APPROVED BUDGET	\$1,298,471.00
m. Federal Share	\$1,298,471.00

34. Accounting Classification Codes

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
0-93909SC	18NU62PS924577	PS	41 51	\$0 00	75-20-0950
0-93909SM	18NU62PS924577	PS	41 51	\$0 00	75-20-0950
9-93909SC	18NU62PS924577	PS	41 51	\$0.00	75-19-0950
9-93909SM	18NU62PS924577	PS	41 51	\$0.00	75-19-0950
1-93909SC	18NU62PS924577	PS	41 51	\$0.00	75-21-0950
1-93909SM	18NU62PS924577	PS	41 51	\$0 00	75-21-0950
2-93909SC	18NU62PS924577	PS	41 51	\$1,084,626 00	75-22-0950
2-93909SM	18NU62PS924577	PS	41 51	\$213,845 00	75-22-0950

n. Non-Federal Share

\$0.00



Award# 5 NU62PS924577-05-00

FAIN# NU62PS924577

Federal Award Date: 12/16/2021

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

AWARD ATTACHMENTS

HEALTH AND SENIOR SERVICES, MISSOURI DEPARTMENT OF

5 NU62PS924577-05-00

1. YEAR 05 TERMS AND CONDITIONS PS18 1802

AWARD INFORMATION

<u>Incorporation:</u> In addition to the federal laws, regulations, policies, and CDC General Terms and Conditions for Non-research awards at https://www.cdc.gov/grants/federal-regulations-policies/index.html, the Centers for Disease Control and Prevention (CDC) hereby incorporates Notice of Funding Opportunity (NOFO) number CDC-RFA-PS18-1802, entitled Integrated HIV Surveillance and Prevention Programs for Health Departments, National Center for HIV, Viral Hepatitis, STD, and TB Prevention (NCHHSTP),, and application dated September 13, 2021, as may be amended, which are hereby made a part of this Non-research award, hereinafter referred to as the Notice of Award (NoA).

<u>Approved Funding</u>: Funding in the amount of \$4,477,487 is approved for the Year 05 budget period, which is <u>January 1, 2022</u> through <u>December 31, 2022</u>. 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.

<u>Available Funding</u>: The CDC is operating under a continuing resolution; as a result, the total available funding for the Fiscal Year (FY) 05 budget period is contingent upon the enactment of applicable appropriation bill(s). Funding in the amount of \$1,298,471 in Financial Assistance (FA) is awarded on this NoA. The remainder of the budget period Approved Funding amount is subject to the availability of funds.

Component Funding	Amount
Component A: Surveillance	\$ 213,845
Component A: Prevention	\$ 1,084,626

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

<u>Assistance:</u> The purpose of this Notice of Award amendment is to notify you that the Centers for Disease Control and Prevention (CDC) incorporated Department of Health and Human Services (HHS) non-discrimination legal requirements for recipients of federal financial assistance into the CDC General Terms and Conditions within your Notice of Award. The new requirements are effective immediately. <u>The requirements are in the General Requirements</u> section of the General Terms and Conditions, and are also listed below.

You must administer your project in compliance with federal civil rights laws that prohibit discrimination on the basis of race, color, national origin, disability, age and, in some circumstances, religion, conscience, and sex (including gender identity, sexual orientation, and pregnancy). This includes taking reasonable steps to provide meaningful access to persons with limited English proficiency and providing programs that are accessible to and usable by persons with disabilities. The HHS Office for Civil Rights provides guidance on complying with civil rights laws enforced by HHS. See https://www.hhs.gov/civil-rights/for-providers/provider-

<u>obligations/index.html</u> <u>and https://www.hhs.gov/civil-rights/for-individuals/nondiscrimination/index.html</u>.

- You must take reasonable steps to ensure that your project provides meaningful access
 to persons with limited English proficiency. For guidance on meeting your legal
 obligation to take reasonable steps to ensure meaningful access to your programs or
 activities by limited English proficient individuals, see https://www.lep.gov/.
- For information on your specific legal obligations for serving qualified individuals with disabilities, including providing program access, reasonable modifications, and taking appropriate steps to provide effective communication, see http://www.hhs.gov/ocr/civilrights/understanding/disability/index.html.
- HHS funded health and education programs must be administered in an environment free of sexual harassment, see https://www.hhs.gov/civil-rights/for-individuals/sex-discrimination/index.html.
- For guidance on administering your project in compliance with applicable federal religious nondiscrimination laws and applicable federal conscience protection and associated anti-discrimination laws, see https://www.hhs.gov/conscience/conscience-protections/index.html and https://www.hhs.gov/conscience/religious-freedom/index.html.

Financial Assistance Mechanism: Cooperative Agreement

<u>Substantial Involvement by CDC:</u> 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.

In a cooperative agreement, CDC staff are substantially involved in the program activities, above and beyond routine grant monitoring. CDC activities for this program are as follows:

- 1. Collaborate to ensure coordination and implementation of strategies to support the implementation of HIV surveillance and prevention activities.
- 2. Work with awardees to identify and address capacity building assistance (CBA) and TA needs that are essential to the success of the project. Awardees must work with the assigned Project Officer/Project Consultant/Epidemiologist to establish a mechanism to request direct CDC TA and establish a CBA Request Information System (CRIS) user account to facilitate receipt of CBA.
- 3. Provide access to training and TA that will strengthen staff capacity relevant to all required strategies and activities of the program.

- 4. Provide guidance to awardees and set standards on data collection, use, and submission requirements.
- 5. Facilitate coordination, collaboration, and, where feasible, service integration among federal agencies, other CDC funded programs, other health departments, community based organizations, local and state planning groups, other CDC directly funded programs, national capacity building assistance providers, medical care providers, laboratories, recipients of the Ryan White HIV/AIDS Treatment Extension Act of 2009, and other partners working with people living with and at greatest risk for HIV infection toward common goals of risk reduction, disease detection, and a continuum of HIV prevention, care, and treatment.
- 6. Monitor awardee program performance using multiple approaches, such as site visits, emails, conference calls, and standardized review of performance, grantee feedback and other data reports, to support program development, implementation, evaluation, and improvement.
- 7. Provide guidance and coordination to funded organizations to improve the quality and effectiveness of work plans, evaluation strategies, products and services, and collaborative activities with other organizations.
- 8. Collaborate to compile and publish accomplishments, best practices, performance criteria, and lessons learned during the project period.
- 9. Collaborate in assessing progress toward meeting strategic and operational goals/objectives and in establishing measurement and accountability systems for 37 of 77 documenting outcomes, such as increased performance improvements and best or promising practices.
- 10. Collaborate on strategies to ensure the provision of appropriate and effective HIV prevention services to target populations.
- 11. Provide requirements and expectations for standardized and other data reporting and support monitoring and evaluation activities.
- 12. Share information, best practices, lessons learned, and evaluation results between awardees (e.g., through conferences, guidance, material development, webinars, data sharing publications, other social media, participation in meetings, committees, conference calls, and working groups related to the cooperative agreement and its projects).

<u>Budget Revision Requirement</u>: By <u>February 01, 2022</u> the recipient must submit a revised budget with a narrative justification. *The revised budget should be submitted via Grant Solutions as a prior approval, amendment type "Budget Revision*". 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.

Contracts:

1. Under the **Surveillance** budget the recipient will be required to provide itemized budgets for several contracts upon execution of contracts.

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.

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

<u>Addition alternative</u>: 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

Notice of Funding Opportunity (NOFO) Restrictions:

Restrictions that must be considered while planning the programs and writing the budget are:

- 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:
 - o 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
 - o the salary or expenses of any cooperative agreement 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 Additional Requirement (AR) 12
 (http://www.cdc.gov/grants/additionalrequirements/index.html#ar12) for detailed guidance on this prohibition and additional guidance on lobbying for CDC recipients
 (http://www.cdc.gov/grants/documents/Anti-Lobbying Restrictions for CDC Grantees July 2012.pdf).

- 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.
- Awardees may not use funds to purchase antiretroviral therapy.
- Awardees may not use funds to purchase sterile needles or syringes for drug injection.
- Funding should not be used for construction purposes.

<u>Indirect Costs:</u> Indirect costs are approved based on the Indirect Cost Rate Agreement dated March 30, 2021, which calculates indirect costs as follows: The type is <u>PROV.</u> with an effective period of <u>07/01/21 to 06/30/22</u> at a rate of <u>19.00</u> percent, applicable to <u>ALL Programs</u>.

Base: Direct salaries and wages including all fringe benefits

REPORTING REQUIREMENTS

<u>Performance Progress and Monitoring:</u> Performance information collection initiated under this grant/cooperative agreement has been approved by the Office of Management and Budget under **OMB Number 0920-1132**, "Performance Progress and Monitoring Report", Expiration Date 10/31/2022. The components of the PPMR are available for download at: https://www.cdc.gov/grants/already-have-grant/Reporting.html.

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

Terrian J. Dixon, Grants Management Officer/Specialist

Centers for Disease Control and Prevention

Prevention Infectious Disease Services

2939 Flowers Road, MS TV-2

Atlanta, GA 30341

Email: Tdixon@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: MandatoryGranteeDisclosures@oig.hhs.gov

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))

PROGRAM OR FUNDING GENERAL REQUIREMENTS

HIV Program Review Panel Requirement: All written materials, audiovisual materials, pictorials, questionnaires, survey instruments, websites, educational curricula and other relevant program materials must be reviewed and approved by an established program review panel. A list of reviewed materials and approval dates must be submitted to the CDC Grants Management Specialist identified in the CDC Roles and Responsibilities section of this NoA.

<u>Travel Requirement:</u> Ensure that appropriate health department representatives attend required CDC-sponsored meetings and conferences. Participation in CDC sponsored recipient meetings, conferences, and workshops is mandatory. Failure to attend the mandated meetings, conferences, and workshops (regardless of state financial or administrative crisis) shall be cause for a determination of reduction in travel funding.

<u>Prior Approval</u>: All requests, which require prior approval, must bear the signature of the authorized organization representative. The recipient must submit these requests by <u>September 02, 2022</u>. 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:

- Lift funding restriction
- Significant redirection of funds (i.e. cumulative changes of 25% of total award)
- Change in scope
- Implement a new activity or enter into a sub-award that is not specified in the approved budget
- Apply for supplemental funds
- Change in key personnel
- Extensions to period of performance

Templates for prior approval requests can be found at:

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

Templates for prior approval requests can be found at: http://www.cdc.gov/grants/alreadyhavegrant/priorapprovalrequests.html.

Additional information on the electronic grants administration system CDC non-research awards utilize, Grants Solutions, can be found at: https://www.cdc.gov/grants/grantsolutions/index.html.

Key Personnel: In accordance with 45 CFR Part 75.308, CDC recipients 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 NOFO, 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.

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 hhstips@oig.hhs.gov 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.

<u>Payment Management System Subaccount</u>: 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 **page 2**, **item 34** of the Notice of Award must be known in order to draw down funds.

PROGRAM OR FUNDING SPECIFIC CLOSEOUT REQUIREMENTS

Closeout Requirements:

Recipients must submit all closeout reports identified in this section within **90 days** of the period of performance end date. The reporting timeframe is the full period of performance. If the recipient does not submit all reports in accordance with this section and the terms and conditions of the Federal Award, CDC may proceed to close out with the information available within one year of the period of performance end date unless otherwise directed by authorizing statutes. Failure to submit <u>timely</u> and <u>accurate final reports</u> may affect future funding to the organization or awards under the direction of the same Project Director/Principal Investigator (PD/PI).

All manuscripts published as a result of the work supported in part or whole by the grant must be submitted with the progress reports.

The final reports required are the following.

Final Federal Financial Report (FFR, SF-425): The FFR should only include those funds authorized and expended during the timeframe covered by the report. The Final FFR, SF-425 is required and must be submitted no later than 90 days after the period of performance end date through recipient online accounts in the Payment Management System. The final FFR will consolidate data reporting responsibilities to one entry point within PMS which will assist with the reconciliation of expenditures and disbursements to support the timely close-out of grants.

The final FFR must indicate the exact balance of unobligated funds and may not reflect any unliquidated obligations. Remaining unobligated funds will be de-obligated and returned to the U.S. Treasury.

Every recipient should already have a PMS account to allow access to complete the SF-425.

Additional guidance on submission of Federal Financial Reports can be found at https://www.cdc.gov/grants/documents/change-in-federal-reporting-fy-2021-recipients.pdf.

Equipment and Supplies - Tangible Personal Property Report (SF-428): A completed Tangible Personal Property Report SF-428 and Final Report SF-428B addendum must be submitted, along with any Supplemental Sheet SF-428S detailing all major equipment acquired or furnished under this project with a unit acquisition cost of \$5,000 or more.

Electronic versions of the forms can be downloaded by visiting: https://www.grants.gov/web/grants/forms/post-award-reporting-forms.html#sortby=1.

If no equipment was acquired under an award, a negative report is required.

The recipient must identify each item of equipment that it wishes to retain for continued use in accordance with 45 CFR Part 75. The awarding agency may exercise its rights to require the transfer of equipment purchased under the assistance award. CDC will notify the recipient if transfer to title will be required and provide disposition instruction on all major equipment.

Equipment with a unit acquisition cost of less than \$5,000 that is no longer to be used in projects or programs currently or previously sponsored by the federal government may be retained, sold, or otherwise disposed of, with no further obligation to the federal government.

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 recipient is required to contact the Grants Officer listed in the contacts section of this notice before the due date.

CDC Staff Contacts Information is listed on page 1 of the NoA

<u>Grants Management Specialist</u>: 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.

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.

<u>Grants Management Officer</u>: 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.