

1. DATE ISSUED: 09/22/2015		2. PROGRAM CFDA: 93.251		 <p align="center">NOTICE OF AWARD AUTHORIZATION (Legislation/Regulation) Public Health Service Act, Title III, Section 301 Section 399M of the Public Health Service Act §399M of the Public Health Service Act, (42 U.S.C. 280g-1), as amended by the Early Hearing Detection and Intervention Act of 2010 (P.L. 111-337) Public Health Service Act, §399M (42 U.S.C. 280g-1), as amended by the Early Hearing Detection and Intervention Act of 2010 (P.L. 111-337) Public Health Service Act, § 399M (42 U.S.C. 280g-1), as amended by the Children's Health Act of 2000, § 702 (P.L. 106-310) and further amended by the Early Hearing Detection and Intervention Act of 2010 (P.L. 111-337) Public Health Service Act § 399M (42 U.S.C. 280g-1), as amended by the Children's Health Act of 2000, § 702 (P.L. 106-310) and further amended by the Early Hearing Detection and Intervention Act of 2010 (P.L. 111-337)</p>																																																			
3. SUPERSEDES AWARD NOTICE dated: 04/14/2015 except that any additions or restrictions previously imposed remain in effect unless specifically rescinded.																																																							
4a. AWARD NO.: 6 H61MC00071-15-03		4b. GRANT NO.: H61MC00071																																																					
5. FORMER GRANT NO.:																																																							
6. PROJECT PERIOD: FROM: 03/31/2001 THROUGH: 03/31/2017																																																							
7. BUDGET PERIOD: FROM: 04/01/2015 THROUGH: 03/31/2016																																																							
8. TITLE OF PROJECT (OR PROGRAM): UNIVERSAL NEWBORN HEARING SCREENING																																																							
9. GRANTEE NAME AND ADDRESS: MISSOURI DEPARTMENT OF HEALTH PO BOX 570 Jefferson City, MO 65102-0570 DUNS NUMBER: 878092600			10. DIRECTOR: (PROGRAM DIRECTOR/PRINCIPAL INVESTIGATOR) Sharmini Rogers MISSOURI DEPARTMENT OF HEALTH Division Line: Missouri Department of Health and Senior Services PO BOX 570 Jefferson City, MO 65102																																																				
11. APPROVED BUDGET: (Excludes Direct Assistance) <input checked="" type="checkbox"/> Grant Funds Only <input type="checkbox"/> Total project costs including grant funds and all other financial participation			12. AWARD COMPUTATION FOR FINANCIAL ASSISTANCE:																																																				
<table border="0"> <tr><td>a. Salaries and Wages :</td><td align="right">\$92,930.00</td></tr> <tr><td>b. Fringe Benefits :</td><td align="right">\$45,536.00</td></tr> <tr><td>c. Total Personnel Costs :</td><td align="right">\$138,466.00</td></tr> <tr><td>d. Consultant Costs :</td><td align="right">\$0.00</td></tr> <tr><td>e. Equipment :</td><td align="right">\$0.00</td></tr> <tr><td>f. Supplies :</td><td align="right">\$0.00</td></tr> <tr><td>g. Travel :</td><td align="right">\$3,140.00</td></tr> <tr><td>h. Construction/Alteration and Renovation :</td><td align="right">\$0.00</td></tr> <tr><td>i. Other :</td><td align="right">\$18,513.00</td></tr> <tr><td>j. Consortium/Contractual Costs :</td><td align="right">\$73,961.00</td></tr> <tr><td>k. Trainee Related Expenses :</td><td align="right">\$0.00</td></tr> <tr><td>l. Trainee Stipends :</td><td align="right">\$0.00</td></tr> <tr><td>m. Trainee Tuition and Fees :</td><td align="right">\$0.00</td></tr> <tr><td>n. Trainee Travel :</td><td align="right">\$0.00</td></tr> <tr><td>o. TOTAL DIRECT COSTS :</td><td align="right">\$234,080.00</td></tr> <tr><td>p. INDIRECT COSTS (Rate: % of S&W/TADC) :</td><td align="right">\$28,801.00</td></tr> <tr><td>q. TOTAL APPROVED BUDGET :</td><td align="right">\$262,881.00</td></tr> <tr><td> i. Less Non-Federal Share:</td><td align="right">\$0.00</td></tr> <tr><td> ii. Federal Share:</td><td align="right">\$262,881.00</td></tr> </table>			a. Salaries and Wages :	\$92,930.00	b. Fringe Benefits :	\$45,536.00	c. Total Personnel Costs :	\$138,466.00	d. Consultant Costs :	\$0.00	e. Equipment :	\$0.00	f. Supplies :	\$0.00	g. Travel :	\$3,140.00	h. Construction/Alteration and Renovation :	\$0.00	i. Other :	\$18,513.00	j. Consortium/Contractual Costs :	\$73,961.00	k. Trainee Related Expenses :	\$0.00	l. Trainee Stipends :	\$0.00	m. Trainee Tuition and Fees :	\$0.00	n. Trainee Travel :	\$0.00	o. TOTAL DIRECT COSTS :	\$234,080.00	p. INDIRECT COSTS (Rate: % of S&W/TADC) :	\$28,801.00	q. TOTAL APPROVED BUDGET :	\$262,881.00	i. Less Non-Federal Share:	\$0.00	ii. Federal Share:	\$262,881.00	<table border="0"> <tr><td>a. Authorized Financial Assistance This Period</td><td align="right">\$262,881.00</td></tr> <tr><td>b. Less Unobligated Balance from Prior Budget Periods</td><td></td></tr> <tr><td> i. Additional Authority</td><td align="right">\$0.00</td></tr> <tr><td> ii. Offset</td><td align="right">\$0.00</td></tr> <tr><td>c. Unawarded Balance of Current Year's Funds</td><td align="right">\$0.00</td></tr> <tr><td>d. Less Cumulative Prior Awards(s) This Budget Period</td><td align="right">\$250,000.00</td></tr> <tr><td>e. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION</td><td align="right">\$12,881.00</td></tr> </table>	a. Authorized Financial Assistance This Period	\$262,881.00	b. Less Unobligated Balance from Prior Budget Periods		i. Additional Authority	\$0.00	ii. Offset	\$0.00	c. Unawarded Balance of Current Year's Funds	\$0.00	d. Less Cumulative Prior Awards(s) This Budget Period	\$250,000.00	e. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION	\$12,881.00
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13. RECOMMENDED FUTURE SUPPORT: (Subject to the availability of funds and satisfactory progress of project)																																																							
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15. PROGRAM INCOME SUBJECT TO 45 CFR 75.307 SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES: A=Addition B=Deduction C=Cost Sharing or Matching D=Other [A] Estimated Program Income: \$0.00																																																							
16. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY HRSA, IS 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 cited above. b. The grant program regulation cited above. c. This award notice including terms and conditions, if any, noted below under REMARKS. d. 45 CFR Part 75 as applicable. 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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No)																																																							
<i>Electronically signed by Tammy Ponton , Grants Management Officer on : 09/22/2015</i>																																																							

17. OBJ. CLASS: 41.51		18. CRS-EIN: [REDACTED]		19. FUTURE RECOMMENDED FUNDING: \$0.00		
FY-CAN	CFDA	DOCUMENT NO.	AMT. FIN. ASST.	AMT. DIR. ASST.	SUB PROGRAM CODE	SUB ACCOUNT CODE
15 - 3893045	93.251	14H61MC00071	\$12,881.00	\$0.00		UNHSIP

HRSA Electronic Handbooks (EHBs) Registration Requirements

The Project Director of the grant (listed on this NoA) and the Authorizing Official of the grantee organization are required to register (if not already registered) within HRSA's Electronic Handbooks (EHBs). Registration within HRSA EHBs is required only once for each user for each organization they represent. To complete the registration quickly and efficiently we recommend that you note the 10-digit grant number from box 4b of this NoA. After you have completed the initial registration steps (i.e., created an individual account and associated it with the correct grantee organization record), be sure to add this grant to your portfolio. This registration in HRSA EHBs is required for submission of noncompeting continuation applications. In addition, you can also use HRSA EHBs to perform other activities such as updating addresses, updating email addresses and submitting certain deliverables electronically. Visit <https://grants3.hrsa.gov/2010/WebEPSExternal/Interface/common/accesscontrol/login.aspx> to use the system. Additional help is available online and/or from the HRSA Call Center at 877-Go4-HRSA/877-464-4772.

Terms and Conditions

Failure to comply with the remarks, terms, conditions, or reporting requirements may result in a draw down restriction being placed on your Payment Management System account or denial of future funding.

Grant Specific Term(s)

1. This Notice of Award reflects an administrative supplement in the amount of \$12,881 which will allow the grantee to continue to build upon proven strategies to decrease the loss to the follow-up rate. The amount is reflected in the "other" category and is less than 25% of the awarded amount; therefore a revised budget will not be necessary.

All prior terms and conditions remain in effect unless specifically removed.

Contacts

NoA Email Address(es):

Name	Role	Email
Bret Fischer	Business Official	grants@dhss.mo.gov
John J Taylor	Business Official	johnny.taylor@health.mo.gov
Linda M Cade	Authorizing Official	linda.cade@health.mo.gov
Sharmini Rogers	Program Director	sharmini.rogers@health.mo.gov

Note: NoA emailed to these address(es)

Program Contact:

For assistance on programmatic issues, please contact Sadie Silcott at:
5600 Fishers Ln
Rockville, MD, 20852-1750
Email: ssilcott@hrsa.gov
Phone: (301) 443-0133
Fax: (301) 480-1312

Division of Grants Management Operations:

For assistance on grant administration issues, please contact Mary Worrell at:
MailStop Code: 10SWH03
HRSA/OFAM/DGMO
5600 Fishers Ln
Rockville, MD, 20852-1750
Email: mworrell@hrsa.gov
Phone: (301) 443-5181
Fax: (301) 443-5461