

Recipient Information	Federal Award Information		
1. Recipient Name HEALTH AND SENIOR SERVICES, MISSOURI DEPARTMENT OF 920 WILDWOOD DR	<b>11. Award Number</b> 6H79TI084749-01M001		
JEFFERSON CITY, 65109	<b>12. Unique Federal Award Identification Number (FAIN)</b> H79TI084749		
2. Congressional District of Recipient 03	<b>13. Statutory Authority</b> Section 546 of the PH Act, 42 USC 290ee-1, as amended		
3. Payment System Identifier (ID)	<b>14. Federal Award Project Title</b> Missouri Coordinating Overdose Response Partnerships and Support (MO-CORPS)		
4. Employer Identification Number (EIN)	<b>15. Assistance Listing Number</b> 93.243		
5. Data Universal Numbering System (DUNS) 878092600	<b>16. Assistance Listing Program Title</b> Substance Abuse and Mental Health Services_Projects of Regional an Significance	d National	
6. Recipient's Unique Entity Identifier UETLXV8NG8F4	17. Award Action Type Amendment		
7. Project Director or Principal Investigator Karen Wallace	18. Is the Award R&D?		
karen.wallace@health.mo.gov 573-751-6839	No		
	Summary Federal Award Financial Information		
8. Authorized Official	<b>19. Budget Period Start Date</b> 09/30/2022 - End Date 09/29/2023	Ć0.	
Marcia Mahaney	20. Total Amount of Federal Funds Obligated by this Action 20a. Direct Cost Amount	\$0	
grants@health.mo.gov		\$0 \$0	
573-751-6014	20b. Indirect Cost Amount	\$0 \$0	
	21. Authorized Carryover 22. Offset	\$0 \$0	
Federal Agency Information	<b>22.</b> Onset <b>23.</b> Total Amount of Federal Funds Obligated this budget period	\$0 \$800,000	
9. Awarding Agency Contact Information	24. Total Approved Cost Sharing or Matching, where applicable	\$800,000 \$0	
Linda Kim	25. Total Federal and Non-Federal Approved this Budget Period	\$800,000	
Center for Substance Abuse Treatment	<b>26. Project Period Start Date</b> 09/30/2022 - End Date 09/29/2026		
linda.kim@samhsa.hhs.gov	27. Total Amount of the Federal Award including Approved Cost	\$800,000	
240-276-1865	Sharing or Matching this Project Period		
10. Program Official Contact Information	Sharing or Matching this Project Period		
	28. Authorized Treatment of Program Income		
10. Program Official Contact Information			
<b>10. Program Official Contact Information</b> Devin Sweat	28. Authorized Treatment of Program Income		

Acceptance of this award, including the "Terms and Conditions," is acknowledged by the recipient when funds are drawn down or otherwise requested from the grant payment system.

Notice of Award

Issue Date: 11/03/2022



First Responders-CARA Department of Health and Human Services Substance Abuse and Mental Health Services Administration

Center for Substance Abuse Treatment

Award Number:6H79TI084749-01M001FAIN:H79TI084749Program Director:Karen Wallace

Project Title: Missouri Coordinating Overdose Response Partnerships and Support (MO-CORPS)

Organization Name: HEALTH AND SENIOR SERVICES, MISSOURI DEPARTMENT OF

Authorized Official: Marcia Mahaney

Authorized Official e-mail address: grants@health.mo.gov

**Budget Period:** 09/30/2022 – 09/29/2023 **Project Period:** 09/30/2022 – 09/29/2026

Dear Grantee:

The Substance Abuse and Mental Health Services Administration hereby awards a grant in the amount of \$0 (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to HEALTH AND SENIOR SERVICES, MISSOURI DEPARTMENT OF in support of the above referenced project. This award is pursuant to the authority of Section 546 of the PH Act, 42 USC 290ee-1, as amended and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

This award addresses the following Amendment action: Change in Terms and Conditions

Award recipients may access the SAMHSA website at <u>www.samhsa.gov</u> (click on "Grants" then SAMHSA Grants Management), which provides information relating to the Division of Payment Management System, HHS Division of Cost Allocation and Postaward Administration Requirements. Please use your grant number for reference.

Acceptance of this award including the "Terms and Conditions" is acknowledged by the grantee when funds are drawn down or otherwise obtained from the grant payment system.

If you have any questions about this award, please contact your Grants Management Specialist and your Government Project Officer listed in your terms and conditions.

Sincerely yours, Linda Kim Grants Management Officer Division of Grants Management

See additional information below

### SECTION I - AWARD DATA - 6H79TI084749-01M001

Award Calculation (U.S. Dollars)	
Personnel(non-research)	\$32,916
Fringe Benefits	\$2,469
Supplies	\$1,620
Contractual	\$756,272
Direct Cost	\$793,277
Indirect Cost	\$6,723
Approved Budget	\$800,000
Federal Share	\$800,000
Cumulative Prior Awards for this Budget Period	\$800,000

#### AMOUNT OF THIS ACTION (FEDERAL SHARE)

 SUMMARY TOTALS FOR ALL YEARS

 YR
 AMOUNT

 1
 \$800,000

Note: Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project.

Fiscal Info	rmation:		
CFDA Number: EIN: Document Number:		93.243	
		22TI84749A	
Fiscal Year:		2022	
IC	CAN	Amount	
ТΙ	C96N707	\$0	
	AN		2022

<u>IC</u>	CAN	2022
<u>TI</u>	<u>C96N707</u>	<u>\$0</u>

TI Administrative Data: PCC: FRCARA22 / OC: 4145

### SECTION II – PAYMENT/HOTLINE INFORMATION – 6H79TI084749-01M001

Payments under this award will be made available through the HHS Payment Management System (PMS). PMS is a centralized grants payment and cash management system, operated by the HHS Program Support Center (PSC), Division of Payment Management (DPM). Inquiries regarding payment should be directed to: The Division of Payment Management System, PO Box 6021, Rockville, MD 20852, Help Desk Support – Telephone Number: 1-877-614-5533.

The HHS Inspector General maintains a toll-free hotline for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. The telephone number is: 1-800-HHS-TIPS (1-800-447-8477). The mailing address is: Office of Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington, DC 20201.

### SECTION III - TERMS AND CONDITIONS - 6H79TI084749-01M001

\$0

This award is based on the application submitted to, and as approved by, SAMHSA on the above-title project and is subject to the terms and conditions incorporated either directly or by reference in the following:

- a. The grant program legislation and program regulation cited in this Notice of Award.
- b. The restrictions on the expenditure of federal funds in appropriations acts to the extent those restrictions are pertinent to the award.
- c. 45 CFR Part 75 as applicable.
- d. The HHS Grants Policy Statement.
- e. This award notice, INCLUDING THE TERMS AND CONDITIONS CITED BELOW.

## Treatment of Program Income:

Use of program income – Additive: Recipients will add program income to funds committed to the project to further eligible project objectives. Sub-recipients that are for-profit commercial organizations under the same award must use the deductive alternative and reduce their subaward by the amount of program income earned.

In accordance with the regulatory requirements provided at 45 CFR 75.113 and Appendix XII to 45 CFR Part 75, recipients that have currently active Federal grants, cooperative agreements, and procurement contracts with cumulative total value greater than \$10,000,000 must report and maintain information in the System for Award Management (SAM) about civil, criminal, and administrative proceedings in connection with the award or performance of a Federal award that reached final disposition within the most recent five-year period. The recipient must also make semiannual disclosures regarding such proceedings. Proceedings information will be made publicly available in the designated integrity and performance system (currently the Federal Awardee Performance and Integrity Information System (FAPIIS)). Full reporting requirements and procedures are found in Appendix XII to 45 CFR Part 75.

## SECTION IV - TI SPECIAL TERMS AND CONDITIONS - 6H79TI084749-01M001

# **REMARKS**

# **Removal of Special Condition of Award**

This award removes the following *Special Condition of Award* based on the documentation submitted on <u>10/11/2022</u>.

Indirect Cost Rate Agreement due on <u>10/28/2022</u> based on the documentation received on <u>10/11/2022</u>.

This is a post-award amendment, therefore, this NoA reflects the current budget year only.

## STANDARD TERMS OF AWARD:

## **Compliance with Terms and Conditions**

FAILURE TO COMPLY WITH THE ABOVE STATED TERMS AND CONDITIONS MAY RESULT IN ACTIONS IN ACCORDANCE WITH <u>45 CFR 75.371</u>, REMEDIES FOR NON-COMPLIANCE AND <u>45 CFR 75.372</u> TERMINATION. THIS MAY INCLUDE WITHHOLDING PAYMENT, DISALLOWANCE OF COSTS, SUSPENSION AND DEBARMENT, TERMINATION

# OF THIS AWARD, OR DENIAL OF FUTURE FUNDING.

All previous terms and conditions remain in effect until specifically approved and removed by the Grants Management Officer.

## Staff Contacts:

Devin Sweat, Program Official Phone: 303-551-1018 Email: devin.sweat@samhsa.hhs.gov

Linda Kim, Grants Specialist Phone: 240-276-1865 Email: linda.kim@samhsa.hhs.gov