

1. DATE ISSUED MM/DD/YYYY 08/31/2020

1a. SUPERSEDES AWARD NOTICE dated 07/29/2020 except that any additions or restrictions previously imposed remain in effect unless specifically rescinded

2. CFDA NO. 93.136 - Injury Prevention and Control Research and State and Community Based Programs

3. ASSISTANCE TYPE Cooperative Agreement

4. GRANT NO. 6 NU17CE925004-02-01 Formerly

5. TYPE OF AWARD Other

4a. FAIN NU17CE925004

5a. ACTION TYPE Post Award Amendment

6. PROJECT PERIOD MM/DD/YYYY From 09/01/2019 Through 08/31/2022

7. BUDGET PERIOD MM/DD/YYYY From 09/01/2020 Through 08/31/2021

8. TITLE OF PROJECT (OR PROGRAM) Overdose Data in Action - NCIPC

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention
CDC Office of Financial Resources

2939 Brandywine Road
Atlanta, GA 30341

NOTICE OF AWARD
AUTHORIZATION (Legislation/Regulations)
Section 311(c)(1) of the PHS Act (42 USC § 243(c)(1))

9a. GRANTEE NAME AND ADDRESS
HEALTH AND SENIOR SERVICES, MISSOURI DEPARTMENT OF
920 WILDWOOD DR
JEFFERSON CITY, MO 65109-5796

9b. GRANTEE PROJECT DIRECTOR
Mr. Damon Ferlazzo
920 Wildwood Dr
Missouri Dept. of Health and Senior Services
Jefferson City, MO 65109-5796
Phone: 573-751-3871

10a. GRANTEE AUTHORIZING OFFICIAL
Ms. Marcia A Mahaney
920 Wildwood Drive
Division of Administration
Jefferson City, MO 65109-5796

10b. FEDERAL PROJECT OFFICER
Ms. Tawanda Asamaoewei
4770 Buford Hwy
Atlanta, GA 30341-3717
Phone: 404.718.6389

ALL AMOUNTS ARE SHOWN IN USD

| | |
|--|--------------|
| 11. APPROVED BUDGET (Excludes Direct Assistance) | |
| I Financial Assistance from the Federal Awarding Agency Only | |
| II Total project costs including grant funds and all other financial participation | I |
| a. Salaries and WageS | 670,054.00 |
| b. Fringe Benefits | 393,703.00 |
| c. Total Personnel Costs | 1,063,757.00 |
| d. Equipment | 0.00 |
| e. Supplies | 53,693.00 |
| f. Travel | 66,889.00 |
| g. Construction | 0.00 |
| h. Other | 125,565.00 |
| i. Contractual | 3,399,156.00 |
| j. TOTAL DIRECT COSTS | 4,709,060.00 |
| k. INDIRECT COSTS | 213,815.00 |
| l. TOTAL APPROVED BUDGET | 4,922,875.00 |
| m. Federal Share | 4,922,875.00 |
| n. Non-Federal Share | 0.00 |

| | |
|--|--------------|
| 12. AWARD COMPUTATION | |
| a. Amount of Federal Financial Assistance (from item 11m) | 4,922,875.00 |
| b. Less Unobligated Balance From Prior Budget Periods | 0.00 |
| c. Less Cumulative Prior Award(s) This Budget Period | 4,922,875.00 |
| d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION | 0.00 |
| 13. Total Federal Funds Awarded to Date for Project Period | 9,845,750.00 |

| | | | |
|--|--------------------|------|--------------------|
| 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. 3 | | d. 6 | |
| b. 4 | | e. 7 | |
| c. 5 | | f. 8 | |

15. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:

| | |
|---|----------|
| a. DEDUCTION | b |
| 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 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 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 OFFICIAL:

Valencia Williams, Lead Grant Management Specialist
1600 Clifton Rd
Atlanta, GA 30333
Phone: 404.498.3260

| | | | | |
|--------------------|-----------------------|---------------------|---------------------|--------------------|
| 17.OBJ CLASS 41.51 | 18a. VENDOR CODE | 18b. EIN | 19. DUNS 878092600 | 20. CONG. DIST. 03 |
| FY-ACCOUNT NO. | DOCUMENT NO. | ADMINISTRATIVE CODE | AMT ACTION FIN ASST | APPROPRIATION |
| 21. a. 0-9390BX6 | b. 19NU17CE925004OPCE | c. CE | d. \$0.00 | e. 75-20-0952 |
| 22. a. | b. | c. | d. | e. |
| 23. a. | b. | c. | d. | e. |

NOTICE OF AWARD (Continuation Sheet)

| | |
|--------------------------------|---------------------------|
| PAGE 2 of 2 | DATE ISSUED 08/31/2020 |
| GRANT NO. 6 NU17CE925004-02-01 | |

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

Missouri Department of Health

6 NU17CE925004-02-01

1. Revised TCs for OD2A NOA

ADDITIONAL TERMS AND CONDITIONS OF AWARD

Administrative Correction: The purpose of this amended Notice of Award is to correct the following terms and conditions that were written and/or omitted in the Notice of Award dated July 29, 2020.

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 |
|----------------|--------------|
| Surveillance | \$ 1,294,971 |
| Prevention | \$ 3,627,904 |

Funds are authorized and have been distributed as indicated in the approved budget.

Technical Review Statement Response Requirement: A response to the weaknesses must be submitted to and approved, in writing, by the Grants Management Specialist/Grants Management Officer (GMS/GMO) no later than 30 days from the budget period start date. Failure to submit the required information by the due date, October 1, 2020, will cause delay in programmatic progress and will adversely affect the future funding of this project.

Budget/Workplan Revision Requirement: By October 1, 2020, the recipient must submit a revised budget and workplan with narrative justification for the following requirement(s):

Workplan:

- Please revise the "Health Program Representative III" (Position #38) to remove unallowable activities related to disseminated NAS surveillance data (Surveillance Budget, p. 7).
- Please clarify the justification for In-state travel for NAS related meetings or conferences to ensure the purpose focuses on linkage to care of mothers and children impacted by NAS and related Strategy objectives

Contractual: Once selected the TBD Contractual cost with the six elements in accordance with the [CDC Budget Preparation Guidelines](#) must be submitted to and approved in writing by the Grants Management Specialist/Grants Management Officer (GMS/GMO) before cost can be expended.

Vacant Staff Positions: Once selected, provide the following information to the assigned Project Officer and Grants Management Specialist/Grants Management Officer (GMS/GMO). 1) name of staff member occupying the position 2) annual salary; 3) percentage of time budgeted for this program; 4) total months of salary budgeted; and 5) total salary requested. Also, provide a justification and describe the scope of responsibility for each position, relating it to the accomplishment of program objectives.

Programmatic Requirements:

- For data collected by the ESSENCE System: MO's DMP does not state if this data includes PII which is required as part of the DMP
- For Standards/Protocols for data collection: MO's DMP does not include information on the timing and frequency of this data collection.
- For Sharing and Access: with whom it will be shared and in what format (e.g. aggregate or individual row)
 - ESSENCE: MO's DMP includes information on who the data will be shared with, however they do not specify the format of the data.
 - Opioid Prescribing and Dispensing Data and Analysis: All necessary information is provided. The data cannot be shared.

- Sharing and Current Storage:
 - ESSENCE: MO does not provide any indication that there is available documentation for use or any potential limitations.
 - Opioid Prescribing and Dispensing Data and Analysis: All necessary information is provided. The data cannot be shared.

- Long-term Storage:
 - ESSENCE: No plan for long-term preservation is discussed within the DMP.
 - Opioid Prescribing and Dispensing Data and Analysis: All necessary information is provided. The data cannot be shared.

Natasha Jones, Grants Management Specialist
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Office of Grants Services (OGS)
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Email: njones6@cdc.gov