Grant Number: 1H79SP080319-01  
FAIN:    SP080319  
Program Director: Terry Ellsworth

Project Title: Missouri Overdose Rescue and Education (MORE) project

<table>
<thead>
<tr>
<th>Grantee Address</th>
<th>Business Address</th>
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</table>
| MISSOURI STATE DEPT/ HEALTH & SENIOR SRV  
Missouri Department of Health and Senior Services  
920 Wildwood Drive  
P.O. Box 570  
Jefferson City, MO 65102 |
| Fischer, Bret  
Missouri Department of Health and Senior Services  
920 Wildwood Drive  
P.O. Box 570  
Jefferson City, MO 65102 |

Budget Period: 09/30/2017 – 09/29/2018  
Project Period: 09/30/2017 – 09/29/2021

Dear Grantee:

The Substance Abuse and Mental Health Services Administration hereby awards a grant in the amount of $800,000 (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to MISSOURI STATE DEPT/ HEALTH & SENIOR SRV in support of the above referenced project. This award is pursuant to the authority of Section 546 of the Public Health and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

Award recipients may access the SAMHSA website at www.samhsa.gov (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,  
Eileen Bermudez  
Grants Management Officer  
Division of Grants Management

See additional information below
SECTION I – AWARD DATA – 1H79SP080319-01

Award Calculation (U.S. Dollars)

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
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</thead>
<tbody>
<tr>
<td>Salaries and Wages</td>
<td>$38,500</td>
</tr>
<tr>
<td>Fringe Benefits</td>
<td>$20,405</td>
</tr>
<tr>
<td>Personnel Costs (Subtotal)</td>
<td>$58,905</td>
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<tr>
<td>Supplies</td>
<td>$434,407</td>
</tr>
<tr>
<td>Consortium/Contractual Cost</td>
<td>$290,000</td>
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<tr>
<td>Travel Costs</td>
<td>$2,335</td>
</tr>
<tr>
<td>Other</td>
<td>$1,747</td>
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</table>

**Personnel Costs (Subtotal)**: $58,905

**Supplies**: $434,407

**Consortium/Contractual Cost**: $290,000

**Travel Costs**: $2,335

**Other**: $1,747

**Direct Cost**: $787,394

**Indirect Cost**: $12,606

**Approved Budget**: $800,000

**Cumulative Prior Awards for this Budget Period**: $0

**AMOUNT OF THIS ACTION (FEDERAL SHARE)**: $800,000

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<thead>
<tr>
<th>YR</th>
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<tr>
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*Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project.

Fiscal Information:

| CFDA Number: | 93.243 |
| EIN:         | [redacted] |
| Document Number: | 17SP80319A |
| Fiscal Year: | 2017   |

IC CAN Amount

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IC CAN 2017 2018 2019 2020

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<td>$800,000</td>
<td>$800,000</td>
</tr>
</tbody>
</table>

SP Administrative Data:

| PCC: FR-CARA / OC: | 4145 |

SECTION II – PAYMENT/HOTLINE INFORMATION – 1H79SP080319-01

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-
SECTION III – TERMS AND CONDITIONS – 1H79SP080319-01

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:
Additional Costs

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 – SP Special Terms and Conditions – 1H79SP080319-01

REMARKS

New Awards FY17

1. This Notice of Award (NoA) is issued to inform your organization that the application submitted through the funding opportunity SP-17-005 has been selected for funding. This award has a special condition to revise the budget submitted by your organization on July 31, 2017 as part of the application.

2. Recipients are expected to plan their work to ensure that funds are expended within the 12-month budget period reflected on this Notice of Award. If activities proposed in the approved budget cannot be completed within the current budget period, SAMSHA cannot guarantee the approval of any request for carryover of remaining unobligated funding.

3. Register Program Director/Project Director (PD) in eRA Commons:
If you have not already done so, you must register the PD listed on the HHS Checklist in eRA Commons to assign a Commons ID. Once the PD has received their Commons ID, please send this information to your Grants Management Specialist. You can find additional information about the eRA Commons registration process at https://era.nih.gov/reg_accounts/register_commons.cfm.

Key Staff

Key staff (or key staff positions, if staff has not been selected) are listed below:
Terry Ellsworth, interim Project Director @ 10% level of effort, in-kind
Claire Wood, Lead Evaluator @ 40% level of effort

Any changes in key staff including level of effort involving separation from the project for more than three months or a 25 percent reduction in time dedicated to the project, requires prior approval. Reference the Prior Approval Standard Term for additional information and instructions.

SPECIAL TERMS

Disparity Impact Statement (DIS)

By **November 30, 2017** you must:

Submit an electronic copy of a DIS to the Government Project Officer (GPO) and Grants Management Specialist (GMS) as identified under Contacts on this notice of award.

The DIS should be consistent with information in your application regarding access, *service use and outcomes for the program and include three components as described below. Questions about the DIS should be directed to your GPO. Examples of DIS can be found on the SAMHSA website at [https://www.samhsa.gov/grants/grants-management/disparity-impact-statement](https://www.samhsa.gov/grants/grants-management/disparity-impact-statement).

*Service use is inclusive of treatment services, prevention services as well as outreach, engagement, training, and/or technical assistance activities.

The disparity impact statement, in response to the Special Term of Award, consists of three components:

1. Proposed number of individuals to be served and/or reached by subpopulations in the grant implementation area should be provided in a table that covers the entire grant period. The disparate population(s) should be identified in a narrative that includes a description of the population and rationale for how the determination was made.
2. A quality improvement plan for how you will use your program (GPRA) data on access, use and outcomes to monitor and manage program outcomes by race, ethnicity and LGBT status, when possible. The quality improvement plan should include strategies for how processes and/or programmatic adjustments will support efforts to reduce disparities for the identified sub-populations.
3. The quality improvement plan should include methods for the development and implementation of policies and procedures to ensure adherence to the Enhanced Culturally and Linguistically Appropriate Services (CLAS) Standards and the provision of effective care and services that are responsive to:
   a. Diverse cultural health beliefs and practices;
   b. Preferred languages; and
   c. Health literacy and other communication needs of all sub-populations within the proposed geographic region.

SPECIAL CONDITIONS

Participant Protection

The Missouri State Department of Health and Senior Services, Missouri Overdose Rescue and Education (MORE) Project was cited by the Initial Review Committee (IRG) to provide additional documentation to adequately fulfill SAMHSA participant protection guidelines.

On or before October 31, 2017, you must submit your written response and supporting
documentation regarding the Participant Protection concerns raised by our Initial Review Group (IRG) referencing the following:

Confidentiality and Participant Protection

The Committee reviewed the applicant organization's plans for ensuring confidentiality and SAMHSA participant protection and expressed a concern about the inadequacy of the discussion of privacy and confidentiality. The applicant organization does not identify or address the risks to the person administering Naloxone. It only does so with the training.

As noted, you must provide a written response as well as any clarification or additional information requested by our Participant Protection Officer. To ensure that you understand your obligations, you are asked to read (42 C.F.R. Part 2 and 2.32) and indicate that you understand and will comply with all of its provisions.

All grant funds are available for this project except for those funds directly related to Participant Protection issues as outlined in the FOA. Currently, only activities that do not directly involve Participant Protection issues (i.e., are clearly severable and independent from those activities that do involve Participant Protection issues) may be conducted under this award. This restriction of funds will only be lifted if the Participant Protection issues are appropriately addressed by the recipient and resolved to the satisfaction of your designated Government Project Officer.

Revised Budget

By October 31, 2017, submit to the Program Official and Grants Management Specialist a revised budget addressing the following:

1. Contract
   - MO Institute of Mental Health - $160,000: Include an estimated cost breakdown for the proposed amount or describe the basis used to determine this amount.

2. Indirect Costs
   - IDC rate agreement: Submit a copy of the current negotiated indirect cost rate agreement.

STANDARD TERMS AND CONDITIONS

New Awards FY 2017

Reference the following SAMHSA website for Standard Terms for All Awards for FY 2017: Standard Terms and Conditions Webpage (https://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions). Your organization must comply with the listing of award terms are applicable to your award as identified below:


Programmatic Progress Reports

Submission of a bi-annual Programmatic Progress Reports is required no later than the dates as follow:

1st Report - April 30, 2018

The Federal Financial Report (FFR) (SF-425) is required on an annual basis and must be submitted no later than 90 days after the end of the budget period. The annual FFR should reflect only cumulative actual federal funds authorized and disbursed, any non-federal matching funds (if identified in the FOA), unliquidated obligations incurred, the unobligated balance of the federal funds for the award, as well as program income generated during the timeframe covered by the report. The SF-425 is available at http://apply07.grants.gov/apply/forms/sample/SF425-V1.0.pdf.

Additional guidance to complete the FFR can be found: http://www.samhsa.gov/grants/grants-management/reporting-requirements.

Annual FFRs must be submitted to the applicable email: CSAP Grants (e.g., SP-12345-01): CSAPFFR@samhsa.gov.

Compliance with Terms and Conditions

Failure to comply with the above stated terms and conditions may result in suspension, classification as Restriction status, termination of this award or denial of funding in the future. All previous terms and conditions remain in effect until specifically approved and removed by the Grants Management Officer.

All responses to special terms and conditions of award and post award requests may be electronically mailed to the Grants Management Specialist and to the Program Official as identified on your Notice of Award. It is essential that the Grant Number be included in the SUBJECT line of the email.

CONTACTS:

Anthony Bethea, Program Official  
Phone: 240-276-1933  Email: Anthony.Bethea@samhsa.hhs.gov

Maria Martinez, Grants Specialist  
Phone: (240) 276-1417  Email: Maria.Martinez@samhsa.hhs.gov  Fax: (240) 276-1420