### NOTICE OF AWARD

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

Centers for Disease Control and Prevention

**CDC Office of Financial Resources**

2920 Brandywine Road
Atlanta, GA 30341

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**NOTICE OF AWARD**

**AUTHORIZATION (Legislation/Regulations)**

42 USC 241 31 USC 6305 42 CFR 52

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**EDES AWARD NOTICE**

ACCOUNT NO. 8-93904SH

VENDOR CODE 4150OE000077-01

AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION 141,013.00

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**Elected Budgets**

- a. Amount of Federal Financial Assistance (from item 11m) 141,013.00
- b. Less Unobligated Balance From Prior Budget Periods 0.00
- c. Less Cumulative Prior Award(s) This Budget Period 0.00
- d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION 141,013.00

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**UPDATING ALTERNATIVES**

- a. DEDUCTION
- b. ADDITIONAL COSTS
- c. MATCHING
- d. OTHER RESEARCH (Add / Deduct Option)
- e. OTHER (See REMARKS)

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**14. RECOMMENDED FUTURE SUPPORT**

(Subject to the availability of funds and satisfactory progress of the project):

- a. 5
- b. 6
- c. 7
- d. 8
- e. 9
- f. 10

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

- 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 the 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.

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**GRANTS MANAGEMENT OFFICER**

Tiffany-392250 Mannings

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### Grants Management Information

**17. OBJ CLASS** 41.51

**18a. VENDOR CODE**

**18b. EIN**

**19. DUNS** 878092600

**20. CONG. DIST.** 03

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## Direct Assistance

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1. Terms and Conditions
2. Technical Review
Incorporation: In addition to the federal laws, regulations, policies, and CDC General Terms and Conditions for Non-research awards at https://www.cdc.gov/grants/federalregulationspolicies/index.html, the Centers for Disease Control and Prevention (CDC) hereby incorporates Notice of Funding Opportunity (NOFO) number OE15-1502, entitled The National Surveillance Program: Enhancing Syndromic Surveillance Capacity and Practice, and application dated April 6, 2018, as may be amended, which are hereby made a part of this Non-research award, hereinafter referred to as the Notice of Award (NoA).

Approved Funding: Funding in the amount of $141,013.00 is approved for the Year 4 budget period, which is September 1, 2018 through August 31, 2019. 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.

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

Financial Assistance Mechanism: Cooperative Agreement

Substantial Involvement by CDC: 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.

1. Technical assistance in evaluation, performance measurement, work plan development, program planning, and specific syndromic surveillance subject matter expertise
2. Provide the Syndromic Surveillance Platform for syndromic surveillance data storage and sharing
3. Support the cloud hosting environment for Syndromic Surveillance Platform
4. Provide analytic tools in the Syndromic Surveillance Platform
5. Provide data management support for the Syndromic Surveillance Platform
6. Provide data quality assurance for the Syndromic Surveillance Platform
7. Provide technical support to Syndromic Surveillance Platform users
8. Provide analysis of regional and national aggregate data
9. Facilitate participation in the National Surveillance Community of Practice activities where appropriate
10. Support the National Syndromic Surveillance Community of Practice and associated governance group
11. Collaborate with recipients on specific activities to develop a sustainable infrastructure which may include site visits, webinars, and teleconferences

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

Addition alternative: 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.

**Technical Review Statement Response Requirement:** The review comments on the strengths and weaknesses of the proposal are provided as part of this award. A response to the weaknesses is **not** required.

### FUNDING RESTRICTIONS AND LIMITATIONS

**Indirect Costs:**

Although Missouri Department of Health and Human Services has a negotiated indirect cost rate of 23.60% percent, a lower rate of 21.40% percent is requested. The reduced indirect cost rate is approved, with a base of direct salaries and wages including all fringe benefits.

### REPORTING REQUIREMENTS

Performance information collection initiated under this cooperative agreement has been approved by the Office of Management and Budget under **OMB Number 0920-1132 “Performance Progress and Monitoring ReportExpiration Date 8/31/2019.**

**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  
Lisa DeBouse, Grants Management Officer/Specialist  
Centers for Disease Control and Prevention  
OD, Environmental, Occupational Health & Injury Prevention Services Branch  
2960 Brandywine Road, MS E-01  
Atlanta, GA 30341  
Fax: 770-488-2640 (Include “Mandatory Grant Disclosures” in subject line)  
Email: wzn5@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))

**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.

**Payment Management System Subaccount:** Funds awarded in support of approved activities have been obligated in a newly established 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. All award funds must be tracked and reported separately.

The grant document number identified on the bottom of Page 1 of the Notice of Award must be known in order to draw down funds.

**PROGRAM OR FUNDING SPECIFIC CLOSEOUT REQUIREMENTS**

The final programmatic report format required is the following.

This report should include the information specified in the NOFO and is submitted 90 days following the end of the period of performance via www.grantsolutions.gov. At a minimum, the report will include the following:

- Statement of progress made toward the achievement of originally stated aims.
- Description of results (positive or negative) considered significant.
- List of publications resulting from the project, with plans, if any, for further publication.

Additional guidance may be provided by the GMS and found at: https://www.cdc.gov/grants/alreadyhavegrant/Reporting.html

Information collection initiated under this cooperative agreement has been approved by the Office of Management and Budget under OMB Number 0920-1132 “Performance Progress”

**CDC Staff Contacts**

**Grants Management Specialist:** 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.

**GMS Contact:**
Lisa DeBouse, Grants Management Specialist  
Centers for Disease Control and Prevention  
OD, Environmental, Occupational Health & Injury Prevention Services Branch  
2960 Brandywine Road, MS E-01  
Atlanta, GA 30341  
Telephone: 770-488-3198  
Fax: 770-488-2640  
Email: wzns@cdc.gov

**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.

**Programmatic Contact:**
Kim T. Raymond, Project Officer  
Centers for Disease Control and Prevention  
The Center for Surveillance, Epidemiology and Laboratory Services  
1600 Clifton Rd., MS E-91  
Atlanta, GA 30333  
Telephone: 404-498-6531  
Email: jpq5@cdc.gov

**Grants Management Officer:** 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.

**GMO Contact:**
Tiffany Mannings, Grants Management Officer  
Centers for Disease Control and Prevention  
Centers for Disease Control and Prevention  
OD, Environmental, Occupational Health & Injury Prevention Services Branch  
2960 Brandywine Road, MS E-01  
Atlanta, GA 30341  
Telephone: 770-488-2515  
Fax: 770-488-2640  
Email: yuo7@cdc.gov
Technical Reviewer Evaluation Report

Funding Opportunity Number: CDC-RFA-OE15-1502

The National Syndromic Surveillance Program: Enhancing Syndromic Surveillance Capacity and Practice
Annual Progress Report 3/1/2017 – 2/28/2018

Recipient/Organization: Missouri Department of Health and Senior Services
Grant Number: U500E000077
Name of Person Compiling this Review: Kim T. Raymond
CIO/Phone/Email Address: CSELS/404-498-6531/jpq5@cdc.gov

Progress Report
Does the recipient’s progress report document satisfactory progress to-date in all activities funded in the prior year? Does the report adequately document specific progress toward the stated performance or outcome measures from the prior year’s approved application?

Yes X No _____

Comments, Strengths, Weaknesses (to support the answer above):

- The Project Narrative provides a concise overview of Missouri Department of Health and Senior Services statewide surveillance activities and a satisfactory completion of activities from March 1, 2017 to February 28, 2018. The program is on target and has successfully accomplished the majority of the activities under strategies 1 through 3 in their Annual Performance Report (APR).
- The workplan, evaluation results and performance measures were identified in the application and include the Year 3 activities completed or scheduled for completion by the end of the budget period.

Strategies
- Program went down on its’ target with Strategy 1: Improve representativeness of syndromic surveillance data.
  - 96 of 114 (83%) EDs submit data to DHSS and NSSP (p 1 Project Narrative [PN]). Note: last year it was 101 of 117 (86%). Why has it gone down?
  - Data is received on 81.1% of ED visits in the State (p 1 of PN). The percentage was below projections due to a message format issue that prevented data from approximately 15 hospitals being submitted to the BioSense Platform. Note last year 95%.
  - 6 urgent care centers submit data to NSSP (p 1 of PN).
  - Recruitment plan hasn’t been developed due to staff upgrading local installation of ESSENCE (p2 of PN).
- Program is making progress with Strategy 2: Improve data quality, timeliness and utility.
  - 3 users are registered to access NSSP ESSENCE. (p 5 of PN).
  - Program is conducting daily quality reviews of data and sending email alerts to management and epis around the state (pp 3-4 of PN).
- Program is not on target but making strides with Strategy 3: Strengthen syndromic surveillance practice.
No workgroup has been established but potential members have been identified (p 6 of PN).

- 3 staff participated in 31 NSSP and CoP activities during the reporting period. Additional SyS activities included data sharing calls with Region 7 partners (Kansas, Nebraska, and Iowa) (p 7).

**Outcome Measures**

1. Program isn’t improving syndromic surveillance expertise.
   - There were no publications or reports completed during the reporting period but one presentation was made covering the features of ESSNCE syndromic surveillance software (pp 9-10 of PN).

2. Program is increasing use of syndromic surveillance in state and local jurisdictions.
   - Staff responded to 51 data requests including boil orders, overdoses/opioid issues, poor air quality around landfill burning underground, carbon monoxide poisoning, asthma surveillance eclipse in August 2017 and mumps and Hepatitis A outbreaks (pp 8-9 of PN).

3. Program has timely identification of syndrome patterns for anticipated or present public health threats.
   - 53 facilities achieved MU (p 9 of PN).

**Successes:**

1. Hepatitis A Surveillance- In December 2017, program developed query to ID possible cases of Hep A in hospitals or UCC's. As a result of surveillance 12 possible Hep A cases were identified (pp 10-11 of PN).

**Challenges**

None noted.

**CDC Program Support to Awardee**

Continue calls with PO.

**New Budget Period Proposal**

Are there any critical weaknesses in the proposal that must be addressed with the recipient BEFORE the renewal award is issued?

Yes ___ No ___

Does the recipient provide a detailed, clear, and time-phased operational plan for continued performance of activities for which funding is requested?

Yes ___X___ No ___

Does the recipient include clear performance or outcome measures for recipient activities that will be useful in evaluating programmatic progress during the new budget period?

Yes ___X___ No ___

**Budget:**

Does the applicant’s budget provide a detailed line-item justification for proposed activities?
Comments, Strengths, Weaknesses (to support the answers above):

- The program provides a detailed workplan for continued performance of activities for Year 4.
- The new budget year objectives appear to be specific, measurable, achievable, realistic, and time-bound for the proposed activities listed within the continuation report. The budget period is from September 1, 2018 to August 31, 2019 and includes a detailed budget with justification and indirect cost rate agreement.

Recommendations for new budget year and total award level:

- Continue calls with project officer.
- Focus on establishing a workgroup with quarterly meetings/calls.
- Provide in Budget Justification the 6 contractual elements for the DHSS contract
- Continue to provide project officer with specific technical assistance needs.
- Include project officer on all correspondence with CDC staff in the NSSP program.

Project officer recommends award in the amount of 141,013.

Technical Reviewer’s Name (Please Print or type)  Kim T. Raymond

Technical Reviewer’s Signature  Date 5/3/18