1. DATE ISSUED
03/04/2019

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imposed remain in effect unless specifically rescinded

2. CFDA No.
93.305

3. ASSISTANCE TYPE
Cooperative Agreement

4. GRANT NO.
5 NU58DP006006-05-00
Formerly
1US6DP006006-01

4a. FAIN
NU58DP006006
4b. ACTION TYPE
Non-Competing Continuation

5. TYPE OF AWARD
Other

6. PROJECT PERIOD
From
03/29/2015
Through
04/28/2020

7. BUDGET PERIOD
From
03/29/2015
Through
04/28/2020

8. TITLE OF PROJECT (OR PROGRAM)
TOBACCO CONTROL PROGRAM

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. Steve Cramer
930 Wildwood Dr
Jefferson City, MO 65109-5796
Phone: 573-752-2200

10a. GRANTEE AUTHORIZING OFFICIAL
Ms. Tonya R Loucks
920 WILDWOOD DR
Jefferson City, MO 65109-5796
Phone: 573-751-6014

10b. FEDERAL PROJECT OFFICER
Lorraine Reed
4700 Buford Highway
Chamblee, GA 30341
Phone: 770-488-6586

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention
CDC Office of Financial Resources
1600 Clifton Road
Atlanta, GA 30329

NOTICE OF AWARD
AUTHORIZATION (Legislation/Regulations)
317(K)(2) 42 USC 247B(K)(2)

11. APPROVED BUDGET (Excludes Direct Assistance)

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>Financial Assistance from the Federal Awarding Agency Only</td>
<td>$1,077,836.00</td>
</tr>
<tr>
<td>II</td>
<td>Total project costs including grant funds and all other financial participation</td>
<td>$1,224,864.00</td>
</tr>
<tr>
<td>a.</td>
<td>Salaries and Wages</td>
<td>425,000.00</td>
</tr>
<tr>
<td>b.</td>
<td>Fringe Benefits</td>
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<tr>
<td>c.</td>
<td>Total Personnel Costs</td>
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<td>d.</td>
<td>Equipment</td>
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<tr>
<td>e.</td>
<td>Supplies</td>
<td>2,400.00</td>
</tr>
<tr>
<td>f.</td>
<td>Travel</td>
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<tr>
<td>g.</td>
<td>Construction</td>
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<tr>
<td>h.</td>
<td>Other</td>
<td>56,142.00</td>
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<tr>
<td>i.</td>
<td>Contractual</td>
<td>325,872.00</td>
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<tr>
<td>j.</td>
<td>TOTAL DIRECT COSTS</td>
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<tr>
<td>k.</td>
<td>INDIRECT COSTS</td>
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<tr>
<td>l.</td>
<td>TOTAL APPROVED BUDGET</td>
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<tr>
<td>m.</td>
<td>Federal Share</td>
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<tr>
<td>n.</td>
<td>Non-Federal Share</td>
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12. AWARD COMPUTATION

<table>
<thead>
<tr>
<th>Year</th>
<th>TOTAL DIRECT COSTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>6</td>
<td>d. g</td>
</tr>
<tr>
<td>7</td>
<td>e. 10</td>
</tr>
<tr>
<td>8</td>
<td>f. 11</td>
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</table>

13. Total Federal Funds Awarded to Date for Project Period
$5,845,685.00

14. RECOMMENDED FUTURE SUPPORT
(Subject to the availability of funds and satisfactory progress of the project):

<table>
<thead>
<tr>
<th>Year</th>
<th>TOTAL DIRECT COSTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>a.  6</td>
<td>d. g</td>
</tr>
<tr>
<td>b.  7</td>
<td>e. 10</td>
</tr>
<tr>
<td>c.  8</td>
<td>f. 11</td>
</tr>
</tbody>
</table>

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

| a. DEDUCTION |
| 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.

17. OBJ CLASS
41.51
18a. VENDOR CODE
18b. EIN
19. DUNS
870892600
20. CONG. DIST.
03

<table>
<thead>
<tr>
<th>FY-ACCOUNT NO.</th>
<th>DOCUMENT NO.</th>
<th>CFDA</th>
<th>ADMINISTRATIVE CODE</th>
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<tr>
<td>21. a. 9-03908BU8</td>
<td>b. 006006DP15</td>
<td>c. 59.305</td>
<td>d. DP</td>
<td>e. $1,077,836.00</td>
<td>f. 75-K-0948</td>
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<td>22. a.</td>
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<td>f.</td>
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<td>23. a.</td>
<td>b.</td>
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### Direct Assistance

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<thead>
<tr>
<th>BUDGET CATEGORIES</th>
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<th>AMOUNT THIS ACTION (B)</th>
<th>TOTAL (A + B)</th>
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<td>Personnel</td>
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<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Fringe Benefits</td>
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<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Travel</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Equipment</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Supplies</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Contractual</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Construction</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Other</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Total</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
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### Federal Financial Report Cycle

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<tr>
<th>Reporting Period Start Date</th>
<th>Reporting Period End Date</th>
<th>Reporting Type</th>
<th>Reporting Period Due Date</th>
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<td>03/28/2016</td>
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<td>06/26/2016</td>
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<td>03/29/2018</td>
<td>03/28/2019</td>
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<td>06/26/2019</td>
</tr>
<tr>
<td>03/29/2019</td>
<td>04/28/2020</td>
<td>Annual</td>
<td>07/27/2020</td>
</tr>
</tbody>
</table>
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 DP15-1509, entitled National State-Based Tobacco Control Programs, and application dated November 29, 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 $1,224,864 is approved for the Year 05 budget period, which is March 29, 2019 through April 28, 2020. 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

Use of Unobligated Funds: This NOA includes use of Year 01 unobligated funds in the amount of $65, Year 02 unobligated funds in the amount of $1, and Year 03 unobligated funds in the amount of $146,962 which has been applied as an offset to the currently approved funding level for this budget period. The use of unobligated funds is approved based on the Year 01 Federal Financial Report (FFR) dated June 29, 2016, Year 02 Federal Financial Report (FFR) dated June 28, 2017, and the Year 03 Federal Financial Report (FFR) dated June 25, 2018. The amount of this NOA will be subject to reduction if the final amount of unobligated funds is less than the amount of unobligated funds reported on the referenced FFR.

Supplemented Extension: Supplemental funds in the amount of $94,220 is approved for the Year 05 budget period. The supplemental funds will be available for 1 month. The budget and project period end dates have been extended from March 28, 2020 to April 28, 2020.

- The supplement will fund this cooperative agreement for an additional 1 month (March 28, 2020 – April 28, 2020). Recipient activities must address only objectives, strategies, and activities outlined in the Year 5 Work Plan of the Continuation Application. Recipient shall not begin any new activities during the additional month.

- Project Narrative: By April 29, 2019, recipients must submit a project narrative that includes a summary of proposed activities for the supplement budget period (March 28, 2020 – April 28, 2020). It must address only objectives, strategies, and activities outlined in the Year 5 Work Plan of the Continuation Application activities that began in Year 5 of the cooperative agreement. Recipient shall not begin any new activities during the additional month.
**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 in these statements must be submitted to and approved, in writing, by the Grants Management Specialist/Grants Management Officer (GMS/GMO) noted in the CDC Staff Contacts section of this NOA, no later than 30 days from the budget period start date. Failure to submit the required information by the due date, April 29, 2019, will cause delay in programmatic progress and will adversely affect the future funding of this project.

**Budget Revision Requirement:** By April 29, 2019 the recipient must submit a revised budget with a narrative justification based on the approved funding. Failure to submit the required information in a timely manner may adversely affect the future funding of this project. If the information cannot be provided by the due date, you are required to contact the GMS/GMO identified in the CDC Staff Contacts section of this notice before the due date.

**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.

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**FUNDING RESTRICTIONS AND LIMITATIONS**

**Notice of Funding Opportunity (NOFO) Restrictions:** Recipients may not use funds for research. Recipients may not use funds for clinical care. Recipients may not use funds to supplant existing state funding or to supplant funds from federal or state sources. Recipients may use funds only for reasonable program purposes, including personnel, travel, supplies, and sources. Recipients are the direct and primary recipients in a cooperative agreement program and must perform a substantial role in carrying out project outcomes and not merely serve as a conduit for an award to another party or provider who is ineligible. Recipients are generally not allowed to use funds to purchase furniture or equipment. Any such proposed spending must be clearly identified in the budget. Recipients may not be reimbursed pre-award costs. Recipients may only use funds for evidence-based tobacco control interventions, strategies, and activities. Recipients may not use funds to provide direct cessation services or other direct services other than those through evidence-based quitline services. Recipients may not use funds to purchase nicotine replacement therapy or other products used for cessation. Recipients may not use funds to purchase K-12 school curricula.

In addition, other than for normal and recognized executive-legislative relationships, no funds may be used for: (1) publicity or propaganda purposes, for the preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body; (2) the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before any legislative body. NOTE: See Additional Requirement (AR) 12 for detailed guidance on this prohibition and additional guidance on lobbying for CDC recipients.
**Indirect Costs:** Indirect costs are approved based on the negotiated indirect cost rate agreement dated March 9, 2018, which calculates indirect costs as follows, a Fixed is approved at a rate of 21.3% of the base, which includes, direct salaries and wages including all fringe benefits. The effective dates of this indirect cost rate are from July 1, 2018 to June 30, 2019.

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**REPORTING REQUIREMENTS**

**Prevention Fund Recipient Reporting Rescission:** Effective May 31, 2018, CDC grant award recipients that complete projects or activities which are funded under the Prevention and Public Health Fund (PPHF) (Section 4002 of Public Law 111-148) are no longer required to report separately on their use of PPHF funds, or distinguish sub-recipients use of PPHF funds. The rescission of PPHF reporting requirements does not alter or change administrative, programmatic, financial, or other reporting requirements indicated in a Notice of Award.

**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  
Romero Stokes, Grants Management Specialist  
Centers for Disease Control and Prevention  
Office of Grants Services (OGS)  
Office of Financial Resources (OFR)  
Office of the Chief Operating Officer (OCOO)  
2920 Brandywine Road  
Mailstop E-09  
Atlanta, Georgia 30341  
Email: rstokes@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.

**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:**
Romero Stokes, Grants Management Specialist
Centers for Disease Control and Prevention
**Office of Grants Services (OGS)**
**Office of Financial Resources (OFR)**
**Office of the Chief Operating Officer (OCOO)**
2920 Brandywine Road
Mailstop – E-09
Atlanta, Georgia 30341
Telephone: 770-488-2075
Email: rstokes@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:**
Lorraine Reed, Project Officer  
Centers for Disease Control and Prevention  
National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP)  
470 Buford Highway, MS F79  
Atlanta, Georgia 30342  
Telephone: 770-488-6586  
Email: lreed1@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 information is located on Page 1 of this NOA.
**ANNUAL PERFORMANCE REPORT:**

During the reporting period, Missouri successfully completed the following activities to prevent initiation of tobacco use, promote quitting among youth and adults, and eliminate exposure to secondhand smoke.

**Prevention Among Youth and Young Adults:**
The Missouri Comprehensive Tobacco Control Program (CTCP) is part of a statewide smokefree technical assistance (TA) provider group which provided technical assistance on evidence-based strategies that increase the legal age for purchasing tobacco products from 18 to 21. Four communities raised the minimum age of tobacco sales to 21 during this reporting period.

The CTCP used an in-person training modality to train program coordinators and student participants of the *Taking Down Tobacco* program. 14 schools and one youth organization were represented in the trainings.

Missouri’s efforts protect 38% of citizens from secondhand tobacco exposure through Tobacco 21(T21) policies in 18 communities. The 49 tobacco-free college campuses and 40 communities with comprehensive smokefree policies provide an additional 50.3% of the state’s population protection from secondhand smoke. The State reported a decrease in the adult smoking prevalence rate from 22% to 20.8% (BRFSS 2017).

**Cessation:** The CTCP continued to educate decision makers and partnered with Medicaid to increase the utilization of quitline and cessation services. To maximize impact of state funding, Missouri established mechanisms for conducting electric...
medical referrals (EMR) between the Missouri Tobacco Quitline and two Missouri 
based health care providers. This exchange of EMRs is a health systems change that 
will increase the utilization of quitline and cessation services by benefit Medicaid 
recipients.

**Mass Reach Communications:** The CTCP manager restructured staff positions and 
responsibilities to allow for the hiring of a full-time tobacco control specialist with 
dedicated tobacco-related communication duties. This strategy will provide for a 
dedicated communications point of contact to coordinate all health communications 
efforts. The CTCP effectively utilized the Amanda Tips ads on social media sites to 
target pregnant Medicaid participants in 20 counties, resulting in an increase in the 
average number of callers and web-only enrollments to the quitline from three to 
eight.

**Surveillance and Evaluation:** During the reporting period, Missouri CTCP enhanced 
their surveillance system to collect population-specific data related to consumers of 
the Department of Mental Health services. Additionally, a quitline registration question 
is being added to identify those living in public housing.

**Infrastructure, Administration and Management:** The awardee has a fully 
functioning infrastructure to implement an effective Tobacco Control Program 
including:

- Strategic planning to guide program efforts and resources to accomplish their goals;
- Qualified and diverse technical, program, and administrative staff;
- Capacity to award and monitor program contracts/grants and assess performance;
- Developing and maintaining a real-time fiscal management system;
- Ongoing training and technical assistance to increase capacity at the local level;
- Coordinating across chronic disease programs and with local coalitions and 
  partners; and
- Educating the public and decision makers on the health effects of tobacco and 
effective, evidence-based program and policy interventions.

<table>
<thead>
<tr>
<th>Key Weaknesses</th>
<th>None noted.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recommendations</td>
<td>None noted.</td>
</tr>
<tr>
<td>OTHER COMMENTS:</td>
<td>Missouri does not have a comprehensive smokefree air law.</td>
</tr>
</tbody>
</table>

**WORKPLAN:**

The Missouri CTCP proposes to conduct the following activities in the next 
year:

**Prevention Among Youth and Young Adults:** The Missouri Comprehensive 
Tobacco Control Program (CTCP) will educate and provide technical assistance on 
evidence-based strategies that increase the legal age for purchasing tobacco 
products from 18 to 21 in at least four communities. Distribution and training related to 
Tobacco-free schools Toolkit will be offered in conjunction with the implementation of 
the Campaign for Tobacco Free Kid’s (CTFK) Taking Down Tobacco Program at 25 
schools/youth serving agencies.
Protection from Secondhand Smoke: CTCP will expand their efforts to educate the public, stakeholders and decision-makers about the benefits of going smokefree and the evidence based strategies that reduce exposure to secondhand smoke. The state also plans to provide technical assistance on the evidence to effectively implement policies that reduce exposure to secondhand smoke in public places, and to conduct outreach and education on the importance of comprehensive tobacco-free policies that include electronic nicotine delivery systems (ENDS). CTCP will provide technical assistance to public housing authorities on effectively implementing the HUD smokefree rule to protect residents from exposure to secondhand smoke.

Through the provision of education, training and technical assistance, and collaborative strategies with partners the CTCP will be on target to annually meet these goals.

Cessation: Through the provision of training and technical assistance, the CTCP plans to continue to collaborate with health care systems, regional extension centers, and other stakeholders to integrate tobacco dependence treatment into electronic health records and workflows. The CTCP plans to continue to support the state quitline capacity based on best practices. The CTCP will promote quitting among youth and young adults via educating stakeholders (i.e., private health insurers, the state Medicaid program, and the state employee health plan large employers) about comprehensive cessation coverage; including the health and economic benefits of providing coverage, and provisions of the Affordable Care Act. CTCP will also work with the state Medicaid program to ensure that both fee-for-service and managed-care Medicaid plans provide comprehensive cessation coverage.

Mass Reach Communications: The CTCP collaborates with a variety of partners to develop educational messaging regarding the evidence and effectiveness of evidence-based strategies to increase cessation and/or promote the quitline in addition to educating decision makers on the importance of health communications campaigns. Missouri plans to implement one statewide media campaign to promote cessation targeting the populations that smoke at disproportionately higher rates than the overall adult population and their health care providers.

Surveillance and Evaluation: The CTCP will continue to implement evaluation planning and execution, including convening stakeholders. The state will continue to use evaluation data to inform program planning. Specifically, they will use state and county level data to identify five target communities in which to focus mass reach communications materials, and they will use prevalence data to develop and distribute facts sheets and resource packets to local public health agencies and other key stakeholders to guide tobacco control interventions.

Infrastructure, Administration and Management: The CTCP will continue to maintain their fully functioning infrastructure to implement an effective Tobacco Control Program.

Key Weaknesses | None Noted.
--- | ---

Recommendations | The CTCP should work toward implementing its mass media campaign as early in the program year as possible in order to reach the largest possible number of Missourians.

OTHER COMMENTS: Overall, the CTCP continues to deliver a comprehensive tobacco control program to the state of Missouri.
In accordance with U.S. law, no Federal funds provided by CDC are permitted to be used by awardees for lobbying or to influence, directly or indirectly, specific pieces of pending or proposed legislation at the federal, state, or local levels. The awardee should work with the project officer to ensure activities adhere to federal guidelines, and federal dollars are not used to engage in unauthorized activities. Throughout all objectives and activities, the awardee should clarify that the work plan language clearly describes the role, nature, and purpose of the funded activities. This includes providing clear language focusing on the message (e.g., addressing the health risks/effects, using evidence based strategies for increasing protections) when conducting public educational initiatives. In addition, language should be included for proper engagement of elected officials as documented in the federal guidelines. Additionally, awardees should consult appropriate legal counsel to ensure compliance with all rules, regulations, and restriction of any funding sources.

The awardee should refer to the AR-12 and CDC Guidance documents on Anti-Lobbying restrictions for more information on allowable and restricted activities.
