

1. DATE ISSUED MM/DD/YYYY		1a. SUPERSEDES AWARD NOTICE dated	
05/13/2020		except that any additions or restrictions previously imposed remain in effect unless specifically rescinded	
2. CFDA NO.			
93.426 - Improving the Health of Americans through Prevention and Management of Diabetes and Heart Disease and Stroke-Financed in part by 2018 Prevention and Public Heal			
3. ASSISTANCE TYPE Cooperative Agreement			
4. GRANT NO. 5 NU58DP006520-03-00		5. TYPE OF AWARD	
Formerly		Other	
4a. FAIN NU58DP006520		5a. ACTION TYPE Non-Competing Continuation	
6. PROJECT PERIOD MM/DD/YYYY		MM/DD/YYYY	
From 09/30/2018		Through 06/29/2023	
7. BUDGET PERIOD MM/DD/YYYY		MM/DD/YYYY	
From 06/30/2020		Through 06/29/2021	
8. TITLE OF PROJECT (OR PROGRAM)			
Diabetes and Heart Disease & Stroke Prevent Programs-Improving the Health of Americans through Prevention and Management of Diabetes and Heart Disease and Stroke			

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention**

2939 Brandywine Road
Atlanta, GA 30341

NOTICE OF AWARD

AUTHORIZATION (Legislation/Regulations)
301(a) and 317(k)(2) of the Public Health Service Act, [42 U.S.C. Section 241(a) and 247b(k)(2)], as amended.

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: 573-522-2806
10a. GRANTEE AUTHORIZING OFFICIAL Ms. Marcia Mahaney 920 WILDWOOD DR JEFFERSON CITY, MO 65109-5796 Phone: 573-751-6014	10b. FEDERAL PROJECT OFFICER Mr. Robert Montierth 4770 Buford Hwy Atlanta, GA 30341-3717 Phone: 404.498.5378

ALL AMOUNTS ARE SHOWN IN USD

11. APPROVED BUDGET (Excludes Direct Assistance)		12. AWARD COMPUTATION	
I Financial Assistance from the Federal Awarding Agency Only		a. Amount of Federal Financial Assistance (from item 11m) 2,168,396.00	
II Total project costs including grant funds and all other financial participation I		b. Less Unobligated Balance From Prior Budget Periods 149,806.00	
a. Salaries and WageS	423,586.00	c. Less Cumulative Prior Award(s) This Budget Period 0.00	
b. Fringe Benefits	254,151.00	d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION 2,018,590.00	
c. Total Personnel Costs	677,737.00	13. Total Federal Funds Awarded to Date for Project Period 5,961,128.00	
d. Equipment	0.00	14. RECOMMENDED FUTURE SUPPORT	
e. Supplies	7,724.00	<i>(Subject to the availability of funds and satisfactory progress of the project):</i>	
f. Travel	19,774.00	YEAR	TOTAL DIRECT COSTS
g. Construction	0.00	a. 4	d. 7
h. Other	70,601.00	b. 5	e. 8
i. Contractual	1,247,524.00	c. 6	f. 9
j. TOTAL DIRECT COSTS	2,023,360.00	15. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:	
k. INDIRECT COSTS	145,036.00	a. DEDUCTION	
l. TOTAL APPROVED BUDGET	2,168,396.00	b. ADDITIONAL COSTS	
m. Federal Share	2,168,396.00	c. MATCHING	
n. Non-Federal Share	91,407.64	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:

Patricia French, Grants Management Officer
2960 Brandywine Road
Mailstop E09
Atlanta, GA 30341
Phone: 770-488-2849

17.OBJ CLASS 41.51	18a. VENDOR CODE [REDACTED]	18b. EIN [REDACTED]	19. DUNS 878092600	20. CONG. DIST. 03
FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	AMT ACTION FIN ASST	APPROPRIATION
21. a. 0-9390E1Q	b. 18NU58DP006520	c. DP	d. \$1,009,295.00	e. 75-X-0948
22. a. 0-9390E1S	b. 18NU58DP006520	c. DP	d. \$1,009,295.00	e. 75-X-0948
23. a.	b.	c.	d.	e.

NOTICE OF AWARD (Continuation Sheet)

PAGE 2 of 3	DATE ISSUED 05/13/2020
GRANT NO. 5 NU58DP006520-03-00	

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

NOTICE OF AWARD (Continuation Sheet)

PAGE 3 of 3	DATE ISSUED 05/13/2020
GRANT NO. 5 NU58DP006520-03-00	

Federal Financial Report Cycle			
Reporting Period Start Date	Reporting Period End Date	Reporting Type	Reporting Period Due Date
09/30/2018	06/29/2019	Annual	09/27/2019
06/30/2019	09/29/2019	Annual	12/28/2019
09/30/2019	06/29/2020	Final	09/29/2020

AWARD ATTACHMENTS

Missouri Department of Health

5 NU58DP006520-03-00

1. TERMS
2. TECH REVIEW

AWARD INFORMATION

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 CDC-RFA-DP18-1815, entitled Improving the Health of Americans Through Prevention and Management of Diabetes and Heart Disease and Stroke, and application dated February 21, 2020, 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 \$2,168,396 is approved for the Year 03 budget period, which is June 30, 2020 through June 29, 2021. 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.

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
Diabetes Category A	\$1,084,198
Heart Disease Category B	\$1,084,198

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.

- Supporting recipients in implementing cooperative agreements requirements and meeting program outcomes;
- Providing technical assistance to revise annual work plans;
- Assisting recipients in advancing program activities to achieve project outcomes.
- Providing scientific subject matter expertise (e.g., engaging non-physician team members, implementing and sustaining the National Diabetes Prevention Program) and resources in support of the selected strategies;
- Collaborating with recipients to develop and implement evaluation plans that align with CDC evaluation activities;
- Providing technical assistance on recipient's evaluation and performance measurement plans;
- Providing technical assistance to define and operationalize performance measures;

- Using webinars and other social media for recipients and CDC to communicate and share tools and resources;
- Establishing learning communities to facilitate the sharing of information among recipients;
- Providing professional development and training opportunities, either in person or through virtual, web-based training formats, for the purpose of sharing the latest science, best practices, success stories, and program models;
- Participating in relevant meetings, committees, conference calls, and working groups related to the cooperative agreement requirements to achieve outcomes;
- Coordinating communication and program linkages with other CDC programs and Federal agencies, such as the Health Resources and Services Administration (HRSA), Centers for Medicare & Medicaid Services (CMS), Indian Health Services (IHS), and the National Institute of Health (NIH);
- Providing surveillance technical assistance and state -specific data collected by CDC; □ Providing technical expertise to other CDC programs and Federal agencies on how to interface with recipients;
- Translating and disseminating lessons learned through publications, meetings, and other means on promising and best practices to expand the evidence base; and
- Hosting a meeting/training during the first year of the project period and later in the project period (for a total of 2 meetings/training for recipients).

CDC will:

1. Ensure that grantees have access to expertise found throughout NCCDPHP. For example, a team of subject matter experts could include, but is not limited to, the project officer, health scientist, epidemiologists, statisticians, policy analysts, communication specialist, health economists, and evaluators to provide technical assistance to grantees. Technical assistance teams will also work in collaboration with other programs and division across NCCDPHP to identify specific actions that improve efficiency and greater public health impact.
2. Collaborate with grantees to explore appropriate flexibilities needed to meet public health outcomes and goals. Flexibility in cooperative agreements includes grantee's ability to propose alternative methods to achieve the outcomes and goals of the cooperative agreement that align with grantee's opportunities for success, infrastructure, partner and stakeholder buy-in, demographics, and burden. This includes bringing together resources from multiple cooperative agreements to jointly advance the goals of each, and expanding the dialogue to bring in other CDC and grantee staff to reach a win/win solution.
3. Create greater efficiencies and consistency across NCCDPHP programs for grantees. Examples of how NCCDPHP divisions and programs work together to achieve this include but are not limited to:
 - Joint site visits that maximize the ability to do collaborative problem solving, offer insights and ideas to strengthen or augment grantee approaches, and increase understanding of grantee's context to accomplish chronic disease prevention and health promotion.
 - Jointly developed resources and tools that focus on cross-cutting functions, settings, domains, risk factors, conditions and disease to ensure consistent messages and to meet grantee technical assistance needs.
 - Joint training and technical assistance opportunities that help grantees produce

policies and programs that are more holistic and fully supportive of work in tobacco, nutrition, physical activity, chronic disease management and other strategies and topics, as appropriate.

4. Continue and expand support for grantees to leverage NCCDPHP resources to address cross-cutting functions, domains, settings, risk factors and diseases.

Defining terms:

Cross-cutting functions: Functions that are necessary to all programs and include communication, epidemiology, evaluation, health equity, leadership, partnerships, planning, policy, and training among other; as well as functions specific to the cooperative agreement.

Domains:

1. Epidemiology and surveillance – to monitor trends and track progress.
2. Environmental approaches – to promote health and support healthy behaviors.
3. Health care system intervention – to improve the effective delivery and use of clinical and other high-value preventive services.
4. Community programs linked to clinical services – to improve and sustain management of chronic conditions.

Settings: Early care and education, schools, worksites, community, health care systems, etc.

Risk factors, conditions and diseases: Nutrition, physical activity, tobacco, sleep, excessive alcohol use, maternal and infant health, Alzheimer’s arthritis, diabetes, cancer, chronic obstructive pulmonary disease, heart disease and stroke, and oral health.

Use of Unobligated Funds: This NoA includes use of Year 1 unobligated funds in the amount of \$149,806, 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 1 Federal Financial Report (FFR) dated December 30, 2019. 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.

NOFO Component Unobligated	Amount
Diabetes Category A	\$ 74,903
Heart Disease Category B	\$ 74,903

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, July 30, 2020, will cause delay in programmatic progress and will adversely affect the future funding of this project.

Budget Revision Requirement: By July 30, 2020 the recipient must submit a revised budget with a narrative justification. 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.

CAT A, the recipient will need to revise the contract to disallow funding support of DSMES reaccreditation fees - these fees are not permitted under Category A. The CGA and Elasticity contracts must be revised to meet the unique Year 3 scope of work. The MPA contract needs additional justification and support. More details and support are needed to approve the Missouri Pharmacy Association (MPA) for fees of \$12,000 and \$20,000 identified as "CHW Education Time". CAT B: •Contract #15 – The recipient must specify if Healthy Heart Ambassador is the name of the contractor or the name of the program. As rule, Category B funds are not used to support salaries for the direct services; therefore, the Missouri Pharmacy Association (MPA) for fees of \$12,000 for 100 patients as part of a CHW/Rx Tech pilot and \$20,000 identified as "CHW Education Time" need additional justification.

CAT B - The recipient should provide travel details for the TBD contract #9 on the budget sheet. CAT B - Contract #15 – The recipient must specify if Healthy Heart Ambassador is the name of the contractor or the name of the program. 2. CAT A, TBA contract, the recipient will need to provide the per diem rate and clarify the frequency of over night lodging. The recipient should provide travel details for the TBD contract #9 on the budget sheet.

Expanded Authority: The recipient is permitted the following expanded authority in the administration of the award.

- ☒ Carryover of unobligated balances from one budget period to a subsequent budget period. Unobligated funds may be used for purposes within the scope of the project as originally approved. Recipients will report use, or intended use, of unobligated funds in Section 12 "Remarks" of the annual Federal Financial Report. If the GMO determines that some or all of the unobligated funds are not necessary to complete the project, the GMO may restrict the recipient's authority to automatically carry over unobligated balances in the future, use the balance to reduce or offset CDC funding for a subsequent budget period, or use a combination of these actions.

FUNDING RESTRICTIONS AND LIMITATIONS

Notice of Funding Opportunity (NOFO) Restrictions: CDC-RFA-DP18-1815

- Recipients may not use funds for research
- Recipients may not use funds for clinical care except as allowed by law.
- Recipients may use funds only for reasonable program purposes, including personnel, travel, supplies and services
- Generally, recipients may not use funds to purchase furniture or equipment. Any such proposed spending must be clearly identified in the budget.
- Reimbursement of pre-award costs generally is not allowed, unless the CDC provides written approval to the recipient.
- Other than for normal and recognized executive-legislative relationships, no funds may be used for:
 - 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

- 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.
- See Additional Requirement (AR) 12 for detailed guidance on this prohibition and Additional guidance on lobbying for CDC recipients
- The direct and primary recipient in a cooperative agreement program 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.

In accordance with the United States Protecting Life in Global Health Assistance policy, all non-governmental organization (NGO) applicants acknowledge that foreign NGOs that receive funds provided through this award, either as a prime recipient or sub recipient, are strictly prohibited regardless of the source of funds, from performing abortions as a method of family planning or engaging in any activity that promotes abortion as a method of family planning, or to provide financial support to any other foreign non-governmental organization that conducts such activities. See Additional

- Requirement (AR) 35 for applicability

<https://www.cdc.gov/grants/additionalrequirements/ar-35.html>

Indirect Costs: Indirect costs are approved based on the negotiated indirect cost rate agreement dated January 24, 2019, which calculates indirect costs as follows, a Provisional is approved at a rate of 21.40% 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, 2020 to June 30, 2022.

REPORTING REQUIREMENTS

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
Ms. LaShanda Washington, Grants Management Specialist
Centers for Disease Control and Prevention
Branch 5 Supporting Chronic Diseases and Injury Prevention
2939 Flowers Road S MS TV-2
Chamblee, GA 30341
Email: LNWashington@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 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.

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:

LaShanda Washington, Grants Management Specialist
Centers for Disease Control and Prevention
Branch 5 Supporting Chronic Diseases and Injury Prevention
2939 Flowers Road S MS TV2
Atlanta, GA 30341

Telephone: 770-488-2766
Email: LNWashington@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:
Robert Montierth, Project Officer
Centers for Disease Control and Prevention
Telephone: 404.498.5378
Email: NXV9@CDC.GOV

CDC-RFA-DP18-1815

Improving the Health of Americans Through Prevention and Management of Diabetes and Heart Disease and Stroke

Technical Review: Year 2 Annual Performance Report (APR)/Year 3 Work Plan

State: Missouri

Date Reviewed: March 4, 2020

Award Number: DP006520

Funding Amount Requested: \$ 2,168,396

Funding Recommendation: Approved with budget modifications

Lead Project Officer: Robert Montierth

Year 2 APR Comments

Missouri provided a Year 2 Annual Performance Report that demonstrates initial progress toward achieving the strategy-specific outcomes.

Category A

- The recipient has prepared and submitted a State Plan Amendment for Missouri Medicaid to cover the National Diabetes Prevention Program (National DPP) lifestyle change program and is anticipating approval in July 2020.
- The recipient provided an update on Year 2 challenges, and, where applicable, described options to pursue solutions moving forward.

Category B

- The recipient has set up a process to identify the lowest performing federally qualified health center (FQHC) for selected cardiovascular measures, allowing the recipient to proactively work with those clinics to identify and address the barriers that interfere with their progress.
- The recipient demonstrates significant progress in the effort to build an infrastructure to promote sustainability for community health workers (CHWs). These efforts include standardizing curriculum in participating institutions of higher learning that provide CHW training, convening learning opportunities for CHWs, and working toward a state plan amendment to develop alternate methods of reimbursement for CHWs.

Year 3 Work Plan

Overarching Comments

- The applicant is required to work with its CDC project officers and Evaluators post award to further refine the work plan, performance measure targets, and the Evaluation and Performance Measurement Plan (EPMP) as needed.
- Moving into Year 3, the recipient plans to carry out activities that continue and build upon the work from Year 2.
- For each of the strategies in Categories A and B in the work plan, the recipient will need to provide information in the “Key Deliverables Proposed” field.

Category A

Recommendations on Activities:

- The single activity listed in Strategy A.1 is broadly written/non-specific. Revisions are needed to include a more detailed description of activities and the major milestones that will be accomplished in Year 3 to achieve progress on the performance measures.
- For Activity A.3.2.02, the recipient will need to provide information on what the pharmacy diabetes self-management education and support (DSMES) goals are and include the specific activities that will be pursued this year concerning the Missouri Pharmacy Association work.
- For A.4.3.02, the recipient will need to provide greater detail on how it will support the Missouri Primary Care Association to provide technical assistance and what types of technical assistance will be emphasized.
- For A.5.4.02, the recipient will need to provide additional information on how it will “build awareness of the benefits of covering the National DPP” amongst employers.
- For A.6.5.02, the recipient will need to provide additional details on how it plans to assist the Missouri Diabetes Council in transitioning to a 501c3 organization.
- The recipient should submit more specific activities with a detailed timeline and milestones for accomplishing the key deliverables for all Category A strategies.

Recommendations on Performance Measure Targets:

- The recipient submitted complete information for the Year 3 performance measure targets. Please continue to work with your CDC evaluators on possible refinements to the performance measure targets and supporting information.
- Measure A.5.iii: The number of Medicaid beneficiaries (adults age 18 and older) who have the National DPP lifestyle change program as a covered benefit (Medicaid Beneficiaries Covered)—Year 3 and Year 5 targets are the same, the target for Year 5 should be revised.

Recommendations on the Evaluation and Performance Measurement Plan:

- The recipient submitted a complete draft Year 3 evaluation plan that includes all required elements and demonstrates reasonable progress. Please work with your CDC evaluators to continue to refine this plan.

Category B

Recommendations on Activities:

- For B.5.3.1, the recipient should be prepared to discuss this activity with the project officer. Specifically, it should propose expenses to cover salaries, books, and blood pressure cuffs.
- For B.5.3.2, the recipient should work with the sub-grantees to seek alternative funds to support this activity.
- For B.6. 4.5, as CDC provides more detail on the Healthy Heart Ambassador (HHA)-Blood Pressure Self-Monitoring (BPSM) Program, the recipient should work with CDC to provide more detail for contracts with new community-based organizations wanting to implement this program.

Recommendations on Performance Measure Targets:

- The recipient submitted complete information for the Year 3 performance measure targets (submitted via awards management platform (AMP), not Grant Solutions). Please continue to work with your CDC evaluators on possible refinements to the performance measure targets and supporting information.

Recommendations on the Evaluation and Performance Measurement Plan:

- The recipient did not submit a draft year 3 evaluation plan (the EPMP submitted via AMP and Grant Solutions contained Year 1 and Year 2 evaluation plans only). Please work with your CDC evaluators upon receipt of technical review feedback to finalize the draft Year 3 evaluation plan and submit it through AMP.

Research Determination

DP18-1815 is only for non-research activities supported by CDC. (For the definition of research, please see the CDC Web site at the following Internet address: <http://www.cdc.gov/od/ads/opspoll1.htm>)

No research activities have been proposed.

Research activities have been proposed but were disapproved/disallowed.