

1. DATE ISSUED MM/DD/YYYY 05/08/2019		1a. SUPERSEDES AWARD NOTICE dated except that any additions or restrictions previously imposed remain in effect unless specifically rescinded	
2. CFDA No. 93.314 - Early Hearing Detection and Intervention Information System (EHDI-IS) Surveillance Program			
3. ASSISTANCE TYPE Cooperative Agreement			
4. GRANT NO. 5 NUR3DD000064-03-00 Formerly		5. TYPE OF AWARD Other	
4a. FAIN NUR3DD000064		5a. ACTION TYPE Non-Competing Continuation	
6. PROJECT PERIOD MM/DD/YYYY From 07/01/2017		Through 06/30/2020	
7. BUDGET PERIOD MM/DD/YYYY From 07/01/2019		Through 06/30/2020	

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)
Sec 399M(b)(1) PHS [42U.S.C. 280g-1(b)(1)]

8. TITLE OF PROJECT (OR PROGRAM)
SFY 2019 Early Hearing & Intervention Information System

9a. GRANTEE NAME AND ADDRESS HEALTH AND SENIOR SERVICES, MISSOURI DEPARTMENT OF Alternate Name: Missouri Department of Health 920 Wildwood Dr Missouri Dept. of Health and Senior Services Jefferson City, MO 65109-5796	9b. GRANTEE PROJECT DIRECTOR Ms. Catherine Harbison 920 WILDWOOD DR JEFFERSON CITY, MO 65109-5796 Phone: 573-751-6473
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10a. GRANTEE AUTHORIZING OFFICIAL Ms. Tonya R Loucks 920 WILDWOOD DR Jefferson City, MO 65109-5796 Phone: 573-751-6014	10b. FEDERAL PROJECT OFFICER Deidra Green 1600 Clifton Rd Atlanta, GA 30333 Phone: 404-498-3950
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ALL AMOUNTS ARE SHOWN IN USD

11. APPROVED BUDGET (Excludes Direct Assistance)		12. AWARD COMPUTATION	
I Financial Assistance from the Federal Awarding Agency Only <input type="checkbox"/>		a. Amount of Federal Financial Assistance (from item 11m) 102,159.00	
II Total project costs including grant funds and all other financial participation <input type="checkbox"/>		b. Less Unobligated Balance From Prior Budget Periods 0.00	
a. Salaries and Wages	54,206.00	c. Less Cumulative Prior Award(s) This Budget Period 0.00	
b. Fringe Benefits	27,401.00	d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION 102,159.00	
c. Total Personnel Costs	81,607.00	13. Total Federal Funds Awarded to Date for Project Period 306,477.00	
d. Equipment	0.00	14. RECOMMENDED FUTURE SUPPORT	
e. Supplies	0.00	(Subject to the availability of funds and satisfactory progress of the project):	
f. Travel	945.00	YEAR	TOTAL DIRECT COSTS
g. Construction	0.00	a. 4	d. 7
h. Other	2,225.00	b. 5	e. 8
i. Contractual	0.00	c. 6	f. 9
j. TOTAL DIRECT COSTS	84,777.00	15. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:	
k. INDIRECT COSTS	17,382.00	a. DEDUCTION	
l. TOTAL APPROVED BUDGET	102,159.00	b. ADDITIONAL COSTS	
m. Federal Share	102,159.00	c. MATCHING	
n. Non-Federal Share	0.00	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 AWARING 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:

Pamela Render, Grants Management Officer
2920 Brandywine Road
Mailstop E09
Atlanta, GA 30341
Phone: 770-488-2712

17. OBJ CLASS	41.51	18a. VENDOR CODE		18b. EIN		19. DUNS	878092600	20. CONG. DIST.	03
FY-ACCOUNT NO.	DOCUMENT NO.	CFDA	ADMINISTRATIVE CODE	AMT ACTION FIN ASST	APPROPRIATION				
21. a.	9-939ZRCF	b. 17NUR3DD000064	c. 93.314	d. DD	e. \$102,159.00	f. 75-19-0958			
22. a.		b.	c.	d.	e.	f.			
23. a.		b.	c.	d.	e.	f.			

NOTICE OF AWARD (Continuation Sheet)

PAGE 2 of 3	DATE ISSUED 05/08/2019
GRANT NO. 5 NUR3DD000064-03-00	

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 05/08/2019
GRANT NO. 5 NUR3DD000064-03-00	

Federal Financial Report Cycle			
Reporting Period Start Date	Reporting Period End Date	Reporting Type	Reporting Period Due Date
07/01/2017	06/30/2018	Annual	09/28/2018
07/01/2018	06/30/2019	Annual	09/28/2019
07/01/2019	06/30/2020	Annual	09/28/2020

AWARD ATTACHMENTS

Missouri Department of Health

5 NUR3DD000064-03-00

1. Terms and Conditions
2. Technical 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 DD17-1701, entitled Documentation and Use of Follow-up Diagnostic and Intervention Services Data through the Maintenance and Enhancement of the Early Hearing Detection and Intervention Information System (EHDI-IS), and application dated February 20, 2019, 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 \$102,159 is approved for the Year 03 budget period, which is July 1, 2019 through June 30, 2020. All future year funding will be based on satisfactory programmatic progress and the availability of funds.

Core Activities:

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.

Core Activities

CDC staff involved with this cooperative agreement will provide substantial involvement beyond site visits and regular performance and financial monitoring during the project period. Substantial involvement means that awardees can expect federal programmatic partnership in carrying out the effort under the award. The CDC program will work in partnership with awardees to ensure the success of the cooperative agreement by:

- Supporting awardees in implementing cooperative agreement requirements and advancing program activities to meet outcomes.
- Providing technical assistance to revise annual work plans and budgets.
- Providing consultation and guidance on enhancing and expanding existing EHDI surveillance activities, including the collection and analysis of data.
- Collaborating with awardees to develop and implement strategic and individual evaluation plans and use evaluation findings.
- Providing technical assistance to define and operationalize performance measures and implement awardees' performance measurement plans.

- Planning and convening in-person meetings to provide awardees with the opportunity to exchange resources, share lessons learned, and address common issues.
- Participating in meetings, committees, conference calls, and working groups relevant to achieving the goals of the cooperative agreement.
- Translating and disseminating lessons learned by awardees to build a stronger practice base for EHDI-IS strategies.

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, August 1, 2019, will cause delay in programmatic progress and will adversely affect the future funding of this project.

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.

FUNDING RESTRICTIONS AND LIMITATIONS

Indirect Costs:

Indirect costs are approved based on the negotiated indirect cost rate agreement dated March 9, 2019, which calculates indirect costs as follows, a FIXED is approved at a rate of 21.30% 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.

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
LaKasa Wyatt MPA, Grants Management Specialist
Centers for Disease Control and Prevention
Chronic Disease and Birth Defects Services Branch
2960 Brandywine Road, MS K-69
Atlanta, Georgia 30341
Email: LGW5@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.

Grants Management Specialist Contact:

LaKasa Wyatt, MPA
Centers for Disease Control and Prevention
Chronic Disease and Birth Defects Services Branch
2939 Brandywine Road, MS TV-2
Atlanta, Georgia 30341
Email: LGW5@cdc.gov
Phone: 770-488-2728

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:

Deidra Green, Project Officer
Centers for Disease Control and Prevention
NCBDDD
Chamblee Building 101 Room 3112
Atlanta, Georgia 30341-3717
Telephone: 404-498-3034
Fax: 770-488-0270
Email: DGreen@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.

Technical Reviewer Evaluation Report

Annual Performance Report (APR) CDC-RFA-DD17-1701-03

Documentation and Use of Follow-up Diagnostic and Intervention Services Data through the Maintenance and Enhancement of the Early Hearing Detection and Intervention System (EHDI-IS).

Recipient name:	Missouri Department of Health
Grant number:	NUR3DD000064
Project Director:	Catherine Harbison
AOR:	Tonya R Loucks
BY 2 est. unobligated funds:	\$0
BY 3 requested amount:	\$102,159
Reviewer:	Stephanie Henry
Date of Review:	April 11, 2019

Section 1: Year 2 Progress report Summary/comments

MO EHDI is making progress toward accomplishing all Year 2 strategies in improving documentation and the use of diagnostic and intervention services data, to include activities related to the carryover request supporting the MOHSAIC (EHDI-IS). The Missouri Office of Administration’s Information Technology Services Division (ITSD) added and stored via MOHSAIC three new data fields; (1) the contact information of the healthcare provider at the time of diagnostic evaluation; (2) Missouri’s Part C of the Individuals with Disabilities Education Act (IDEA) program, First Steps, eligibility; and (3) the date of non-Part C early intervention (EI) enrollment. Additionally, work progressed toward creating a hearing rescreening result page in the Missouri Electronic Vital Records (MoEVR) system. Additionally, part of the evaluation process MO EHDI conducted a survey of audiologists that provided pertinent reporting issues audiologists found challenging.

While progress is being made, MO EHDI continue to experience challenges with ITSD devoting time and staff to ensure ALL strategies are completed by June 30, 2019.

Strategy 1: Surveillance:

- Expanding MOHSAIC’s ability to capture diagnostic and EI data in a timely manner.
- Progress is being made toward the addition of individualized maternal demographics.
- MO EHDI, ITSD implemented the capability to add and store in MOHSAIC the name and contact information of the current healthcare provider at the time of several enrollment stages.
- Progress made adding the ability record follow-up audiology appointment and the audiologist contact information.
- Carryover contracts funds with ManTech, to develop rescreening page and to build the bridge that will link the MoEVR data to MOHSAIC.
- ITSD was unable to add and store in MOHSAIC the reasons an infant did not receive follow-up diagnostic service

Strategy 2: Training and Support:

- Conducted training for healthcare rescreening and/or diagnostic services providers.
- As a part of TA, visited eight audiology clinics and eight pediatric clinics, this consisted of reviewing individualized clinic data.

Technical Reviewer Evaluation Report

Annual Performance Report (APR) CDC-RFA-DD17-1701-03

Documentation and Use of Follow-up Diagnostic and Intervention Services Data through the Maintenance and Enhancement of the Early Hearing Detection and Intervention System (EHDI-IS).

- Support with First Steps, to increase the sharing of child-specific dates of signed Individual Family Service Plans (IFSP).

Strategy 3: Partnerships:

- Year 2 Partnership efforts focused on audiology clinics.
- Survey conducted with audiologists indicated knowledge of reporting responsibilities and regularity of diagnostic results.
- Met with Part C Coordinator on efforts to increase the number of parents who sign a release of information (ROI) to share the date of the signed IFSP.
- A plan was developed requiring the collection of the ROI by the First Steps service coordinator by adding the requirement to the First Steps electronic record data system.
- MO EHDI was unable to Efforts to develop MOU's with audiology clinics a revised timeframe completion date is June 2020.

Strategy 4: Strategic Communication & Dissemination:

- MO EHDI shared the annual data with several programs, committees and workgroups

Strategy 5: Monitoring, Analysis and Evaluation of the EHDI-IS

- MO EHDI successfully completed an evaluation of the acceptability of the EHDI-IS among audiologist in 2018.
- The evaluation report revealed some of the audiology clinics listed in the “Audiological Services for Missouri Newborns” do not provide audiological services to children from birth through age three; as a result conducted a phone survey of all audiology clinics listed in the “Audiological Services for Missouri Newborns” guide to determine the suitability of their placement in the guide.
- The evaluation revealed audiologists could not consistently locate infants in MOHSAIC to report results.
- Year 2 evaluation activities included maintaining data quality and developing strategies for program improvement.

Section 2: Year 3 Work plan

Summary Year 3 work plan: In year 3 of 3, MO EHDI Program will continue to implement the 12 of 55 Functional Standards the EHDI-IS does not meet. The success of completing year 3 strategies will require the ongoing and/or new collaboration with the DHSS Bureau of Vital Records (BVR), Bureau of Vital Statistics (BVS), and the DHSS Office of Administration Information Technology Services Division (ITSD) and all other partners and stakeholders.

Technical Reviewer Evaluation Report

Annual Performance Report (APR) CDC-RFA-DD17-1701-03

Documentation and Use of Follow-up Diagnostic and Intervention Services Data through the Maintenance and Enhancement of the Early Hearing Detection and Intervention System (EHDI-IS).

Major Strengths:

- MO EHDI developed an appropriate and feasible evaluation plan to assess the data quality attribute for diagnostic and early intervention data. No changes to the evaluation plan for this reporting period. Ensure submitting the evaluation report by September 30, 2019.
- MO EHDI will work with DHSS PHIN Coordinator and ITSD to add maternal demographics to MOHSAIC hearing screening cases.
- Working with ITSD and contractor to add to the MoEVR system the ability to submit rescreening results, record the follow-up audiology appointment date, and verify the contact information of the audiologist to whom the family was referred.
- Site visits to audiology clinics and primary care clinics to provide training on completing and submitting diagnostic results, baseline is 8 with a target of 11.
- As a result of the meetings with First Steps during Year 2, a tickler system within the First Steps data management system will be implemented to alert service coordinators to obtain a release of information from parents to send the IFSP date.
- MO EHDI continues to disseminate data based on the HSFS to key stakeholders.
- Meetings are planned with internal and external stakeholders to discuss the EHDI-IS Functional Standards as well as EHDI-IS evaluation plan, during year 3.

Major Weaknesses:

- Measure 1.2 does not include the 2017 data and no explanation noted.
- Based on Years 1 and 2, the development of MOUs to clearly define processes and expectations related to reporting were not accomplished. Consider reaching out to other successful states and/or the POC with ECTA for assistance.
- Activities related to analyzing data is limited. Consider reaching out to the Louisiana EHDI program or any other EHDI programs on suggestions.
- Per the 2017 HSFS data submitted, there appears to be an error in the Baselines. Please review all Outcome Measures and correct, if necessary.

Section 4: Year 2 Estimated unobligated balance

The recipient indicates no estimated unobligated funds.

Section 5: Year 3 Budget

Requested budget appear to be reasonable, allowable, and allocable. However, the funding to support ITSD related activities throughout this project appear to be less of priority which have caused some delays.

Technical Reviewer Evaluation Report

Annual Performance Report (APR) CDC-RFA-DD17-1701-03

Documentation and Use of Follow-up Diagnostic and Intervention Services Data through the Maintenance and Enhancement of the Early Hearing Detection and Intervention System (EHDI-IS).

Section 6: Recommendations:

Work plan

- Recipient must address any weaknesses listed in Section 2, year 3 work plan;
- Recipient must work with their Program Liaison to submit a revised Year 3 work plan. (See section 2: Year 3 work Plan, for details)
- A revised work plan is **NOT** requested by the program

Budget

- Recipient must work with their Program Liaison to submit a revised budget for approval to OGS as an amendment via GrantSolutions. (See Section 5 Year 3 budget and terms and conditions of NoA for details)
- A revised budget is **NOT** requested by the program. However, budget revisions may be required by the Office of Grants Services. Please review your Notice of Award for these required revisions.