


1. DATE ISSUED: 09/13/2016		2. PROGRAM CFDA: 93.241	
3. SUPERSEDES AWARD NOTICE dated: 06/17/2016 except that any additions or restrictions previously imposed remain in effect unless specifically rescinded.			
4a. AWARD NO.: 6 H3GRH30031-01-01		4b. GRANT NO.: H3GRH30031	5. FORMER GRANT NO.:
6. PROJECT PERIOD: FROM: 08/01/2016 THROUGH: 07/31/2019			
7. BUDGET PERIOD: FROM: 08/01/2016 THROUGH: 07/31/2017			

U.S. Department of Health and Human Services

HRSA
 Health Resources and Services Administration

NOTICE OF AWARD
 AUTHORIZATION (Legislation/Regulation)
 Title XVIII, Section 1820 (g)(1) of the Social Security Act (42 U.S.C. 1395i-4), as amended by Sec. 4201 (a) of P.L. 105-33, Sec. Title XVIII, § 1820 (g)(6) of the Social Security Act (42 U.S.C. 1395i-4(g)(6)), as amended.

8. TITLE OF PROJECT (OR PROGRAM): Flex Rural Veterans Health Access Program

9. GRANTEE NAME AND ADDRESS:
 HEALTH AND SENIOR SERVICES, MISSOURI DEPARTMENT OF
 920 Wildwood Drive, PO Box 570
 Jefferson City, MO 65102
DUNS NUMBER:
 878092600

10. DIRECTOR: (PROGRAM DIRECTOR/PRINCIPAL INVESTIGATOR)
 Ben Harvey
 HEALTH AND SENIOR SERVICES, MISSOURI DEPARTMENT OF
 912 Wildwood Dr
 Jefferson City, MO 65109-5796

11. APPROVED BUDGET: (Excludes Direct Assistance)
 Grant Funds Only
 Total project costs including grant funds and all other financial participation

a. Salaries and Wages :	\$0.00
b. Fringe Benefits :	\$0.00
c. Total Personnel Costs :	\$0.00
d. Consultant Costs :	\$0.00
e. Equipment :	\$0.00
f. Supplies :	\$0.00
g. Travel :	\$0.00
h. Construction/Alteration and Renovation :	\$0.00
i. Other :	\$331,086.00
j. Consortium/Contractual Costs :	\$0.00
k. Trainee Related Expenses :	\$0.00
l. Trainee Stipends :	\$0.00
m. Trainee Tuition and Fees :	\$0.00
n. Trainee Travel :	\$0.00
o. TOTAL DIRECT COSTS :	\$331,086.00
p. INDIRECT COSTS (Rate: % of S&W/TADC) :	\$0.00
q. TOTAL APPROVED BUDGET :	\$331,086.00
i. Less Non-Federal Share:	\$0.00
ii. Federal Share:	\$331,086.00

12. AWARD COMPUTATION FOR FINANCIAL ASSISTANCE:

a. Authorized Financial Assistance This Period	\$331,086.00
b. Less Unobligated Balance from Prior Budget Periods	
i. Additional Authority	\$0.00
ii. Offset	\$0.00
c. Unawarded Balance of Current Year's Funds	\$0.00
d. Less Cumulative Prior Awards(s) This Budget Period	\$331,086.00
e. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION	\$0.00

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

YEAR	TOTAL COSTS
02	\$300,000.00
03	\$300,000.00

14. APPROVED DIRECT ASSISTANCE BUDGET: (In lieu of cash)

a. Amount of Direct Assistance	\$0.00
b. Less Unawarded Balance of Current Year's Funds	\$0.00
c. Less Cumulative Prior Awards(s) This Budget Period	\$0.00
d. AMOUNT OF DIRECT ASSISTANCE THIS ACTION	\$0.00

15. PROGRAM INCOME SUBJECT TO 45 CFR 75.307 SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:
A=Addition B=Deduction C=Cost Sharing or Matching D=Other [D]
 Estimated Program Income: \$0.00

16. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY HRSA, IS 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 cited above. b. The grant program regulation cited above. c. This award notice including terms and conditions, if any, noted below under REMARKS. d. 45 CFR Part 75 as applicable. 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 [X]Yes []No)
 This NoA is issued to remove one or more Grant Conditions imposed on projects.

Electronically signed by Olusola Dada , Grants Management Officer on : 09/13/2016

17. OBJ. CLASS: 41.51	18. CRS-EIN:	19. FUTURE RECOMMENDED FUNDING: \$0.00
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FY-CAN	CFDA	DOCUMENT NO.	AMT. FIN. ASST.	AMT. DIR. ASST.	SUB PROGRAM CODE	SUB ACCOUNT CODE
16 - 3704125	93.912	16H3GRH30031	\$0.00	\$0.00		16FRVHAP

HRSA Electronic Handbooks (EHBs) Registration Requirements

The Project Director of the grant (listed on this NoA) and the Authorizing Official of the grantee organization are required to register (if not already registered) within HRSA's Electronic Handbooks (EHBs). Registration within HRSA EHBs is required only once for each user for each organization they represent. To complete the registration quickly and efficiently we recommend that you note the 10-digit grant number from box 4b of this NoA. After you have completed the initial registration steps (i.e., created an individual account and associated it with the correct grantee organization record), be sure to add this grant to your portfolio. This registration in HRSA EHBs is required for submission of noncompeting continuation applications. In addition, you can also use HRSA EHBs to perform other activities such as updating addresses, updating email addresses and submitting certain deliverables electronically. Visit <https://grants3.hrsa.gov/2010/WebEPSExternal/Interface/common/accesscontrol/login.aspx> to use the system. Additional help is available online and/or from the HRSA Call Center at 877-Go4-HRSA/877-464-4772.

Terms and Conditions

Failure to comply with the remarks, terms, conditions, or reporting requirements may result in a draw down restriction being placed on your Payment Management System account or denial of future funding.

Grant Specific Term(s)

1. The grant condition stated below on NoA 1 H3GRH30031-01-00 is hereby lifted.

Grantee must provide letters of commitment from the project partners identified in the application. Grantee must provide evidence that the identified and proposed project partners intend to commit, engage, and will accept financial responsibility of the proposed project. Please see pages 19 and 25 of the Funding Opportunity Announcement for details of what needs to be addressed in this submission.

The commitment of network members in the proposed project must be documented clearly. This will include the submission of signed Memoranda of Understanding, as well as Letters of Commitment that identify participating rural providers and demonstrate that care givers understand the challenges in project implementation and their competence and willingness to meet those challenges. These documents should also describe the involvement and support of potential rural health partners' senior project partner management, clinicians, and other care givers in developing and operating the project. Please see pages 13, 19, 24 and 25 of the Funding Opportunity Announcement for details of what needs to be addressed in this submission.

2. The grant condition stated below on NoA 1 H3GRH30031-01-00 is hereby lifted.

Grantee must provide additional information that describes the roles of providers and stakeholders in the proposed project. This will include the clear identification of participating rural providers. Please see page 19 of the Funding Opportunity Announcement for details of what needs to be addressed in this submission.

3. The grant condition stated below on NoA 1 H3GRH30031-01-00 is hereby lifted.

As stated on pg 4 of the FOA, the RVHAP program goals include providing access to mental health and other services to rural veterans via partnerships with other healthcare entities such as: critical access hospitals, Federally Qualified Health Centers, rural health clinics, State hospital associations, home health agencies, mental health service providers, pharmacists, local Government agencies, private practice physicians, and other providers who demonstrate the ability to provide access to health care services to rural veterans. The applicant must identify key project partners (in addition to the Missouri Coalition for Community behavioral Health Care) in the project service area with the ability to provide access to health care services to rural veterans, and propose a detailed timeline for outreach and solicitation of support for the proposed project.

4. The grant condition stated below on NoA 1 H3GRH30031-01-00 is hereby lifted.

Submit a revised Evaluation and Technical Support Capacity that details a plan for the provision of technical support, with identified responsibilities for problem-solving network issues. Please see page 25 of the Funding Opportunity Announcement for details of what needs to be addressed in this submission.

5. The grant condition stated below on NoA 1 H3GRH30031-01-00 is hereby lifted.

Grantee must provide a revised Resolution of Challenges that explains how it will address the identified challenges of engaging veterans and growing waiting lists. The revised Resolution of Challenges should also describe the process for community involvement and support in formulating and sustaining the network. Please see page 11 and 25 of the Funding Opportunity Announcement for details of what needs to be addressed in this submission.

6. The grant condition stated below on NoA 1 H3GRH30031-01-00 is hereby lifted.

Grantee must submit a detailed plan for how it will re-engage with the Department of Veterans Affairs (VA), in consultation with FORHP, to coordinate the care of rural veterans between VA and community providers. Please see pages 19 and 24 of the Funding Opportunity Announcement for details of what needs to be addressed in this submission.

7. The grant condition stated below on NoA 1 H3GRH30031-01-00 is hereby lifted.

Grantee must provide a revised Methodology that details the vendor selection process for the proposed project. Please see page 9 of the Funding Opportunity

Announcement for details of what needs to be addressed in this submission.

The Methodology should describe (and address) the likely variation in capacity to be responsible for operational costs across sites and ensure sustainability after the funding period ends. Please see page 22 of the Funding Opportunity Announcement for details of what needs to be addressed in this submission.

The revised Methodology should also detail a plan to recruit and enroll veterans to the program. Please see page 8 of the Funding Opportunity Announcement for details of what needs to be addressed in this submission.

Grantee must provide a revised Methodology that includes a clear description of how it will integrate administrative and clinical information systems into each provider's normal practice. A Work Plan that has been revised to address this issue is also required. Please see page 22 of the Funding Opportunity Announcement for details of what needs to be addressed in this submission.

8. The grant condition stated below on NoA 1 H3GRH30031-01-00 is hereby lifted.

Grantee must provide a revised Work Plan that clearly identifies individuals for key roles and tasks, or individuals (or contractors) outside the agency who will play key roles in the proposed project.

The revised Work Plan should also detail how the evaluation (self-assessment) will be implemented and coordinated, including the capacity of providers to participate. Please see page 19 of the Funding Opportunity Announcement for details of what needs to be addressed in this submission.

All prior terms and conditions remain in effect unless specifically removed.

Contacts

NoA Email Address(es):

Name	Role	Email
Ben Harvey	Program Director	ben.harvey@health.mo.gov
Ben Harvey	Point of Contact	ben.harvey@health.mo.gov
Bret Fischer	Authorizing Official	grants@health.mo.gov

Note: NoA emailed to these address(es)

Program Contact:

For assistance on programmatic issues, please contact Anthony Oliver at:

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Division of Grants Management Operations:

For assistance on grant administration issues, please contact Olusola Dada at:

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