



Award# 6 NE11OE000072-02-12

FAIN# NE11OE000072

Federal Award Date: 12/02/2024

Recipient Information

1. Recipient Name

MISSOURI DEPARTMENT OF HEALTH &
SENIOR SERVICES
920 Wildwood Dr
Jefferson City, MO 65109-5796
[NO DATA]

2. Congressional District of Recipient

03

3. Payment System Identifier (ID)

[REDACTED]

4. Employer Identification Number (EIN)

[REDACTED]

5. Data Universal Numbering System (DUNS)

878092600

6. Recipient's Unique Entity Identifier (UEI)

UETLXV8NG8F4

7. Project Director or Principal Investigator

Nicole Cooper
Senior Public Health Program Associate
nicole.cooper@health.mo.gov
5735266960

8. Authorized Official

Mrs. Marcia Mahaney
Director, Division of Administration
marcia.mahaney@health.mo.gov
573-751-6014

Federal Agency Information

CDC Office of Financial Resources

9. Awarding Agency Contact Information

Mr. Derick Wheeler, II
Grants Management Specialist
tie2@cdc.gov
678-475-4972

10. Program Official Contact Information

Gabrielle N Bires
Program Officer
ugt2@cdc.gov
404-368-3908

Federal Award Information

11. Award Number

6 NE11OE000072-02-12

12. Unique Federal Award Identification Number (FAIN)

NE11OE000072

13. Statutory Authority

317(K)(2) OF PHSA 42USC 247B(K)(2)

14. Federal Award Project Title

Strengthening U.S. Public Health Infrastructure, Workforce, and Data Systems

15. Assistance Listing Number

93.967

16. Assistance Listing Program Title

CDC's Collaboration with Academia to Strengthen Public Health

17. Award Action Type

Budget Revision

18. Is the Award R&D?

No

Summary Federal Award Financial Information

19. Budget Period Start Date	12/01/2023	- End Date	11/30/2024
20. Total Amount of Federal Funds Obligated by this Action			\$0.00
20a. Direct Cost Amount			\$6,393.00
20b. Indirect Cost Amount			(\$6,393.00)
21. Authorized Carryover			\$0.00
22. Offset			\$0.00
23. Total Amount of Federal Funds Obligated this budget period			\$8,348,782.00
24. Total Approved Cost Sharing or Matching, where applicable			\$0.00
25. Total Federal and Non-Federal Approved this Budget Period			\$8,348,782.00
26. Period of Performance Start Date	12/01/2022	- End Date	11/30/2027
27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance			\$70,980,264.00

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Mr. Damond Barnes
Grants Management Officer

30. Remarks



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Recipient Information	
Recipient Name MISSOURI DEPARTMENT OF HEALTH & SENIOR SERVICES 920 Wildwood Dr Jefferson City, MO 65109-5796 [NO DATA]	
Congressional District of Recipient 03	
Payment Account Number and Type [REDACTED]	
Employer Identification Number (EIN) Data [REDACTED]	
Universal Numbering System (DUNS) 878092600	
Recipient's Unique Entity Identifier (UEI) UETLXV8NG8F4	
31. Assistance Type Project Grant	
32. Type of Award Other	

33. Approved Budget (Excludes Direct Assistance)	
I. Financial Assistance from the Federal Awarding Agency Only	
II. Total project costs including grant funds and all other financial participation	
a. Salaries and Wages	\$579,820.00
b. Fringe Benefits	\$343,063.00
c. Total Personnel Costs	\$922,883.00
d. Equipment	\$0.00
e. Supplies	\$6,750.00
f. Travel	\$64,320.00
g. Construction	\$0.00
h. Other	\$52,581.00
i. Contractual	\$7,108,150.00
j. TOTAL DIRECT COSTS	\$8,154,684.00
k. INDIRECT COSTS	\$194,098.00
l. TOTAL APPROVED BUDGET	\$8,348,782.00
m. Federal Share	\$8,348,782.00
n. Non-Federal Share	\$0.00

34. Accounting Classification Codes

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	ASSISTANCE LISTING	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
3-9390JXA	23NE11OE000072A2	OE	410U	93.967	\$0.00	75-2224-0943
3-9390LIZ	23NE11OE000072A1C6	OE	410U	93.967	\$0.00	75-X-0140
3-9390EV2	23NE11OE000072A3	OE	410U	93.967	\$0.00	75-23-0959
4-9390LFF	23NE11OE000072A2	OE	410U	93.967	\$0.00	75-2324-0943
4-9390MV6	23NE11OE000072DMIC6	OE	410U	93.967	\$0.00	75-X-0140
4-9390MFC	23NE11OE000072C5	OE	410U	93.967	\$0.00	75-2124-0943



DEPARTMENT OF HEALTH AND HUMAN SERVICES Notice of Award

Centers for Disease Control and Prevention

Award# 6 NE11OE000072-02-12

FAIN# NE11OE000072

Federal Award Date: 12/02/2024

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

AWARD ATTACHMENTS

MISSOURI DEPARTMENT OF HEALTH & SENIOR SERVICES

6 NE11OE000072-02-12

1. NE11OE000072--Terms and Conditions

ADDITIONAL TERMS AND CONDITIONS

Revised Budget: The purpose of this amended Notice of Award is to approve the revised budget request submitted by your organization dated October 31, 2024. Funds have been distributed as indicated in the approved budget of this Notice of Award.

Budget by Component/Strategy Funding: Recipients must ensure to track and report project funding and activities by strategy. Costs cannot be redirected between components/strategies without prior CDC approval.

Missing Contractual Elements: – The contract listed below is **not** approved and the recipient may not begin the contract until the Itemized Budget, is provided via GrantSolutions as a Notification of Contractor amendment and GMO approval is provided via Notice of Award.

Contractor 1: *TBD-- IIS Expansion of Data Infrastructure to Modernize Data Analytics and Data Sharing*

Stewardship: Please be advised that recipients must exercise proper stewardship over Federal funds by ensuring that all cost charged to their cooperative agreement are allowable, allocable, necessary, and reasonable.

All costs must be applied consistently for all work of the organization under similar circumstances, and in line with the goals and objectives outlined in and approved budget and work plans.

All other terms and conditions issued with the original award remain in effect throughout the budget period unless otherwise changed in writing, by the Grants Management Officer.

PLEASE REFERENCE YOUR AWARD NUMBER ON ALL CORRESPONDENCE