

1. DATE ISSUED MM/DD/YYYY 10/12/2017 | 2. CFDA NO. 93.945 | 3. ASSISTANCE TYPE Cooperative Agreement

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

CDC Office of Financial Resources

2920 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.

1a. SUPERSEDES AWARD NOTICE dated 09/11/2017  
except that any additions or restrictions previously imposed remain in effect unless specifically rescinded

4. GRANT NO. 6 NU58DP003976-05-04  
Formerly 5U58DP003976-03 | 5. ACTION TYPE Post Award Amendment

6. PROJECT PERIOD MM/DD/YYYY  
From 07/01/2012 Through 06/30/2018

7. BUDGET PERIOD MM/DD/YYYY  
From 07/01/2016 Through 06/30/2018

8. TITLE OF PROJECT (OR PROGRAM)  
STATE PUBLIC HEALTH APPROACHES TO IMPROVING ARTHRITIS OUTCOMES

9a. GRANTEE NAME AND ADDRESS  
Missouri Dept. of Health and Senior Services/DSS&R  
920 WILDWOOD DR  
STATE OF MISSOURI  
JEFFERSON CITY, MO 65109-5796

9b. GRANTEE PROJECT DIRECTOR  
Mr. Steve Cramer  
930 Wildwood Dr  
Jefferson City, MO 65109-5796  
Phone: 5735222806

10a. GRANTEE AUTHORIZING OFFICIAL  
Mr. Bret Fischer  
920 Wildwood Dr  
Jefferson City, MO 65102-0570  
Phone: 573-751-6014

10b. FEDERAL PROJECT OFFICER  
Michele Mercier  
1600 Clifton Rd  
Atlanta, GA 30333  
Phone: 770-488-4112

ALL AMOUNTS ARE SHOWN IN USD

<b>11. APPROVED BUDGET (Excludes Direct Assistance)</b>	
I Financial Assistance from the Federal Awarding Agency Only	<b>II</b>
II Total project costs including grant funds and all other financial participation	
a. Salaries and Wages .....	12,288.00
b. Fringe Benefits .....	6,311.00
c. Total Personnel Costs .....	18,599.00
d. Equipment .....	0.00
e. Supplies .....	49.00
f. Travel .....	0.00
g. Construction .....	0.00
h. Other .....	438.00
i. Contractual .....	784,594.00
j. TOTAL DIRECT COSTS →	803,680.00
k. INDIRECT COSTS	4,203.00
<b>l. TOTAL APPROVED BUDGET</b>	<b>807,883.00</b>
m. Federal Share	787,883.00
n. Non-Federal Share	20,000.00

<b>12. AWARD COMPUTATION</b>	
a. Amount of Federal Financial Assistance (from item 11m)	787,883.00
b. Less Unobligated Balance From Prior Budget Periods	8,253.00
c. Less Cumulative Prior Award(s) This Budget Period	779,630.00
<b>d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION</b>	<b>0.00</b>
<b>13. Total Federal Funds Awarded to Date for Project Period</b>	<b>2,599,281.00</b>

<b>14. RECOMMENDED FUTURE SUPPORT</b> (Subject to the availability of funds and satisfactory progress of the project):			
YEAR	TOTAL DIRECT COSTS	YEAR	TOTAL DIRECT COSTS
a. 6		d. 9	
b. 7		e. 10	
c. 8		f. 11	

<b>15. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:</b>		<b>e</b>
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.

REMARKS (Other Terms and Conditions Attached -  Yes  No)

GRANTS MANAGEMENT OFFICIAL: Pamela Render

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
21. a. 7-939ZREX	b. 003976DP14	c. 93.945	d. DP	e. \$0.00
22. a.	b.	c.	d.	e.
23. a.	b.	c.	d.	e.

NOTICE OF AWARD (Continuation Sheet)

PAGE 2 of 3	DATE ISSUED 10/12/2017
GRANT NO. 6 NU58DP003976-05-04	

**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
<b>Total</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

NOTICE OF AWARD (Continuation Sheet)

PAGE 3 of 3	DATE ISSUED 10/12/2017
GRANT NO. 6 NU58DP003976-05-04	

Federal Financial Report Cycle			
Reporting Period Start Date	Reporting Period End Date	Reporting Type	Reporting Period Due Date
07/01/2012	06/30/2013	Annual	09/28/2013
07/01/2013	06/30/2014	Annual	09/28/2014
07/01/2014	06/30/2015	Annual	09/28/2015
07/01/2015	06/30/2016	Annual	09/28/2016
07/01/2016	06/30/2018	Annual	09/28/2018

# AWARD ATTACHMENTS

Missouri Dept. of Health and Senior  
Services/DSS&R

6 NU58DP003976-05-04

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1. Terms and Conditions

Funding Opportunity Announcement (FOA) Number: DP12-1210

Award Number: NU58 DP003976-05

Award Type: **Cooperative Agreement**

Applicable Regulations: 45 Code of Federal Regulations (CFR) Part 75, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards

#### **AWARD INFORMATION**

**Note 1: ANNUAL FEDERAL FINANCIAL REPORT (FFR):** The Annual Federal Financial Report (FFR) SF-425 is required every 12 months and must be submitted the final FFR (SF 425) to the assigned GMS/GMO via email. <http://www.gpo.gov/fdsys/pkg/FR-2012-06-11/pdf/2012-14049.pdf>. The Annual FFR is due 90 days after the end of the project period on December 30, 2017. The reporting timeframe is from 07/01/2016 to 06/30/2017. The FFR is cumulative and should only include those funds authorized and disbursed during the timeframe covered by the report.

**Note 2:** The purpose of this amendment is to approve the use of Program Income in the amount of \$20,000, from the Mississippi County Health Department to support Contractual expenditures relevant to the project. This action is taken in accordance with the recipient's request dated July 18, 2017.

**NOTE 3:** Funding cannot be used for activities already covered by other Federal grants and or cooperative agreements.

**NOTE 4:** Please be advised that grantee must exercise proper stewardship over Federal funds by ensuring that all costs charged to their cooperative agreement are allowable, allocable, necessary and reasonable.

**NOTE 5:** All the 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 AWARD NUMBER ON ALL CORRESPONDENCE**

Administrative Contacts:

**Grants Management Officer**, Pamela Render  
Centers for Disease Control  
Office of Grants Services  
2960 Brandywine Road  
Atlanta, Georgia 30341  
Telephone: 770-488-2712  
Email: [PRender@cdc.gov](mailto:PRender@cdc.gov)

**Grants Management Specialist:** Keisha Thompson  
Center for Disease Control and Prevention  
CDC / ATSDR  
2960 Brandywine Road MS.E-01

Atlanta, GA 30341  
**Phone:** 770-488-2681  
Email: [dwt6@cdc.gov](mailto:dwt6@cdc.gov)