### TOTAL DIRECT COSTS

1. **DATE ISSUED**
   - MM/DD/YYYY: 07/26/2019

2. **CFDA No.**
   - 93.336 - Behavioral Risk Factor Surveillance System

3. **ASSISTANCE TYPE**
   - Cooperative Agreement

4. **GRANT NO.**
   - 6 NU58DP006043-05-03
   - Formerly 1US6DP006043-01

5. **TYPE OF AWARD**
   - Post Award Amendment

6. **PROJECT PERIOD**
   - From: 03/29/2015
   - Through: 07/31/2020

7. **BUDGET PERIOD**
   - From: 03/29/2019
   - Through: 07/31/2020

8. **TITLE OF PROJECT (OR PROGRAM)**
   - Missouri Behavioral Risk Factor Surveillance System

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

**CDC Office of Financial Resources**

**NOTICE OF AWARD**

**AUTHORIZATION (Legislation/Regulations)**


---

**TITLE OF PROJECT: Behavioral Risk Factor Surveillance System**

**LOCATION OF GRANTEE: Jefferson City, MO 65109-5796**

**CONTACTS:**
- Venkata Garikapaty
  - 920 Wildwood Drive
  - Jefferson City, MO 65102-0570
  - Phone: 573-526-0452
- Audrey Williams
  - 4700 Buford Highway
  - Chamblee, GA 30341
  - Phone: 770-488-5941

---

**11. APPROVED BUDGET (Excludes Direct Assistance)**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Salaries and Wages</td>
<td>54,163.00</td>
</tr>
<tr>
<td>b. Fringe Benefits</td>
<td>31,415.00</td>
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<tr>
<td>c. Total Personnel Costs</td>
<td>85,578.00</td>
</tr>
<tr>
<td>d. Equipment</td>
<td>0.00</td>
</tr>
<tr>
<td>e. Supplies</td>
<td>491.00</td>
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<tr>
<td>f. Travel</td>
<td>2,840.00</td>
</tr>
<tr>
<td>g. Construction</td>
<td>0.00</td>
</tr>
<tr>
<td>h. Other</td>
<td>219,354.00</td>
</tr>
<tr>
<td>i. Contractual</td>
<td>245,629.00</td>
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<tr>
<td><strong>TOTAL DIRECT COSTS</strong></td>
<td>553,893.00</td>
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**12. AWARD COMPUTATION**

<table>
<thead>
<tr>
<th>Year</th>
<th>TOTAL DIRECT COSTS</th>
<th>Year</th>
<th>TOTAL DIRECT COSTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>a.</td>
<td>d.</td>
<td>e.</td>
<td>f.</td>
</tr>
<tr>
<td>b.</td>
<td>c.</td>
<td>g.</td>
<td>h.</td>
</tr>
<tr>
<td>c.</td>
<td>g.</td>
<td>h.</td>
<td>i.</td>
</tr>
<tr>
<td>d.</td>
<td>h.</td>
<td>i.</td>
<td>j.</td>
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<td>i.</td>
<td>j.</td>
<td>k.</td>
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<td>j.</td>
<td>k.</td>
<td>l.</td>
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<td>k.</td>
<td>l.</td>
<td>m.</td>
</tr>
<tr>
<td>h.</td>
<td>l.</td>
<td>m.</td>
<td>n.</td>
</tr>
</tbody>
</table>

---

**13. Total Federal Funds Awarded to Date for Project Period**

- 1,679,005.00

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**14. RECOMMENDED FUTURE SUPPORT**

**Subject to the availability of funds and satisfactory progress of the project:**

- a. Amount of Federal Financial Assistance (from item 11m)
- b. Less Unobligated Balance From Prior Budget Periods
- c. Less Cumulative Prior Award(s) This Budget Period
- d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION

- Total: 217,092.00

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**15. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:**

- 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.

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**17. OBJ CLASS**

<table>
<thead>
<tr>
<th>FY-ACCOUNT NO.</th>
<th>18a. VENDOR CODE</th>
<th>18b. EIN</th>
<th>19. DUNS</th>
<th>20. CONG. DIST.</th>
</tr>
</thead>
<tbody>
<tr>
<td>21. a. 9-9390AVT</td>
<td>b. 006043DP15</td>
<td>c. 93,336</td>
<td>d. DP</td>
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<td>c. 93,336</td>
<td>d. DP</td>
<td>e. $35,000.00</td>
</tr>
</tbody>
</table>

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**GRANTS MANAGEMENT OFFICIAL:**

Stephanie Latham, Team Lead, Grants Management Officer

2939 Flowers Rd. South

TV-2

Atlanta, GA 30333

Phone: 770.488.2917

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**REMARKS**

(Other Terms and Conditions Attached - X Yes No)
### FY-ACCOUNT NO. DOCUMENT NO. CFDA ADMINISTRATIVE CODE AMT ACTION FIN ASST APPROPRIATION

<table>
<thead>
<tr>
<th>FY-ACCOUNT NO.</th>
<th>DOCUMENT NO.</th>
<th>CFDA</th>
<th>ADMINISTRATIVE CODE</th>
<th>AMT ACTION FIN ASST</th>
<th>APPROPRIATION</th>
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</thead>
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<td>d. DP</td>
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<td>c. 93.336</td>
<td>d. DP</td>
<td>e. $11,692.00</td>
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### Direct Assistance

<table>
<thead>
<tr>
<th>BUDGET CATEGORIES</th>
<th>PREVIOUS AMOUNT (A)</th>
<th>AMOUNT THIS ACTION (B)</th>
<th>TOTAL (A + B)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personnel</td>
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<td>$0.00</td>
<td>$0.00</td>
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<tr>
<td>Fringe Benefits</td>
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<td>$0.00</td>
<td>$0.00</td>
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<tr>
<td>Travel</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Equipment</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Supplies</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Contractual</td>
<td>$0.00</td>
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<td>$0.00</td>
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<tr>
<td>Construction</td>
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<tr>
<td>Other</td>
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</tr>
<tr>
<td>Total</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
</tbody>
</table>
AWARD ATTACHMENTS

Missouri Department of Health

1. Terms and Conditions
2. Summary Statement
Supplemented Extension: The purpose of this amendment is to approve a 4 month extension with supplemental funds per the request submitted by your organization dated June 10, 2019. The budget and project period end dates have been extended from March 28, 2020 to July 31, 2020.

Additional funds in the amount of $217,092 are authorized and have been distributed as indicated in the approved budget of this Notice of Award.

Opioid Funds and Availability: Opioid Crisis Funding in the amount of $35,000 is approved for this award for budget period August 1, 2019 through July 31, 2020.

Opioid FFR Reporting: The recipient is required to report separately on the use of opioid funds on the Federal Financial Report (FFR). The recipient must submit an annual FFR as indicated in the Reporting Requirements section of the General Terms and Conditions, and the recipient must attach a document to their FFR submission to reflect expenditures by subaccount.

Opioid Payment Management System Subaccount: Opioid Funding is located in PMS Document Number 006043DP1518OCDP.

Budget Revision Requirement: By September 1, 2019 the recipient must submit a revised budget with a narrative justification based on the approved funding. 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.

Annual Federal Financial Report (FFR SF-425): Annual financial reporting is required every twelve month period. Due to the approved extension period, the final budget period has been extended and an additional annual financial report will be required. A completed FFR SF-425 covering the original final budget period of March 29, 2019 to March 28, 2020 must be submitted by June 28, 2020.

Closeout Requirements: Recipients must submit all closeout reports identified in this section within 90 days of the period of performance end date. The reporting timeframe is the full period of performance. Failure to submit timely and accurate final reports may affect future funding to the organization or awards under the direction of the same Project Director/Principal Investigator (PD/PI).

Final Performance Progress and Evaluation Report (PPER): This report should include the information specified in the NOFO. At a minimum, the report will include the following:

- Statement of progress made toward the achievement of originally stated aims.
- Description of results (positive or negative) considered significant.
- List of publications resulting from the project, with plans, if any, for further publication.

All manuscripts published as a result of the work supported in part or whole by the cooperative grant must be submitted with the performance progress reports.

Final Federal Financial Report (FFR, SF-425): The FFR should only include those funds authorized and actually expended during the timeframe covered by the report. The Final FFR SF-425 is required and must be submitted no later than 90 days after the period of performance end date. The final report must indicate the exact balance of unobligated funds and may not reflect any unliquidated obligations. Should the amount not match with the final expenditures reported to the Department of Health and
Human Services’ PMS, you will be required to update your reports to PMS accordingly. Remaining unobligated funds will be de-obligated and returned to the U.S. Treasury.

Electronic versions of the form can be downloaded at: [https://www.grants.gov/web/grants/forms/post-award-reporting-forms.html#sortby=1](https://www.grants.gov/web/grants/forms/post-award-reporting-forms.html#sortby=1)

**Equipment and Supplies - Tangible Personal Property Report (SF-428):** A completed Tangible Personal Property Report SF-428 and Final Report SF-428B addendum must be submitted, along with any Supplemental Sheet SF-428S detailing all major equipment acquired or furnished under this project with a unit acquisition cost of $5,000 or more. Electronic versions of the forms can be downloaded by visiting: [https://www.grants.gov/web/grants/forms/post-award-reporting-forms.html#sortby=1](https://www.grants.gov/web/grants/forms/post-award-reporting-forms.html#sortby=1)

If no equipment was acquired under an award, a negative report is required.

The recipient must identify each item of equipment that it wishes to retain for continued use in accordance with 45 CFR Part 75. The awarding agency may exercise its rights to require the transfer of equipment purchased under the assistance award. CDC will notify the recipient if transfer to title will be required and provide disposition instruction on all major equipment.

Equipment with a unit acquisition cost of less than $5,000 that is no longer to be used in projects or programs currently or previously sponsored by the Federal Government may be retained, sold, or otherwise disposed of, with no further obligation to the Federal Government.

**GMS Contact:**
Karen Clackum, Grants Management Specialist
Centers for Disease Control and Prevention
Chronic Disease and Birth Defects
2939 Flowers Road South, MS TV-2
Atlanta GA 30341
Telephone: 770-488-2680
Email: KClackum@cdc.gov
Summary Statement

Date Reviewed: 6/18/2019

Grant Number: NU58DP006043

Applicant Organization: Missouri Department of Health and Senior Services

Funds Requested: $248,000

Funds Recommended: $217,092

Recommendation (approved or disapproved): Approved

Human Subjects Issues: N/A

Summary of the Project (provided by applicant)
The Missouri Behavioral Risk Factor Surveillance System (MO BRFSS) has been in existence for over 30 years through a cooperative agreement between the Missouri Department of Health and Senior Services (MO DHSS) and the U.S. Centers for Disease Control and Prevention. MO BRFSS will continue collecting data about the health risks and conditions of Missouri adults aged 18 and older. Each year approximately 7,000 adults are interviewed by trained interviewers via randomly selected residential landline and cell phone numbers. The ACBS consists of follow-up telephone calls to solicit additional information with adults that report having asthma or having a child in the home with asthma.

With the aid of additional CDC funding, the adverse childhood experiences (ACE) module is being administered in 2019 for the first time in Missouri as well as questions on family planning and lung cancer screening among past and current smokers. For data collection year 2020, MO BRFSS is requesting additional funding to increase the number of complete interviews from approximately 7,000 to 10,000. The MO BRFSS program is exploring the investment required to attain a sample size that is adequate for multiple layers of stratification. The goal is to provide a sample size large enough to better assess health indicators and risk factors for target populations to meet the needs of MO DHSS public health programs. This funding will be used to better understand the investment needed to attain that sample size so that the MO BRFSS program can plan for future funding needs. MO BRFSS data are reported annually on the MO DHSS web site at https://health.mo.gov/data/brfss/index.php. Data are used by state and local health agencies and officials to guide decisions about improving the health of Missourians. MO BRFSS is in the very beginning stages of exploring the creation of a dynamic web query tool to house and display BRFSS data in an easy to use and publicly available format.
Summary of Strengths
Missouri has the following successes:
- Missouri BRFSS data was a major source in multiple state-based reports and publications. They include: the Missouri Chronic Disease Burden, the 2019 Missouri Diabetes Report, the Missouri Rural Health Report, the Missouri Oral Health Report, the Missouri State Epidemiological Profile Report, and the Annual BRFSS Key Findings and Data Reports. These reports have been used extensively by the state and other Missouri partners in program planning and evaluation.
- Missouri BRFSS data were used for the following:
  - The Missouri Tobacco Program used current smoking prevalence, e-cigarettes data, secondhand smoke exposure and smokeless tobacco data to complete an evaluation plan and update progress indicators and county tobacco profile templates.
  - Mo Health Net requested smoking prevalence and cancer screening data for a media campaign on prevalence of smoking in the state of Missouri.
  - BRFSS data was used in a Burden of Cardiovascular Disease presentation at the Million Hearts Missouri Conference and also at a MO DHSS Epidemiology Grand Rounds presentation.
  - Cancer screening, cancer survivorship, smoking, weight status, and physical activity data were used by the Comprehensive Cancer Control Program to put together the Missouri Cancer Action Plan Indicators Report.

Summary of Weaknesses / Concerns: None

Budget:
The budget is clearly explained, adequately justified, and is reasonable and consistent with the stated objectives and planned activities to some extent.

Component A: Base Funds
Grantee Requests: $175,000
Program Recommendation: $160,619
Comments:

Component B: Asthma Call-Back Survey
Grantee Requests: $0
Program Recommendation: $9,781
Comments: Revise supplemental budget to reflect Asthma Call-Back funding awarded.
Component C: Adverse Childhood Experience/ACE Module

Grantee Requests: $35,000

Program Recommendation: $35,000

Comments:

Component D: Cancer Survivorship

Grantee Requests: $38,000

Program Recommendation: $11,692

Comments:

Recommendation(s):
The applicant should address any issues of concern noted in the Weaknesses / Concerns or Budget Sections and / or as follows:

- Revise supplemental budget to reflect Asthma Call-Back funding awarded.

Audrey K Williams  6/27/19
Project Officers Signature  Date: