



Recipient Information

1. Recipient Name

MISSOURI DEPARTMENT OF HEALTH &
SENIOR SERVICES
920 Wildwood Dr
Health and Senior Services
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

Ms. Rikae Melzer
rikae.melzer@health.mo.gov
573-751-6486

8. Authorized Official

Ms. Marcia A Mahaney
Director
Marcia.Mahaney@health.mo.gov
573-751-6014

Federal Agency Information

CDC Office of Financial Resources

9. Awarding Agency Contact Information

Ms. Rose Mosley
GMS
RMosley@cdc.gov
770-488-2450

10. Program Official Contact Information

Graylin Mitchell
Program Officer
gnm0@cdc.gov
404-498-6522

Federal Award Information

11. Award Number

6 NU90TP922019-05-01

12. Unique Federal Award Identification Number (FAIN)

NU90TP922019

13. Statutory Authority

319C-1 of the Public Health Service (PHS) Act (47 USC 247d-3a)

14. Federal Award Project Title

MISSOURI PHEP COOPERATIVE AGREEMENT

15. Assistance Listing Number

93.069

16. Assistance Listing Program Title

Public Health Emergency Preparedness

17. Award Action Type

Change PI/PD

18. Is the Award R&D?

No

Summary Federal Award Financial Information

19. Budget Period Start Date	07/01/2023	- End Date	06/30/2024
20. Total Amount of Federal Funds Obligated by this Action			\$0.00
20a. Direct Cost Amount			\$0.00
20b. Indirect Cost Amount			\$0.00
21. Authorized Carryover			\$0.00
22. Offset			\$0.00
23. Total Amount of Federal Funds Obligated this budget period			\$11,155,537.00
24. Total Approved Cost Sharing or Matching, where applicable			\$1,116,837.00
25. Total Federal and Non-Federal Approved this Budget Period			\$12,272,374.00
26. Period of Performance Start Date	07/01/2019	- End Date	06/30/2024
27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance			\$62,849,607.00

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer – Signature

Mr. Damond Barnes
Grants Management Officer

30. Remarks



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Notice of Award

Award# 6 NU90TP922019-05-01

FAIN# NU90TP922019

Federal Award Date: 04/18/2024

Recipient Information	
Recipient Name MISSOURI DEPARTMENT OF HEALTH & SENIOR SERVICES 920 Wildwood Dr Health and Senior Services 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 Cooperative Agreement	
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	\$1,703,892.00
b. Fringe Benefits	\$1,024,745.00
c. Total Personnel Costs	\$2,728,637.00
d. Equipment	\$0.00
e. Supplies	\$126,714.00
f. Travel	\$64,411.00
g. Construction	\$0.00
h. Other	\$356,784.00
i. Contractual	\$7,385,108.00
j. TOTAL DIRECT COSTS	\$10,661,654.00
k. INDIRECT COSTS	\$493,883.00
l. TOTAL APPROVED BUDGET	\$11,155,537.00
m. Federal Share	\$11,155,537.00
n. Non-Federal Share	\$1,116,837.00

34. Accounting Classification Codes						
FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	CFDA NO.	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
3-921027R	19NU90TP922019	TP	41.51	93.069	\$0.00	75-23-0956
3-9213367	19NU90TP922019	TP	41.51	93.069	\$0.00	75-23-0956



DEPARTMENT OF HEALTH AND HUMAN SERVICES Notice of Award

Centers for Disease Control and Prevention

Award# 6 NU90TP922019-05-01

FAIN# NU90TP922019

Federal Award Date: 04/18/2024

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 NU90TP922019-05-01

1. Terms and Conditions

TERMS AND CONDITIONS OF AWARD

Key Personnel: The purpose of this amendment is to approve the Principle Investigator/Program Director change to Ms. Rikae Melzer. This is in response to the request submitted by your organization dated March 20, 2024.

Please be advised that the recipient must exercise proper stewardship over Federal funds by ensuring that all costs charged to their cooperative agreement are allowable, allocable, and reasonable.

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.