1. DATE ISSUED *MM/DD/YYYY* 01/14/2020	**1a. SUPERSEDES AWARD NOTICE dated** 10/31/2019 except that any additions or restrictions previously imposed remain in effect unless specifically rescinded
2. CFDA No. 93.314 - Early Hearing Detection and Intervention Information System (EHDI-IS) Surveillance Program	
3. ASSISTANCE TYPE Cooperative Agreement	
4. GRANT NO. 6 NUR3DD000064-03-03 **Formerly**	**5. TYPE OF AWARD** Other
4a. FAIN NUR3DD000064	**5a. ACTION TYPE** Post Award Amendment
6. PROJECT PERIOD *MM/DD/YYYY* **From** 07/01/2017	**Through** *MM/DD/YYYY* 06/30/2020
7. BUDGET PERIOD *MM/DD/YYYY* **From** 07/01/2019	**Through** *MM/DD/YYYY* 06/30/2020

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

CDC Office of Financial Resources

2939 Brandywine Road
Atlanta, GA 30341

NOTICE OF AWARD

AUTHORIZATION (Legislation/Regulations)
Sec 399M(b)(1) PHSA [42U.S.C. 280g-1(b)(1)]

8. TITLE OF PROJECT (OR PROGRAM)
SFY 2019 Early Hearing & Intervention Information System

9a. GRANTEE NAME AND ADDRESS
HEALTH AND SENIOR SERVICES, MISSOURI DEPARTMENT OF
920 WILDWOOD DR
Missouri Dept. of Health and Senior Services
JEFFERSON CITY, MO 65109-5796

9b. GRANTEE PROJECT DIRECTOR
Ms. Catherine Harbison
920 WILDWOOD DR
JEFFERSON CITY, MO 65109-5796
Phone: 573-751-6473

10a. GRANTEE AUTHORIZING OFFICIAL
Ms. Marcia A Mahaney
920 Wildwood Drive
Division of Administration
Jefferson City, MO 65109-5796
Phone: 573-751-6014

10b. FEDERAL PROJECT OFFICER
Stephanie Henry
1600 Clifton Rd
Atlanta, GA 30333
Phone: 404-498-3809

ALL AMOUNTS ARE SHOWN IN USD

11. 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	I	
a. Salaries and Wages		57,014.00
b. Fringe Benefits		28,945.00
c. Total Personnel Costs		85,959.00
d. Equipment		0.00
e. Supplies		0.00
f. Travel		945.00
g. Construction		0.00
h. Other		2,349.00
i. Contractual		0.00
j. TOTAL DIRECT COSTS		89,253.00
k. INDIRECT COSTS		18,313.00
l. **TOTAL APPROVED BUDGET**		107,566.00
m. Federal Share		107,566.00
n. Non-Federal Share		0.00

12. AWARD COMPUTATION

a. Amount of Federal Financial Assistance (from item 11m)	107,566.00
b. Less Unobligated Balance From Prior Budget Periods	5,407.00
c. Less Cumulative Prior Award(s) This Budget Period	102,159.00
d. **AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION**	0.00
13. Total Federal Funds Awarded to Date for Project Period	306,477.00

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

YEAR	TOTAL DIRECT COSTS	YEAR	TOTAL DIRECT COSTS
a. 4		d. 7	
b. 5		e. 8	
c. 6		f. 9	

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)*

b

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 - [X] Yes [ ] No)

GRANTS MANAGEMENT OFFICIAL:
Kathy Raible
2920 Brandywine Rd
Mailstop E09
Atlanta, GA 30341-5539
Phone: 770-488-2045

17. OBJ CLASS 41.51	**18a. VENDOR CODE** [redacted]	**18b. EIN** [redacted]	**19. DUNS** 878092600	**20. CONG. DIST.** 03

FY-ACCOUNT NO.	DOCUMENT NO.	CFDA	ADMINISTRATIVE CODE	AMT ACTION FIN ASST	APPROPRIATION
21. a. 9-939ZRCP	b. 17NUR3DD000064	c. 93.314	d. DD	e. $0.00	f. 75-19-0958
22. a.	b.	c.	d.	e.	f.
23. a.	b.	c.	d.	e.	f.

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

Federal Financial Report Cycle			
Reporting Period Start Date	Reporting Period End Date	Reporting Type	Reporting Period Due Date
07/01/2017	06/30/2018	Annual	09/28/2018
07/01/2018	06/30/2019	Annual	09/28/2019
07/01/2019	06/30/2020	Annual	09/28/2020

AWARD ATTACHMENTS

1. Terms and conditions- AO change

ADDITIONAL TERMS AND CONDITIONS OF AWARD

Key Personnel: The purpose of this amendment is to approve the change of the Authorizing Official from Tonya Loucks to Marcia Mahaney. This is in response to the request submitted by your organization dated December 16, 2019.

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.

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 Offi02cer

PLEASE REFERENCE THE GRANT NUMBER ON ALL CORRESPONDENCE

OGS Contact:

Grants Management Specialist Contact:
LaToya Donaldson
Centers for Disease Control and Prevention
Chronic Disease and Birth Defects Services Branch
2939 Flowers Road South, Atlanta, GA 30341
Email: ygj0@cdc.gov **Phone:** 770-488-1227

Grants Management Officer Contact:
Kathy Raible
Centers for Disease Control and Prevention
Chronic Disease and Birth Defects Services Branch
2939 Flowers Road South, Atlanta, GA 30341
Email: kcr8@cdc.gov **Phone:** 770-488-2045