



Recipient Information

1. Recipient Name

HEALTH AND SENIOR SERVICES, MISSOURI
DEPARTMENT OF
920 Wildwood Dr
Health and Senior Services
Jefferson City, MO 65109-5796

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

7. Project Director or Principal Investigator

Mr. JOHN EDWARD BOS
Assistant Bureau Chief
John.Bos@health.mo.gov
573-751-6113

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

Romero Stokes
lnj0@cdc.gov
770-488-2075

10. Program Official Contact Information

Dawn Tuckey
dmt1@cdc.gov
404-639-8120

Federal Award Information

11. Award Number

5 NU52PS910202-03-00

12. Unique Federal Award Identification Number (FAIN)

NU52PS910202

13. Statutory Authority

317(k)(2) and 318 of the Public Health Services Act, 42 U.S.C. sections 247 (k)(2) and 247c, as amended

14. Federal Award Project Title

Tuberculosis Elimination and Laboratory in Missouri

15. Assistance Listing Number

93.116

16. Assistance Listing Program Title

Project Grants and Cooperative Agreements for Tuberculosis Control Programs

17. Award Action Type

Non-Competing Continuation

18. Is the Award R&D?

No

Summary Federal Award Financial Information

19. Budget Period Start Date	01/01/2022	- End Date	12/31/2022
20. Total Amount of Federal Funds Obligated by this Action			\$147,117.00
20a. Direct Cost Amount			\$136,883.00
20b. Indirect Cost Amount			\$10,234.00
21. Authorized Carryover			\$0.00
22. Offset			\$0.00
23. Total Amount of Federal Funds Obligated this budget period			\$0.00
24. Total Approved Cost Sharing or Matching, where applicable			\$0.00
25. Total Federal and Non-Federal Approved this Budget Period			\$147,117.00
26. Project Period Start Date	01/01/2020	- End Date	12/31/2024
27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period			Not Available

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Terrian Dixon
Grants Management Officer

30. Remarks

Non-Competing Continuation: Financial Assistance in the amount of \$147,117



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Recipient Name HEALTH AND SENIOR SERVICES, MISSOURI DEPARTMENT OF 920 Wildwood Dr Health and Senior Services Jefferson City, MO 65109-5796
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 Not Available
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	\$32,921.00
b. Fringe Benefits	\$20,942.00
c. Total Personnel Costs	\$53,863.00
d. Equipment	\$0.00
e. Supplies	\$6,446.00
f. Travel	\$3,897.00
g. Construction	\$0.00
h. Other	\$2,746.00
i. Contractual	\$69,931.00
j. TOTAL DIRECT COSTS	\$136,883.00
k. INDIRECT COSTS	\$10,234.00
l. TOTAL APPROVED BUDGET	\$147,117.00
m. Federal Share	\$147,117.00
n. Non-Federal Share	\$0.00

34. Accounting Classification Codes

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
0-9211183	20NU52PS910202	PS	41.51	\$0.00	75-20-0950
0-9213485	20NU52PS910202	PS	41.51	\$0.00	75-20-0950
0-9214095	20NU52PS910202	PS	41.51	\$0.00	75-20-0950
1-9211183	20NU52PS910202	PS	41.51	\$0.00	75-21-0950
1-9213485	20NU52PS910202	PS	41.51	\$0.00	75-21-0950
1-9214095	20NU52PS910202	PS	41.51	\$0.00	75-21-0950
2-9211183	20NU52PS910202	PS	41.51	\$18,554.00	75-22-0950
2-9213485	20NU52PS910202	PS	41.51	\$111,002.00	75-22-0950
2-9214095	20NU52PS910202	PS	41.51	\$17,561.00	75-22-0950



DEPARTMENT OF HEALTH AND HUMAN SERVICES Notice of Award

Centers for Disease Control and Prevention

Award# 5 NU52PS910202-03-00

FAIN# NU52PS910202

Federal Award Date: 12/16/2021

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

HEALTH AND SENIOR SERVICES, MISSOURI DEPARTMENT OF

5 NU52PS910202-03-00

1. Terms and Conditions

AWARD INFORMATION

Incorporation: In addition to the federal laws, regulations, policies, and CDC General Terms and Conditions for Non-research awards at <https://www.cdc.gov/grants/federal-regulations-policies/index.html>, the Centers for Disease Control and Prevention (CDC) hereby incorporates Notice of Funding Opportunity (NOFO) number **CDC-RFA- PS20-2001**, entitled ***Tuberculosis Elimination and Laboratory Cooperative Agreement***, and application dated **September 13, 2021**, as may be amended, which are hereby made a part of this Non-research award, hereinafter referred to as the Notice of Award (NoA).

Approved Funding: Funding in the amount of **\$588,468** is approved for the Year **03** budget period, which is **January 1, 2022** through **December 31, 2022**. All future year funding will be based on satisfactory programmatic progress and the availability of funds.

The federal award amount is subject to adjustment based on total allowable costs incurred and/or the value of any third party in-kind contribution when applicable.

Available Funding: The CDC is operating under a continuing resolution; as a result, the total available funding for the **Fiscal Year (FY) 03** budget period is contingent upon the enactment of applicable appropriation bill(s). Funding in the amount of **\$147,117** in Financial Assistance (FA) is awarded on this NoA. The remainder of the budget period Approved Funding amount is subject to the availability of funds.

<u>Funding</u>	<u>Amount</u>
Base P&C Prevention & Control (P&C)	\$111,002
Base Human Resource Development (HRD)	\$17,561
Base Public Health Laboratory Strengthening	\$18,555

Note: Refer to the Payment Information section for Payment Management System (PMS) subaccount information.

HHS Non-Discrimination Legal Requirements for Recipients of Federal Financial

Assistance: The purpose of this Notice of Award amendment is to notify you that the Centers for Disease Control and Prevention (CDC) incorporated Department of Health and Human Services (HHS) non-discrimination legal requirements for recipients of federal financial assistance into the CDC General Terms and Conditions within your Notice of Award. The new requirements are effective immediately. [The requirements are in](#) the General Requirements section of the General Terms and Conditions, and are also listed below.

You must administer your project in compliance with federal civil rights laws that prohibit discrimination on the basis of race, color, national origin, disability, age and, in some circumstances, religion, conscience, and sex (including gender identity, sexual orientation, and pregnancy). This includes taking reasonable steps to provide meaningful access to persons with

limited English proficiency and providing programs that are accessible to and usable by persons with disabilities. The HHS Office for Civil Rights provides guidance on complying with civil rights laws enforced by HHS. See <https://www.hhs.gov/civil-rights/for-providers/provider-obligations/index.html> and <https://www.hhs.gov/civil-rights/for-individuals/nondiscrimination/index.html>.

- You must take reasonable steps to ensure that your project provides meaningful access to persons with limited English proficiency. For guidance on meeting your legal obligation to take reasonable steps to ensure meaningful access to your programs or activities by limited English proficient individuals, see <https://www.hhs.gov/civil-rights/for-individuals/special-topics/limited-english-proficiency/fact-sheet-guidance/index.html> and <https://www.lep.gov/>.
- For information on your specific legal obligations for serving qualified individuals with disabilities, including providing program access, reasonable modifications, and taking appropriate steps to provide effective communication, see <http://www.hhs.gov/ocr/civilrights/understanding/disability/index.html>.
- HHS funded health and education programs must be administered in an environment free of sexual harassment, see <https://www.hhs.gov/civil-rights/for-individuals/sex-discrimination/index.html>.
- For guidance on administering your project in compliance with applicable federal religious nondiscrimination laws and applicable federal conscience protection and associated anti-discrimination laws, see <https://www.hhs.gov/conscience/conscience-protections/index.html> and <https://www.hhs.gov/conscience/religious-freedom/index.html>.

Financial Assistance Mechanism: Cooperative Agreement

Substantial Involvement by CDC: This is a cooperative agreement and CDC will have substantial programmatic involvement after the award is made. Substantial involvement is in addition to all post-award monitoring, technical assistance, and performance reviews undertaken in the normal course of stewardship of federal funds.

CDC program staff will assist, coordinate, or participate in carrying out effort under the award, and recipients agree to the responsibilities therein, as detailed in the NOFO.

In a cooperative agreement, CDC staff are substantially involved in the program activities, above and beyond routine grant monitoring. CDC activities for this program are as follows:

Prevention and Control (P&C)

CDC activities for this component are as follows:

- Providing assistance with collaborative activities with other services and organizations (e.g., Centers of Excellence [COEs], private providers, community health centers [CHCs], federally qualified health centers [FQHCs]).
- Providing consultation through the CDC TB Health Equity Workgroup on initiating and Maintaining activities to address health equity issues.

- Providing programmatic consultation and technical assistance in the development and implementation of new diagnostics and treatment services pertaining to TB control and prevention and to expand the reach of the population served.
- Providing technical assistance and consultation for empirical data collection in diverse settings to better define economic and epidemiologic context of TB control.
- Providing technical assistance to identify and notify areas about large outbreaks.
- Following up with programs to collect standardized public health information for clustered and non-genotyped cases and assess need for supplemental assistance.
- Collaborating with TB Program Evaluation Network (TB PEN) Steering Committee to incorporating any emerging, promising, and/or best practices to increase transparency, accountability, and adaption of these practices.
- Providing CDC or other subject matter expertise, technical assistance to assist recipient in areas requested such as surveillance, information technology, informatics, PE, program science approaches to strategy implementation, community engagement, and collaboration to advance program activities to achieve outcomes.
- Supporting and collaborating to compile and publish accomplishments, performance measures, and lessons learned during the project period.

Human Resource Development (HRD)

CDC activities for this component are as follows:

- Providing technical assistance, as needed in assessing and prioritizing training and education needs and in planning, implementing, and evaluating training and education activities.
- Providing technical assistance as needed in developing a program-specific Training and Human Resource Development Plan; assistance can be provided in-person at the focal
- Point meeting at the biennial TB ETN conference or via consultation with CDC after award of funds.
- Conducting a focal point meeting at the biennial TB ETN/TB PEN conference.
- Directing the COEs to coordinate regional on-site training courses (e.g., TB Contact Investigation Interviewing Skills course, Effective TB Interviewing for Contact Investigation course, or Program Managers course) in conjunction with designated focal points, and provide technical assistance as needed for development of program specific training activities.

Public Health Laboratory Strengthening

CDC activities for this component are as follows:

- Contribute to the improvement of public health laboratory performance by providing technical assistance.
- Identify training needs and collaborate with partners to develop courses, webinars

- workshops, and training materials for distribution to public health laboratories.
- Provide consultation for the development and implementation of laboratory performance Indicators and data analysis methods for laboratory internal quality assurance programs.
- Assist in the development and dissemination of best practice guidelines and recommendations for the implementation of cost-effective testing algorithms.
- Support laboratory performance evaluation by providing a biennial aggregate report of workload data and TAT performance measures from laboratories receiving funding assistance to be used to compare one's laboratory to national TB laboratory data.

Budget Revision Requirement: By **February 01, 2022** the recipient must submit a revised budget with a narrative justification. ***The revised budget should be submitted via Grant Solutions as a prior approval, amendment type "Budget Revision"***. 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. Please address the following:

- **Personnel:** Please provide additional information regarding plans and timeline to fill vacant position (Associate Epidemiologist)
- **Contractual:** Please provide additional information regarding staff participating in travel - who, where, etc.; Please provide a comprehensive list of Participating "Local Public Health Agencies" and "Diagnostic Services Providers" funded under this award;

Expanded Authority: The recipient is permitted the following expanded authority in the administration of the award.

- Carryover of unobligated balances from one budget period to a subsequent budget period. Unobligated funds may be used for purposes within the scope of the project as originally approved. Recipients will report use, or intended use, of unobligated funds in Section 12 "Remarks" of the annual Federal Financial Report. If the GMO determines that some or all of the unobligated funds are not necessary to complete the project, the GMO may restrict the recipient's authority to automatically carry over unobligated balances in the future, use the balance to reduce or offset CDC funding for a subsequent budget period, or use a combination of these actions.

Program Income: Any program income generated under this grant or cooperative agreement will be used in accordance with the Addition alternative.

Addition alternative: Under this alternative, program income is added to the funds committed to the project/program and is used to further eligible project/program objectives.

Note: *The disposition of program income must have written prior approval from the GMO.*

FUNDING RESTRICTIONS AND LIMITATIONS

Notice of Funding Opportunity (NOFO) Restrictions:

Restrictions that must be considered while planning the programs and writing the budget are:

- Recipients may not use funds for clinical care except as allowed by law.
- Recipients may use funds only for reasonable program purposes, including personnel, travel, supplies, and services.
- Generally, recipients may not use funds to purchase furniture or equipment. Any such proposed spending must be clearly identified in the budget.
- Reimbursement of pre-award costs generally is not allowed, unless the CDC provides written approval to the recipient.
- Other than for normal and recognized executive-legislative relationships, no funds may be used for:
 - publicity or propaganda purposes, for the preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body
 - the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before any legislative body
- **See Additional Requirement (AR) 12** for detailed guidance on this prohibition and **additional guidance on lobbying for CDC recipients.**
- The direct and primary recipient in a cooperative agreement program must perform a substantial role in carrying out project outcomes and not merely serve as a conduit for an award to another party or provider who is ineligible.
- In accordance with the United States Protecting Life in Global Health Assistance policy, all non-governmental organization (NGO) applicants acknowledge that foreign NGOs that receive funds provided through this award, either as a prime recipient or subrecipient, are strictly prohibited, regardless of the source of funds, from performing abortions as a method of family planning or engaging in any activity that promotes abortion as a method of family planning, or to provide financial support to any other foreign non-governmental organization that conducts such activities. See Additional Requirement (AR) 35 for applicability (<https://www.cdc.gov/grants/additionalrequirements/ar-35.html>).
- Recipients may not use funds for in-patient clinical care; out-patient services are allowed (e.g., tuberculin skin testing, chest radiography, medical evaluation, treatment)
- Recipients may not use funds to supplant state or local health department funds
- Recipients may not use funds to purchase drugs for treatment
- Emphasis must be given to directing the majority of funds to core TB control front-line activities, such as TB case management, targeted testing and treatment of LTBI, completion of treatment, contact investigation, and outreach activities with strong emphasis on using conventional directly observed therapy (DOT), or eDOT

- Recipients may also use funds for integration of services when it is intended to specifically reduce TB transmission or improve TB screening, testing or treatment in populations disproportionately affected by other infections or comorbidities including diabetes mellitus, hepatitis B or C virus, STDs, and HIV

Restrictions for public health laboratories:

- Laboratories performing first-line DST for < 50 patient isolates/year should consider referral of isolates to a reference laboratory for testing such as the National PHL DST Reference Center. https://www.aphl.org/programs/infectious_disease/tuberculosis/Pages/TB-DST.aspx
- Laboratories reporting for < 50 patient isolates/year may not request funding support for reagents and supplies associated with DST. Requests for these items will be denied. Laboratories within this category may request the use of funds for shipping supplies and costs for access to referral services.

Indirect Costs: Indirect costs are approved based on the negotiated indirect cost rate agreement dated **3/30/2021**, which calculates indirect costs as follows, a **Fixed** is approved at a rate of **19%** of the base, which includes, direct salaries and wages including all fringe benefits.. The effective dates of this indirect cost rate are from **7/1/2021** to **6/30/2022**.

REPORTING REQUIREMENTS

Annual Federal Financial Report (FFR, SF-425): The Annual Federal Financial Report (FFR) SF-425 is required and must be submitted to **Payment Management System** no later than 90 days after the end of the budget period. The FFR for this budget period is due by **March 31, 2023**. Reporting timeframe is **January 1, 2022** through **December 31, 2022**. The FFR should only include those funds authorized and disbursed during the timeframe covered by the report.

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, the recipient is required to contact the Grants Officer listed in the contacts section of this notice before the due date.

Annual Performance Progress Reporting: The Annual Performance Progress and Monitoring Report (is due no later than 120 days prior to the end of the budget period, **September 01, 2022**, and serves as the continuation application for the follow-on budget period. This report should include the information specified in the solicitation from the GMS/GMO via www.grantsolutions.gov .

Performance Progress and Monitoring: Performance information collection initiated under this grant/cooperative agreement has been approved by the Office of Management and Budget under **OMB Number 0920-1132, "Performance Progress and Monitoring Report", Expiration Date 10/31/2022**. The components of the PPMR are available for download at: <https://www.cdc.gov/grants/already-have-grant/Reporting.html> .

Required Disclosures for Federal Awardee Performance and Integrity Information System (FAPIIS): Consistent with 45 CFR 75.113, applicants and recipients must disclose in a timely manner, in writing to the CDC, with a copy to the HHS Office of Inspector General (OIG), all

information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Subrecipients must disclose, in a timely manner in writing to the prime recipient (pass through entity) and the HHS OIG, all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Disclosures must be sent in writing to the CDC and to the HHS OIG at the following addresses:

CDC, Office of Grants Services
Romero Stokes, Grants Management Specialist
Centers for Disease Control and Prevention
Prevention Infectious Disease Services
2939 Flowers Road, MS TV-2
Atlanta, GA 30341
Email: Inj0@cdc.gov (Include "Mandatory Grant Disclosures" in subject line)
AND

U.S. Department of Health and Human Services
Office of the Inspector General
ATTN: Mandatory Grant Disclosures, Intake Coordinator
330 Independence Avenue, SW
Cohen Building, Room 5527
Washington, DC 20201

Fax: (202)-205-0604 (Include "Mandatory Grant Disclosures" in subject line) or
Email: MandatoryGranteeDisclosures@oig.hhs.gov

Recipients must include this mandatory disclosure requirement in all subawards and contracts under this award.

Failure to make required disclosures can result in any of the remedies described in 45 CFR 75.371. Remedies for noncompliance, including suspension or debarment (See 2 CFR parts 180 and 376, and 31 U.S.C. 3321).

CDC is required to report any termination of a federal award prior to the end of the period of performance due to material failure to comply with the terms and conditions of this award in the OMB-designated integrity and performance system accessible through SAM (currently FAPIIS). (45 CFR 75.372(b)) CDC must also notify the recipient if the federal award is terminated for failure to comply with the federal statutes, regulations, or terms and conditions of the federal award. (45 CFR 75.373(b))

PROGRAM OR FUNDING GENERAL REQUIREMENTS

HIV Program Review Panel Requirement: All written materials, audiovisual materials, pictorials, questionnaires, survey instruments, websites, educational curricula and other relevant program materials must be reviewed and approved by an established program review panel. A list of reviewed materials and approval dates must be submitted to the CDC Grants Management Specialist identified in the CDC Roles and Responsibilities section of this NoA.

Prior Approval: All requests, which require prior approval, must bear the signature of the authorized organization representative. The recipient must submit these requests by **September 01, 2022**. Additionally, any requests involving funding issues must include an itemized budget

and a narrative justification of the request.

The following types of requests require prior approval:

- Lift funding restriction
- Significant redirection of funds (i.e. cumulative changes of 25% of total award)
- Change in scope
- Implement a new activity or enter into a sub-award that is not specified in the approved budget
- Apply for supplemental funds
- Change in key personnel
- Extensions to period of performance

Templates for prior approval requests can be found at:

<http://www.cdc.gov/grants/alreadyhavegrant/priorapprovalrequests.html>

Templates for prior approval requests can be found at:

<http://www.cdc.gov/grants/alreadyhavegrant/priorapprovalrequests.html>.

Additional information on the electronic grants administration system CDC non-research awards utilize, Grants Solutions, can be found at:

<https://www.cdc.gov/grants/grantsolutions/index.html>.

Key Personnel: In accordance with 45 CFR Part 75.308, CDC recipients must obtain prior approval from CDC for (1) change in the project director/principal investigator, business official, authorized organizational representative or other key persons specified in the NOFO, application or award document; and (2) the disengagement from the project for more than three months, or a 25 percent reduction in time devoted to the project, by the approved Project Director or Principal Investigator.

PAYMENT INFORMATION

The HHS Office of the Inspector General (OIG) maintains a toll-free number (1-800-HHS-TIPS [1-800-447-8477]) for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. Information also may be submitted by e-mail to hhstips@oig.hhs.gov or by mail to Office of the Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington DC 20201. Such reports are treated as sensitive material and submitters may decline to give their names if they choose to remain anonymous.

Payment Management System Subaccount: Funds awarded in support of approved activities have been obligated in a subaccount in the PMS, herein identified as the “**P Account**”. Funds must be used in support of approved activities in the NOFO and the approved application.

The grant document number identified on **page 2, item 34** of the Notice of Award must be known in order to draw down funds.

CDC Staff Contacts Information is listed on page 1 of the NoA

Grants Management Specialist: The GMS is the federal staff member responsible for the day-to-day management of grants and cooperative agreements. The GMS is the primary contact of recipients for business and administrative matters pertinent to grant awards.

Program/Project Officer: The PO is the federal official responsible for monitoring the programmatic, scientific, and/or technical aspects of grants and cooperative agreements, as well as contributing to the effort of the award under cooperative agreements.

Grants Management Officer: The GMO is the federal official responsible for the business and other non-programmatic aspects of grant awards. The GMO is the only official authorized to obligate federal funds and is responsible for signing the NoA, including revisions to the NoA that change the terms and conditions. The GMO serves as the counterpart to the business officer of the recipient organization.