



Recipient Information

1. Recipient Name

MISSOURI DEPARTMENT OF HEALTH &
SENIOR SERVICES
920 WILDWOOD DR
-DUP
JBEFFERSON CITY, MO 65109-5796
[NO DATA]

2. Congressional District of Recipient

03

3. Payment System Identifier (ID)

1446000987B7

4. Employer Identification Number (EIN)

446000987

5. Data Universal Numbering System (DUNS)

878092600

6. Recipient's Unique Entity Identifier (UEI)

UETLXV8NG8F4

7. Project Director or Principal Investigator

Mindy Ulstad
Program Manager
mindy.ulstad@health.mo.gov
573-526-8534

8. Authorized Official

Mrs. Marcia Mahaney
Director, Division of Administration
marcia.mahaney@health.mo.gov
573-751-6014

Federal Agency Information

CIP - MIPPA Project Grants

9. Awarding Agency Contact Information

Yi-Hsin Yan
Program & Management Analyst
yi-hsin.yan@acl.hhs.gov
202 795 7474

10. Program Official Contact Information

Chiquita O'Cain
Aging Services Program Specialist
katherine.glendening@acl.hhs.gov
202-795-7350

Federal Award Information

11. Award Number

2101MOMIAA-02

12. Unique Federal Award Identification Number (FAIN)

2101MOMIAA

13. Statutory Authority

The Medicare Improvements for Patients and Providers Act of 2008 -- Section 119, Public Law (PL) 110-275 as amended by the Patient Protection and Affordable Care Act of 2010 (Affordable Care Act), reauthorized

14. Federal Award Project Title

FY2021 MIPPA: Priority 2 for AAAs

15. Assistance Listing Number

93.071

16. Assistance Listing Program Title

Medicare Enrollment Assistance Program

17. Award Action Type

Project Period Closeout

18. Is the Award R&D?

No

Summary Federal Award Financial Information

19. Budget Period Start Date	09/01/2021	- End Date	08/31/2022
20. Total Amount of Federal Funds Obligated by this Action	(\$48,582.80)		
20a. Direct Cost Amount			
20b. Indirect Cost Amount			
21. Authorized Carryover			
22. Offset			
23. Total Amount of Federal Funds Obligated this budget period	\$346,079.00		
24. Total Approved Cost Sharing or Matching, where applicable	\$0.00		
25. Total Federal and Non-Federal Approved this Budget Period	\$297,496.20		
26. Period of Performance Start Date	09/01/2021	- End Date	08/31/2022
27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance	\$297,496.20		

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Aaron Taylor
Deputy Administrator

30. Remarks

This award action closes this grant award in both Grant Solutions and PMS. Questions regarding this action should be directed to the assigned ACL grants management personnel listed in Box 9 on the Notice of Award. Grantees are advised to maintain award records in accordance with 45 CFR 75.361.



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Recipient Name MISSOURI DEPARTMENT OF HEALTH & SENIOR SERVICES 920 WILDWOOD DR -DUP JEFFERSON CITY, MO 65109-5796 [NO DATA]	
Congressional District of Recipient 03	
Payment Account Number and Type 1446000987B7	
Employer Identification Number (EIN) Data 446000987	
Universal Numbering System (DUNS) 878092600	
Recipient's Unique Entity Identifier (UEI) UETLXV8NG8F4	
31. Assistance Type Formula grant	
32. Type of Award Mandatory	

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	\$0.00
b. Fringe Benefits	\$0.00
c. Total Personnel Costs	\$0.00
d. Equipment	\$0.00
e. Supplies	\$0.00
f. Travel	\$0.00
g. Construction	\$0.00
h. Other	\$297,496.20
i. Contractual	\$0.00
j. TOTAL DIRECT COSTS	\$297,496.20
k. INDIRECT COSTS	\$0.00
l. TOTAL APPROVED BUDGET	\$297,496.20
m. Federal Share	\$297,496.20
n. Non-Federal Share	\$0.00

34. Accounting Classification Codes						
FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	CFDA NO.	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
1-299999C	2101MOMIAA	AoD	41.15	93.071	(\$48,582.80)	75-X-0142