



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Notice of Award

Award# 6 NU17CE925004-03-04

FAIN# NU17CE925004

Federal Award Date: 12/07/2022

Recipient Information

1. Recipient Name

HEALTH AND SENIOR SERVICES, MISSOURI
DEPARTMENT OF
920 WILDWOOD DR
JEFFERSON 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

Ms. Lynn Smith
lynn.smith@health.mo.gov
573-526-4862

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

Darryl Mitchell
dvm1@cdc.gov
770-488-2747

10. Program Official Contact Information

Ms. Jocelyn Wheaton
Project Officer
kzw9@cdc.gov
404-639-1048

Federal Award Information

11. Award Number

6 NU17CE925004-03-04

12. Unique Federal Award Identification Number (FAIN)

NU17CE925004

13. Statutory Authority

Section 311(c)(1) of the PHS Act (42 USC § 243(c)(1))

14. Federal Award Project Title

Overdose Data in Action - NCIPC

15. Assistance Listing Number

93.136

16. Assistance Listing Program Title

Injury Prevention and Control Research and State and Community Based Programs

17. Award Action Type

Notification of a Contractor or Consultant

18. Is the Award R&D?

No

Summary Federal Award Financial Information

Table with 2 columns: Item Number and Amount. Rows include Budget Period Start Date, Total Amount of Federal Funds Obligated, Authorized Carryover, Offset, Total Amount of Federal Funds Obligated this budget period, Total Approved Cost Sharing or Matching, Total Federal and Non-Federal Approved this Budget Period, Period of Performance Start Date, and Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance.

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Ms. Stephanie Latham
Team Lead, Grants Management Officer

30. Remarks



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

<p>33. Approved Budget (Excludes Direct Assistance)</p>	
<p>I. Financial Assistance from the Federal Awarding Agency Only</p>	
<p>II. Total project costs including grant funds and all other financial participation</p>	
a. Salaries and Wages	\$1,226,462.00
b. Fringe Benefits	\$754,170.00
c. Total Personnel Costs	\$1,980,632.00
d. Equipment	\$0.00
e. Supplies	\$92,910.00
f. Travel	\$148,115.00
g. Construction	\$0.00
h. Other	\$360,539.00
i. Contractual	\$6,729,808.00
j. TOTAL DIRECT COSTS	\$9,312,004.00
k. INDIRECT COSTS	\$376,340.00
l. TOTAL APPROVED BUDGET	\$9,688,344.00
m. Federal Share	\$9,688,344.00
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
2-9390BX6	19NU17CE925004OPCE	CE	41.51	93.136	\$0.00	75-22-0952



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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

6 NU17CE925004-03-04

1. Terms and Conditions

ADDITIONAL TERMS AND CONDITIONS OF AWARD

Contract: The purpose of this amended Notice of Award is to acknowledge receipt of all required elements for the contract below. This approval is in response to the request submitted by your organization dated November 8, 2022.

Contractor 1: Missouri Hospital Association

Contractor 2: St. Louis University