



Recipient Information

1. Recipient Name

Missouri Department of Health
PO BOX 570
MISSOURI DEPARTMENT OF HEALTH AND
SENIOR SERVICES
Jefferson City, MO 65102-0570

2. Congressional District of Recipient

04

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

Ms. Christine Smith
CO - Principal Investigator
christine.smith@health.mo.gov
573-751-6439

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. Valerie McCloud
Grants Management Specialist
fyq4@cdc.gov
770.488.4790

10. Program Official Contact Information

David Butterworth
Public Health Analyst/Project Officer
Division of Viral Hepatitis (DVH), Prevention Branch
jji7@cdc.gov
404-718-3722

Federal Award Information

11. Award Number

6 NU51PS005112-04-04

12. Unique Federal Award Identification Number (FAIN)

NU51PS005112

13. Statutory Authority

Sections 301 and 317N of the Public Health Service Act (42 U.S.C. section 241 and 247b-15, as amended)

14. Federal Award Project Title

Improving Hepatitis B and C Care Cascades; Focus on Increased Testing and Diagnosis

15. Assistance Listing Number

93.270

16. Assistance Listing Program Title

Adult Viral Hepatitis Prevention and Control

17. Award Action Type

PD/PI Key Personnel

18. Is the Award R&D?

No

Summary Federal Award Financial Information

19. Budget Period Start Date	11/01/2019	- End Date	04/30/2021
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			\$252,876.00
24. Total Approved Cost Sharing or Matching, where applicable			\$0.00
25. Total Federal and Non-Federal Approved this Budget Period			\$252,876.00
26. Project Period Start Date	11/01/2016	- End Date	04/30/2021
27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period			\$727,154.00

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Mr. Arthur Lusby
Grants Management Officer, Team Lead

30. Remarks

PI change approved



Award# 6 NU51PS005112-04-04

FAIN# NU51PS005112

Federal Award Date: 11/16/2020

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Recipient Name	
Missouri Department of Health PO BOX 570 MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES Jefferson City, MO 65102-0570	
Congressional District of Recipient	
04	
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	\$98,088.00
b. Fringe Benefits	\$58,776.00
c. Total Personnel Costs	\$156,864.00
d. Equipment	\$0.00
e. Supplies	\$4,511.00
f. Travel	\$9,141.00
g. Construction	\$0.00
h. Other	\$4,932.00
i. Contractual	\$45,227.00
j. TOTAL DIRECT COSTS	\$220,675.00
k. INDIRECT COSTS	\$32,201.00
l. TOTAL APPROVED BUDGET	\$252,876.00
m. Federal Share	\$252,876.00
n. Non-Federal Share	\$0.00

34. Accounting Classification Codes					
FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
0-9390C2C	005112PS17	PS	41 51	\$0 00	75-20-0950
0-9390EVQ	005112PS17	PS	41 51	\$0 00	75-20-0950
0-939ZRPQ	005112PS17	PS	41 51	\$0 00	75-20-0950



DEPARTMENT OF HEALTH AND HUMAN SERVICES Notice of Award

Centers for Disease Control and Prevention

Award# 6 NU51PS005112-04-04

FAIN# NU51PS005112

Federal Award Date: 11/16/2020

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



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FAIN# NU51PS005112

Federal Award Date: 11/16/2020

35. Terms And Conditions

Federal Financial Report Cycle			
Reporting Period Start Date	Reporting Period End Date	Reporting Type	Reporting Period Due Date
11/01/2016	10/31/2017	Annual	01/29/2018
11/01/2017	10/31/2018	Annual	01/29/2019
11/01/2018	10/31/2019	Annual	01/29/2020
11/01/2019	10/31/2020	Annual	01/29/2021
11/01/2020	04/30/2021	Final	07/29/2021

AWARD ATTACHMENTS

Missouri Department of Health

6 NU51PS005112-04-04

1. T&C for PI Change

Funding Opportunity Announcement (FOA): PS17-1702

Award Number: 6 NU51PS005112-04

Applicable Cost Principles: 45 Code of Federal Regulations (CFR) Part 75, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards

AWARD INFORMATION

PURPOSE: This revised Notice of Award is to change the Principal Investigator from Ms. Nicole Massey to Ms. Christine Smith per Grantee's letter of request.

All the other terms and conditions issued with the original award remain in effect Through-out the budget period unless otherwise changed, in writing, by the Grants Management Officer.

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, and reasonable.

PLEASE REFERENCE YOUR AWARD NUMBER ON ALL CORRESPONDENCE