



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Notice of Award

Award# 6 NU50CK000546-02-11

FAIN# NU50CK000546

Federal Award Date: 07/26/2021

Recipient Information

1. Recipient Name

Missouri Department of Health
920 Wildwood Dr
Jefferson City, MO 65109-5796
[NO DATA]

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

Mrs. Cheryl L Kerr
Public Health Program Supervisor
cheryl.kerr@health.mo.gov
5737516476

8. Authorized Official

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

Federal Agency Information

CDC Office of Financial Resources

9. Awarding Agency Contact Information

Kim McDowell
Grant Management Specialist
qpx9@cdc.gov
404-498-4105

10. Program Official Contact Information

Ashley Treharne
Health Scientist
qmp4@cdc.gov
404-718-1434

Federal Award Information

11. Award Number

6 NU50CK000546-02-11

12. Unique Federal Award Identification Number (FAIN)

NU50CK000546

13. Statutory Authority

301(A)AND317(K)(2)PHS42USC241(A)247B(K)2

14. Federal Award Project Title

CK19-1904 Epidemiology and Laboratory Capacity for Prevention and Control of Emerging Infectious Diseases (ELC)

15. Assistance Listing Number

93.323

16. Assistance Listing Program Title

Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)

17. Award Action Type

Budget Revision

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, Project Period Start Date, and Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period.

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Ms. Freda Johnson
Grants Management Officer

30. Remarks



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<p>Recipient Information</p> <p>Recipient Name Missouri Department of Health 920 Wildwood Dr Jefferson City, MO 65109-5796 [NO DATA]</p> <p>Congressional District of Recipient 03</p> <p>Payment Account Number and Type [REDACTED]</p> <p>Employer Identification Number (EIN) Data [REDACTED]</p> <p>Universal Numbering System (DUNS) 878092600</p> <p>Recipient's Unique Entity Identifier Not Available</p>
<p>31. Assistance Type Cooperative Agreement</p> <p>32. Type of Award Demonstration</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	\$13,390,833.00
b. Fringe Benefits	\$8,031,828.00
c. Total Personnel Costs	\$21,422,661.00
d. Equipment	\$9,760,236.00
e. Supplies	\$15,158,068.00
f. Travel	\$293,196.00
g. Construction	\$0.00
h. Other	\$221,836,731.00
i. Contractual	\$273,308,468.00
j. TOTAL DIRECT COSTS	\$541,779,360.00
k. INDIRECT COSTS	\$4,309,287.00
l. TOTAL APPROVED BUDGET	\$546,088,647.00
m. Federal Share	\$546,088,647.00
n. Non-Federal Share	\$0.00

34. Accounting Classification Codes					
FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
1-9390GF6	19NU50CK000546PHL2C6	CK	41.51	\$0.00	75-X-0140



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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

Missouri Department of Health

6 NU50CK000546-02-11

1. Terms and Conditions- Reopening School

ADDITIONAL TERMS AND CONDITIONS OF AWARD

Revised Budget: The purpose of this amended Notice of Award is to approve the revised budget request submitted by your organization dated May 28, 2021. Funds that were deemed to be in scope of the guidance have been distributed as indicated in the approved budget of this Notice of Award.

Funds that were deemed out of scope remain in the 'Other' cost category and can be found in the budget workbook on line 'E.1_O1' which is the line item for the original award. Any funds on 'E.1_O1' will need a separate budget revision amendment request to reallocate to the appropriate cost category.

ADDITIONAL ADMINISTRATIVE REQUIREMENTS

The recipient must respond to the Budget Mark-up comments in accordance with the recommendations provided in GrantSolutions as a Grant Note within 30 days of receipt of the Notice of Award. If the date falls on a weekend or holiday, the submission will be due the following business day.

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 Awarding Agency Contact Information on page one of this Notice of Award prior to the due date.

To be considered an official response, recipients must:

1. Use the Reopening Schools budget workbook (Excel) provided in Grant Notes at time the revised NOA is issued.
2. Go to the 'CDC Program Notes Report' tab in the budget workbook.
3. For each line item that has been flagged, provide the requested information in the 'Recipient Response' section.
4. Submit the revised Reopening Schools budget workbook (Excel) in GrantSolutions via Grant Note.

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 Officer.

PLEASE REFERENCE AWARD NUMBER ON ALL CORRESPONDENCE