

1. DATE ISSUED MM/DD/YYYY 05/20/2019		1a. SUPERSEDES AWARD NOTICE dated 04/04/2019 except that any additions or restrictions previously imposed remain in effect unless specifically rescinded	
2. CFDA No. 93.074 - Hospital Preparedness Program (HPP) and Public Health Emergency Preparedness (PHEP) Aligned Cooperative Agreements			
3. ASSISTANCE TYPE Cooperative Agreement			
4. GRANT NO. 6 NU90TP921892-01-06 Formerly		5. TYPE OF AWARD Other	
4a. FAIN NU90TP921892		5a. ACTION TYPE Post Award Amendment	
6. PROJECT PERIOD MM/DD/YYYY From 07/01/2017		Through MM/DD/YYYY 06/30/2020	
7. BUDGET PERIOD MM/DD/YYYY From 07/01/2017		Through MM/DD/YYYY 06/30/2020	

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

CDC Office of Financial Resources

1600 Clifton Road
Atlanta, GA 30329

NOTICE OF AWARD

AUTHORIZATION (Legislation/Regulations)
SEC391(A)317(K)OPPHS42U.S.C.SEC241A 247B

8. TITLE OF PROJECT (OR PROGRAM) HPP/PHEP Cooperative Agreement Workplan and Budget for BP1	
9a. GRANTEE NAME AND ADDRESS Health & Family Services, Kentucky Cabinet for 275 E Main St # 5wa PS12-1201 Frankfort, KY 40601-2321	9b. GRANTEE PROJECT DIRECTOR Ms. Rebecca Gillis 275 East Main Street Epidemiology & Health Planning Frankfort, KY 40601-0000 Phone: 502-564-7243
10a. GRANTEE AUTHORIZING OFFICIAL Ms. Katie Stivers 275 East Main Street HS2EA Frankfort, KY 40621 Phone: 5025647243,x3741	10b. FEDERAL PROJECT OFFICER Ms. Shari Mckenzie-Hicks 1600 Clifton Rd NE Atlanta, GA 30329-4018 Phone: 8881112345

ALL AMOUNTS ARE SHOWN IN USD

11. APPROVED BUDGET (Excludes Direct Assistance)		12. AWARD COMPUTATION	
I Financial Assistance from the Federal Awarding Agency Only		a. Amount of Federal Financial Assistance (from item 11m) 21,860,038.00	
II Total project costs including grant funds and all other financial participation		b. Less Unobligated Balance From Prior Budget Periods 0.00	
a. Salaries and Wages	5,616,218.00	c. Less Cumulative Prior Award(s) This Budget Period 21,860,038.00	
b. Fringe Benefits	5,641,576.00	d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION 0.00	
c. Total Personnel Costs	11,257,794.00	13. Total Federal Funds Awarded to Date for Project Period 21,860,038.00	
d. Equipment	0.00	14. RECOMMENDED FUTURE SUPPORT	
e. Supplies	147,704.00	(Subject to the availability of funds and satisfactory progress of the project):	
f. Travel	434,809.00	YEAR	TOTAL DIRECT COSTS
g. Construction	0.00	a. 2	d. 5
h. Other	-9,799,228.00	b. 3	e. 6
i. Contractual	17,706,059.00	c. 4	f. 7
j. TOTAL DIRECT COSTS	19,747,138.00	15. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:	
k. INDIRECT COSTS	2,112,900.00	a. DEDUCTION	
I. TOTAL APPROVED BUDGET 21,860,038.00		b. ADDITIONAL COSTS	
m. Federal Share	21,860,038.00	c. MATCHING	
n. Non-Federal Share	2,202,461.00	d. OTHER RESEARCH (Add / Deduct Option)	
		e. OTHER (See REMARKS)	
		16. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY, THE FEDERAL AWARING AGENCY ON THE ABOVE TITLED PROJECT AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE IN THE FOLLOWING:	
		a. The grant program legislation	
		b. The grant program regulations.	
		c. This award notice including terms and conditions, if any, noted below under REMARKS.	
		d. Federal administrative requirements, cost principles and audit requirements applicable to this grant.	
		In the event there are conflicting or otherwise inconsistent policies applicable to the grant, the above order of precedence shall prevail. Acceptance of the grant terms and conditions is acknowledged by the grantee when funds are drawn or otherwise obtained from the grant payment system.	

REMARKS (Other Terms and Conditions Attached -
Amendment 6:NCE Supplement
HPP/PHEP 12-month NCE

☒ Yes

☐ No

GRANTS MANAGEMENT OFFICIAL:

Shicann Phillips
2960 Brandywine Rd
Atlanta, GA 30341-5509
Phone: 770.488.2809

17. OBJ CLASS	41.51	18a. VENDOR CODE	1610600439B5	18b. EIN	610600439	19. DUNS	927049767	20. CONG. DIST.	06
FY-ACCOUNT NO.		DOCUMENT NO.	CFDA	ADMINISTRATIVE CODE		AMT ACTION FIN ASST		APPROPRIATION	
21. a.	8-921027R	b. 17NU90TP921892	c. 93.074	d. TP		e. \$0.00		f. 75-18-0956	
22. a.	8-9213367	b. 17NU90TP921892	c. 93.074	d. TP		e. \$0.00		f. 75-18-0956	
23. a.	7-939ZVNM	b. 17NU90TP921892HPP	c. 93.074	d. TP		e. \$0.00		f. 75-17-0140	

NOTICE OF AWARD (Continuation Sheet)

PAGE 2 of 2	DATE ISSUED 05/20/2019
GRANT NO. 6 NU90TP921892-01-06	

FY-ACCOUNT NO.	DOCUMENT NO.	CFDA	ADMINISTRATIVE CODE	AMT ACTION FIN ASST	APPROPRIATION
24.a. 8-939ZVNM	b. 17NU90TP921892HPP	c. 93.074	d. TP	e. \$0.00	f. 75-18-0140

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 & Family Services, Kentucky Cabinet for

6 NU90TP921892-01-06

1. NCE Supplement (T&C) A-6

Notice of Funding Opportunity (NOFO) Number: CDC-RFA-TP17-17010201SUPP18
Award Number: 6 NU90TP921892SUPP-01 (**Amendment 6**)
Grant Recipient: Kentucky Cabinet for Health and Family Services
Additional Terms and Conditions of this Award

AWARD INFORMATION

ADDITIONAL TP SPECIAL TERMS AND CONDITIONS OF THIS AWARD: (Amendment 6)

NOTE 1: The purpose of this amendment is to approve a twelve (12) month No Cost Extension per the recipient's request submitted via Grant Solutions **April 5, 2019**. We have reviewed the request submitted by your organization and find it to be acceptable. The budget and project period end dates have been extended from 07/01/2019 to 06/30/2020.

NOTE 2: UNOBLIGATED FUNDS: The purpose of this amendment is to approve HPP unobligated Supplemental funds during the No Cost Extension Budget Period in the amount of \$800,000 as requested in your correspondence dated 04/05/2019. The funds will be used to work closely with ESF #8 local, state and federal support agencies and organizations to prepare for, respond to, and recover from any all-hazard events. Activities will be continued to achieve the project outcomes and related strategies as outlined in the HPP-PHEP Logic Model. The use of unobligated funds is approved based on the Interim Federal Financial Report (FFR) dated 04/05/2019. The total Notice of Award is subject to a reduction if the actual unobligated amount is less than funding shown on the referenced Interim FFR.

NOTE 3: UNOBLIGATED FUNDS: The purpose of this amendment is to approve PHEP unobligated Supplemental funds during the No Cost Extension Budget Period in the amount of \$1,115,000 as requested in your correspondence dated 04/05/2019. The funds will be used to work closely with ESF #8 local, state and federal support agencies and organizations to prepare for, respond to, and recover from any all-hazard events. Activities will be continued to achieve the project outcomes and related strategies as outlined in the HPP-PHEP Logic Model. The use of unobligated funds is approved based on the Interim Federal Financial Report (FFR) dated 04/05/2019. The total Notice of Award is subject to a reduction if the actual unobligated amount is less than funding shown on the referenced Interim FFR.

PROGRAM OR FUNDING SPECIFIC CLOSEOUT REQUIREMENTS

Kentucky Cabinet for Health and Family Services must submit all closeout reports identified in this section within 90 days of the period of performance end date. The reporting time frame is the full period of performance. Failure to submit timely and accurate final reports may affect future funding to the organization or awards under the direction of the same Project Director/Principal Investigator (PD/PI).

Final Performance Progress and Monitoring Report (PPMR): This report should include the information specified in the NOFO and is submitted 90 days (September 30, 2020) following the end of the period of performance via www.grantsolutions.gov. At a minimum, the report will include the following:

- Statement of progress made toward the achievement of originally stated aims.
- Description of results (positive or negative) considered significant.
- List of publications resulting from the project, with plans, if any, for further publication.

Additional guidance may be provided by the GMS and found at:

<https://www.cdc.gov/grants/alreadyhavegrant/Reporting.html>

All manuscripts published as a result of the work supported in part or whole by the grant must be submitted with the performance progress reports.

Final Federal Financial Report (FFR, SF-425): The FFR should only include those funds authorized and actually expended during the timeframe covered by the report. The Final FFR, SF-425 is required and must be submitted no later than 90 days after the period of performance end date via www.grantsolutions.gov.

Electronic versions of the form can be downloaded at:
<https://www.grants.gov/web/grants/forms/post-award-reporting-forms.html#sortby=1>.

The final report must indicate the exact balance of unobligated funds and may not reflect any unliquidated obligations. Should the amount not match with the final expenditures reported to the Department of Health and Human Services' PMS, you will be required to update your reports to PMS accordingly. Remaining unobligated funds will be de-obligated and returned to the U.S. Treasury.

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 8/31/2019.

NOTE 5: Please be advised that the grantee must exercise proper stewardship over Federal funds by ensuring that all costs charged to their cooperative agreement are allowable, allocable and reasonable.

NOTE 6: All 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 THE AWARD NUMBER ON ALL CORRESPONDENCE:

GMS & Grants Policy Contact:

Mr. Corey D. Taylor
Grants Management Specialist
Office of Grants Services (OGS)
Office of Financial Resources (OFR)
Office of the Chief Operating Officer (OCOO)
Centers for Disease Control and Prevention (CDC)
2939 Flowers Road, MS: TV-02
Office: 770-488-2730
Atlanta, Georgia 30341
Email: WVE3@cdc.gov

GMO Contact:

Shicann M. Phillips, Grants Management Officer
Centers for Disease Control
Office of Financial Resources – Office of Grants Services
2939 Flowers Road, MS: TV-02
Atlanta, GA 30341
Telephone: 770-488-2809
Email: SPHILLIPS2@CDC.GOV

HPP Programmatic Contact:

Captain Paul Link, FPO

ASPR/OS/OEM/HPP

61 Forsyth Street

Atlanta, Georgia 30303

E-Mail: Paul.Link@hhs.gov

Office: 404-989-4922