



Recipient Information

1. Recipient Name

DENVER, CITY & COUNTY OF
201 W Colfax Ave
Community Planning & Development
Denver, CO 80202-5329

2. Congressional District of Recipient

01

3. Payment System Identifier (ID)

1846000580C7

4. Employer Identification Number (EIN)

846000580

5. Data Universal Numbering System (DUNS)

080483932

6. Recipient's Unique Entity Identifier (UEI)

JHZYLXQAKY33

7. Project Director or Principal Investigator

Ms. Kalyn Horst
Kalyn.horst@denvergov.org
512-299-4851

8. Authorized Official

Mr. Daniel Fecher
Daniel.Fechter@denvergov.org
720-325-0048

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. Aisha Penson
Public Health Advisor
Division for Heart Disease and Stroke Prevention
ayt9@cdc.gov
770-488-5516

30. Remarks

Federal Award Information

11. Award Number

1 NH28CE003561-01-00

12. Unique Federal Award Identification Number (FAIN)

NH28CE003561

13. Statutory Authority

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

14. Federal Award Project Title

Denver Department of Public Health & Environment's project name: OD2A: Denver

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

New

18. Is the Award R&D?

No

Summary Federal Award Financial Information

19. Budget Period Start Date	09/01/2023	- End Date	08/31/2024
20. Total Amount of Federal Funds Obligated by this Action			\$1,807,494.00
20a. Direct Cost Amount			\$1,698,495.00
20b. Indirect Cost Amount			\$108,999.00
21. Authorized Carryover			\$0.00
22. Offset			\$0.00
23. Total Amount of Federal Funds Obligated this budget period			\$0.00
24. Total Approved Cost Sharing or Matching, where applicable			\$0.00
25. Total Federal and Non-Federal Approved this Budget Period			\$1,807,494.00
26. Period of Performance Start Date	09/01/2023	- End Date	08/31/2028
27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance			\$1,807,494.00

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Ms. Tajsha LaShore



Recipient Information
Recipient Name DENVER, CITY & COUNTY OF 201 W Colfax Ave Community Planning & Development Denver, CO 80202-5329
Congressional District of Recipient 01
Payment Account Number and Type 1846000580C7
Employer Identification Number (EIN) Data 846000580
Universal Numbering System (DUNS) 080483932
Recipient's Unique Entity Identifier (UEI) JHZYLXQAKY33
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	\$553,366.00
b. Fringe Benefits	\$207,346.00
c. Total Personnel Costs	\$760,712.00
d. Equipment	\$0.00
e. Supplies	\$135,082.00
f. Travel	\$10,200.00
g. Construction	\$0.00
h. Other	\$9,000.00
i. Contractual	\$783,501.00
j. TOTAL DIRECT COSTS	\$1,698,495.00
k. INDIRECT COSTS	\$108,999.00
l. TOTAL APPROVED BUDGET	\$1,807,494.00
m. Federal Share	\$1,807,494.00
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
3-9390BX6	23NH28CE003561OPCE	CE	410Q	93.136	\$1,807,494.00	75-23-0952



DEPARTMENT OF HEALTH AND HUMAN SERVICES Notice of Award

Centers for Disease Control and Prevention

Award# 1 NH28CE003561-01-00

FAIN# NH28CE003561

Federal Award Date: 08/23/2023

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

DENVER, CITY & COUNTY OF

1 NH28CE003561-01-00

1. Terms and Conditions

AWARD INFORMATION

Incorporation: In addition to the federal laws, regulations, policies, and CDC General Terms and Conditions for Non-research awards at <https://www.cdc.gov/grants/federal-regulations-policies/index.html>, the Centers for Disease Control and Prevention (CDC) hereby incorporates Notice of Funding Opportunity (NOFO) number CDC-RFA-CE-23-0003, entitled Overdose Data to Action: Limiting Overdose through Collaborative Actions in Localities (OD2A: LOCAL), and application dated May 8, 2023, as may be amended, which are hereby made a part of this Non-research award, hereinafter referred to as the Notice of Award (NoA).

Approved Funding: Funding in the amount of 1,807,494 is approved for the Year 01 budget period, which is September 1, 2023 through August 31, 2024. All future year funding will be based on satisfactory programmatic progress and the availability of funds.

The federal award amount is subject to adjustment based on total allowable costs incurred and/or the value of any third-party in-kind contribution when applicable.

Note: Refer to the Payment Information section for Payment Management System (PMS) subaccount information.

Component/Project Funding: The NOFO provides for the funding of multiple components under this award. The approved component funding levels for this notice of award are:

NOFO Component	Amount
Component A	\$ 1,557,494
Component B	\$ 250,000
Component C	\$ 0

Financial Assistance Mechanism: Cooperative Agreement

Substantial Involvement by CDC: This is a cooperative agreement and CDC will have substantial programmatic involvement after the award is made. Substantial involvement is in addition to all post-award monitoring, technical assistance, and performance reviews undertaken in the normal course of stewardship of federal funds.

CDC program staff will assist, coordinate, or participate in carrying out effort under the award, and recipients agree to the responsibilities therein, as detailed in the NOFO. Across all components, CDC will provide substantial involvement beyond regular performance and financial monitoring during the period of performance. Substantial involvement means that recipients can expect federal programmatic partnership in carrying out the effort under the award. CDC's Division of Overdose Prevention (DOP), with support from the DOP Technical Assistance Center (TAC), will work in partnership with recipients to ensure the success of the cooperative agreement by:

- Assisting in advancing program activities to achieve project outcomes
- Providing technical assistance on data management plans

- Collaborating with recipients to develop evaluation plans that align with CDC evaluation activities
- Providing technical assistance on recipient's Evaluation and Performance Measurement Plan
- Providing technical assistance on recipient's Targeted Evaluation Projects
- Providing technical assistance to define and operationalize performance measures
- Facilitating the sharing of information among recipients
- Participating in relevant meetings, committees, conference calls, and working groups related to the cooperative agreement requirements
- Coordinating communication and program linkages with other CDC programs and Federal agencies, such as Centers for Medicare and Medicaid Services (CMS), Food and Drug Administration (FDA), the National Institutes of Health (NIH), Substance Abuse and Mental Health Services Administration (SAMHSA), the Department of Justice (DOJ), and the HHS Office of the National Coordinator for Health Information Technology (ONC)
- Translating and disseminating lessons learned and best practices through publications, meetings, surveillance measures, and other means to expand the evidence base
- Identifying and awarding a partner organization to expand and strengthen recipients' capacity to implement surveillance and prevention activities through jurisdiction-level staffing support

Additionally, technical assistance for Component A around the funding announcement's guiding principles will be available to ensure that all recipients are able to:

- Collect data around community characteristics, including racial and ethnic composition, and conduct analyses with a health equity focus
- Use data to inform and tailor prevention programs, with emphasis on reaching groups disproportionately affected by the overdose epidemic
- Ensure implementation of culturally relevant interventions and equitable delivery of prevention services

The Technical Assistance Center (TAC) will leverage various modes of technical assistance, including group trainings, webinars, communities of practice, individualized one-on-one assistance, peer-to-peer interactions, and asynchronous learning to increase recipient capacity to implement evidence-based interventions. DOP staff and DOP TAC subject matter experts will work with the recipients to provide scientific subject matter expertise and resources by:

- Providing guidance on using data to inform jurisdiction-level populations of focus, on selecting evidence-based overdose prevention interventions, and on implementation of best practices across all prevention strategies
- Providing support and technical assistance for implementation of all components (A, B & C)

Component B: The following additional support will be provided to Component B recipients:

- Guidance on the drugs that should be included in standard toxicologic testing. This guidance will be updated periodically or as needed in response to emerging trends. This will be done in consultations with recipients
- Guidance for sharing toxicologic results with CDC in a standardized fashion to meet Component B reporting requirements
- Provide support on collecting and analyzing the data through drug product and/or drug

paraphernalia workgroup meetings that will be held at least quarterly. This may include presentations by CDC and external experts on topics of interest

Component C: The following additional support will be provided to Component C recipients:

- Guidance on the required and optional standardized indicators for linkage to and retention in care surveillance. This guidance may be updated periodically or as needed in consultations with recipients
- Guidance for sharing linkage to and retention in care surveillance indicators with CDC in a standardized format to meet Component C reporting requirements, including providing a data submission template
- Provide support on collecting and analyzing data through the linkage to and retention in care surveillance workgroup meetings that will be held at least quarterly. This may include presentations by CDC, external experts, and recipients on topics of interest

Budget Revision Requirement: By October 2, 2023 the recipient must submit a revised budget with a narrative justification for the following cost:

- The recipient should submit revised budget for the approved funding amount requested
- **Salaries and wages-** Due to miscalculations and the PI not listed in the budget, a revised budget is required, (Component A)
- **Fringe-** Fringe rate for each position was not provided (Component A)
- **Supplies-** Supplies will require detailed itemization and justification for proposed costs (Component A)
- **Travel:** In accordance with the CDC Budget Preparation Guidelines, the recipient must identify the position(s) traveling and provide a detailed narrative justification describing the travel personnel will perform. Dollars requested in the travel category should be recipient staff travel only. (Component A)
- **Other-** Professional development costs will require justification and itemization (Component A)
- **Other-** An itemized budget and justification is required for Component B activities

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 CDC Staff Contacts section of this notice before the due date.

Expanded Authority: The recipient is permitted the following expanded authority in the administration of the award.

- Carryover of unobligated balances from one budget period to a subsequent budget period. Unobligated funds may be used for purposes within the scope of the project as originally approved. Recipients will report use, or intended use, of unobligated funds in Section 12 "Remarks" of the annual Federal Financial Report. If the GMO determines that some or all of the unobligated funds are not necessary to complete the project, the GMO may restrict the recipient's authority to automatically carry over unobligated balances in the future, use the balance to reduce or offset CDC funding for a subsequent budget period, or use a combination of these actions.

FUNDING RESTRICTIONS AND LIMITATIONS

Indirect Costs: The recipient's indirect costs are approved and based on a de minimis rate of ten (10) percent of modified total direct costs (MTDC) as defined in 45 CFR Part 75.2, effective September 1, 2023.

Indirect costs are approved based on the negotiated indirect cost rate agreement dated

Missing Contractual Elements – The contract listed below are not approved and the recipient may not begin the contract until the 1) Name of Contractor, 2) Method of Selection, 3) Period of Performance, 4) Scope of Work, 5) Method of Accountability, 6) Itemized Budget and Justification is provided via GrantSolutions as a Notification of a Contractor or Consultant and GMO approval is provided via Notice of Award.

Contractual: Component A- \$533,501

REPORTING REQUIREMENTS

Required Disclosures for Federal Awardee Performance and Integrity Information System (FAPIIS): Consistent with 45 CFR 75.113, applicants and recipients must disclose in a timely manner, in writing to the CDC, with a copy to the HHS Office of Inspector General (OIG), all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Subrecipients must disclose, in a timely manner in writing to the prime recipient (pass through entity) and the HHS OIG, all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Disclosures must be sent in writing to the CDC and to the HHS OIG at the following addresses:

CDC, Office of Grants Services
Darryl V. Mitchell, Grants Management Officer/Specialist
Centers for Disease Control and Prevention
Branch 5 Supporting Chronic Diseases and Injury Prevention
2960 Brandywine Road
Atlanta, Georgia 30341
Email: dvm1@cdc.gov (Include "Mandatory Grant Disclosures" in subject line)

AND

U.S. Department of Health and Human Services
Office of the Inspector General
ATTN: Mandatory Grant Disclosures, Intake Coordinator
330 Independence Avenue, SW
Cohen Building, Room 5527
Washington, DC 20201

Fax: (202)-205-0604 (Include "Mandatory Grant Disclosures" in subject line) or
Email: MandatoryGranteeDisclosures@oig.hhs.gov

Recipients must include this mandatory disclosure requirement in all subawards and contracts under this award.

Failure to make required disclosures can result in any of the remedies described in 45 CFR 75.371. Remedies for noncompliance, including suspension or debarment (See 2 CFR parts 180 and 376, and 31 U.S.C. 3321).

CDC is required to report any termination of a federal award prior to the end of the period of performance due to material failure to comply with the terms and conditions of this award in the OMB-designated integrity and performance system accessible through SAM (currently FAPIIS). (45 CFR 75.372(b)) CDC must also notify the recipient if the federal award is terminated for failure to comply with the federal statutes, regulations, or terms and conditions of the federal award. (45 CFR 75.373(b))

PAYMENT INFORMATION

The HHS Office of the Inspector General (OIG) maintains a toll-free number (1-800-HHS-TIPS [1-800-447-8477]) for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. Information also may be submitted by e-mail to hhstips@oig.hhs.gov or by mail to Office of the Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington DC 20201. Such reports are treated as sensitive material and submitters may decline to give their names if they choose to remain anonymous.

Payment Management System Subaccount: Funds awarded in support of approved activities have been obligated in a subaccount in the PMS, herein identified as the “P Account”. Funds must be used in support of approved activities in the NOFO and the approved application.

The grant document number identified beginning on the bottom of Page 2 of the Notice of Award must be known in order to draw down funds.