1. DATE ISSUED:

05/10/2019

2. PROGRAM CFDA: 93.870

3. SUPERSEDES AWARD NOTICE dated: 08/06/2018

except that any additions or restrictions previously imposed remain in effect unless specifically rescinded.

4a. AWARD NO.: 6 X10MC31172-01-02 4b. GRANT NO.:

5. FORMER GRANT

\$240.728.00

\$5,000.00

\$69,700.00

\$15,945,287.00

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

NO.:

X10MC31172

6. PROJECT PERIOD:

FROM: 09/30/2017 THROUGH: 09/29/2019

7. BUDGET PERIOD:

FROM: 09/30/2017 THROUGH: 09/29/2019



NOTICE OF AWARD

AUTHORIZATION (Legislation/Regulation)

Social Security Act, Title V, Section 511 (42 U.S.C. §711), as amended by Section 2951 of the Patient Protection and Affordable Care Act of 2010 (P.L. 111-148)

Reauthorization and appropriation for FY16 provided through Medicare Access and CHIP Reauthorization Act (P.L. 114-10)

18. TITLE OF PROJECT (OR PROGRAM): Maternal Infant and Early Childhood Homevisiting (I -
	Crant Droaran	od Hamovicitina (arly Childhood F	Infant and E	Matarnal	CDVW	$\Gamma \cap D = D$) IECT	\cup E DD \cup	R TITI E	IQ

9. GRANTEE NAME AND ADDRESS:

Family & Protective Services, Texas Department of

PO BOX 149030

AUSTIN, TX 78714-9030

DUNS NUMBER:

808730360

10. DIRECTOR: (PROGRAM DIRECTOR/PRINCIPAL

INVESTIGATOR)

Family & Protective Services, Texas Department of

2535 Ridgepoint Dr

11.APPROVED BUDGET: (Excludes Direct Assistance)

[X] Grant Funds Only

[] Total project costs including grant funds and all other financial participation

a . Salaries and Wages :

\$687,792.00

b . Fringe Benefits :

c . Total Personnel Costs : \$928,520.00

d . Consultant Costs : \$0.00 \$0.00

e . Equipment : f. Supplies:

g . Travel : \$57.546.00

h . Construction/Alteration and Renovation :

i. Other:

Consortium/Contractual Costs:

k . Trainee Related Expenses :

I. Trainee Stipends:

Trainee Tuition and Fees:

n . Trainee Travel :

o . TOTAL DIRECT COSTS :

p. INDIRECT COSTS (Rate: % of S&W/TADC):

q . TOTAL APPROVED BUDGET :

i. Less Non-Federal Share:

ii. Federal Share:

Jenny Baldwin

Austin, TX 78754-5257

12. AWARD COMPUTATION FOR FINANCIAL ASSISTANCE:

a. Authorized Financial Assistance This Period \$17,095,280.00

b. Less Unobligated Balance from Prior Budget

i. Additional Authority

\$0.00

ii. Offset

\$0.00

\$0.00

\$0.00

c. Unawarded Balance of Current Year's Funds

d. Less Cumulative Prior Awards(s) This Budget \$17,095,280.00

Period

e. AMOUNT OF FINANCIAL ASSISTANCE THIS

ACTION

13. RECOMMENDED FUTURE SUPPORT: (Subject to the availability of funds and satisfactory progress of project)

YEAR	TOTAL COSTS					
Not applicable						

14. APPROVED DIRECT ASSISTANCE BUDGET:(In lieu of cash)

a. Amount of Direct Assistance

\$0.00

\$0.00

\$0.00

\$0.00

b. Less Unawarded Balance of Current Year's Funds

c. Less Cumulative Prior Awards(s) This Budget Period

d. AMOUNT OF DIRECT ASSISTANCE THIS ACTION

\$17.095.280.00 15. PROGRAM INCOME SUBJECT TO 45 CFR 75.307 SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:

\$17,006,053.00

\$17,095,280.00

\$89,227.00

A=Addition B=Deduction C=Cost Sharing or Matching D=Other

[A]

Estimated Program Income: \$0.00

16. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY HRSA, IS 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 cited above. b. The grant program regulation cited above. c. This award notice including terms and conditions, if any, noted below under REMARKS. d. 45 CFR Part 75 as applicable. 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 [X]Yes []No)

Prior Approval Request Tracking Number PA-00078948. Prior Approval Request Type: Project Director(PD) Change

Electronically signed by Tya Renwick, Grants Management Officer on: 05/10/2019

18. CRS-EIN: 1742639167A1 19. FUTURE RECOMMENDED FUNDING: \$0.00 17. OBJ. CLASS: 41.51

FY-CAN	CFDA	DOCUMENT NO.	AMT. FIN. ASST.	AMT. DIR. ASST.	SUB PROGRAM CODE	SUB ACCOUNT CODE
17 - 3895620	93.870	17X10MC31172	\$0.00	\$0.00		17MIECHV-F

Date Issued: 5/10/2019 10:02:15 AM Award Number: 6 X10MC31172-01-02

HRSA Electronic Handbooks (EHBs) Registration Requirements

The Project Director of the grant (listed on this NoA) and the Authorizing Official of the grantee organization are required to register (if not already registered) within HRSA's Electronic Handbooks (EHBs). Registration within HRSA EHBs is required only once for each user for each organization they represent. To complete the registration quickly and efficiently we recommend that you note the 10-digit grant number from box 4b of this NoA. After you have completed the initial registration steps (i.e., created an individual account and associated it with the correct grantee organization record), be sure to add this grant to your portfolio. This registration in HRSA EHBs is required for submission of noncompeting continuation applications. In addition, you can also use HRSA EHBs to perform other activities such as updating addresses, updating email addresses and submitting certain deliverables electronically. Visit

https://grants3.hrsa.gov/2010/WebEPSExternal/Interface/common/accesscontrol/login.aspx to use the system. Additional help is available online and/or from the HRSA Call Center at 877-Go4-HRSA/877-464-4772.

Terms and Conditions

Failure to comply with the remarks, terms, conditions, or reporting requirements may result in a draw down restriction being placed on your Payment Management System account or denial of future funding.

Grant Specific Term(s)

1. This revised Notice of Award is issued to change the Program Director from Sofia Santillana to Jenny Baldwin in accordance with the prior approval request submitted by Sofia Santillana on April 10, 2019.

All prior terms and conditions remain in effect unless specifically removed.

Contacts

NoA Email Address(es):

Name	Role	Email
Sofia Santillana	Other, Employee	sofia.santillana@dfps.state.tx.us
Kevin Doucet	Authorizing Official	kevin.doucet@dfps.state.tx.us
Jenny Baldwin	Employee, Program Director	jenny.baldwin@dfps.state.tx.us

Note: NoA emailed to these address(es)

Program Contact:

For assistance on programmatic issues, please contact Laura Wolfgang at: HRSA Maternal Child Health Bureau 1301 Young St

Dallas, TX, 75202-5433 Email: LWolfgang@hrsa.gov Phone: (214) 767-5320

Division of Grants Management Operations:

For assistance on grant administration issues, please contact Tya Renwick at: MailStop Code: 10W65B
MCHSB/DGMO/OFAM/HRSA
5600 Fishers Ln
RM 10W65B
Rockville, MD, 20857-0001
Email: trenwick@hrsa.gov

Phone: (301) 594-0227 Fax: (301) 443-6343