


1. DATE ISSUED: 04/01/2010		2. PROGRAM CFDA: 93.914		 U.S. Department of Health and Human Services HRSA Health Resources and Services Administration NOTICE OF AWARD AUTHORIZATION (Legislation/Regulation) Public Health Service Act, Title XXVI, Section 2603b Public Health Service Act Section 2603(b), 42 U.S.C 300ff-13(b) FY 2007 Title XXVI of the PHS Act, 42 U.S.C. section 300-ff-11 et seq (as amended), Part A
3. SUPERSEDES AWARD NOTICE dated: 03/05/2010 except that any additions or restrictions previously imposed remain in effect unless specifically rescinded.				
4a. AWARD NO.: 6 H89HA00007-20-01		4b. GRANT NO.: H89HA00007	5. FORMER GRANT NO.: BRH890007	
6. PROJECT PERIOD: FROM: 04/04/1991 THROUGH: 02/28/2011				
7. BUDGET PERIOD: FROM: 03/01/2010 THROUGH: 02/28/2011				

8. TITLE OF PROJECT (OR PROGRAM): HIV EMERGENCY RELIEF PROJECT GRANTS

9. GRANTEE NAME AND ADDRESS: FULTON COUNTY GOVT, BOARD OF COMMISSIONERS 141 Pryor St SW Atlanta, GA 30303-3468 DUNS NUMBER:		10. DIRECTOR: (PROGRAM DIRECTOR/PRINCIPAL INVESTIGATOR) Jeffrey Alan Cheek FULTON COUNTY GOVT, BOARD OF COMMISSIONERS 141 Pryor Street Atlanta, GA 30303-3444	
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11. APPROVED BUDGET: (Excludes Direct Assistance) <input checked="" type="checkbox"/> Grant Funds Only <input type="checkbox"/> Total project costs including grant funds and all other financial participation		12. AWARD COMPUTATION FOR FINANCIAL ASSISTANCE:					
a. Salaries and Wages : \$0.00 b. Fringe Benefits : \$0.00 c. Total Personnel Costs : \$0.00 d. Consultant Costs : \$0.00 e. Equipment : \$0.00 f. Supplies : \$0.00 g. Travel : \$0.00 h. Construction/Alteration and Renovation : \$0.00 i. Other : \$0.00 j. Consortium/Contractual Costs : \$0.00 k. Trainee Related Expenses : \$0.00 l. Trainee Stipends : \$0.00 m. Trainee Tuition and Fees : \$0.00 n. Trainee Travel : \$0.00 o. TOTAL DIRECT COSTS : \$20,336,854.00 p. INDIRECT COSTS (Rate: % of S&W/TADC) : \$0.00 q. TOTAL APPROVED BUDGET : \$20,336,854.00 i. Less Non-Federal Share: \$0.00 ii. Federal Share: \$20,336,854.00		a. Authorized Financial Assistance This Period \$20,336,854.00 b. Less Unobligated Balance from Prior Budget Periods i. Additional Authority \$0.00 ii. Offset \$0.00 c. Unawarded Balance of Current Year's Funds \$0.00 d. Less Cumulative Prior Awards(s) This Budget Period \$15,045,321.00 e. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION \$5,291,533.00					
		13. RECOMMENDED FUTURE SUPPORT: (Subject to the availability of funds and satisfactory progress of project)					
		<table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 50%;">YEAR</th> <th style="width: 50%;">TOTAL COSTS</th> </tr> </thead> <tbody> <tr> <td colspan="2" style="text-align: center;">Not applicable</td> </tr> </tbody> </table>		YEAR	TOTAL COSTS	Not applicable	
YEAR	TOTAL COSTS						
Not applicable							
		14. APPROVED DIRECT ASSISTANCE BUDGET: (In lieu of cash)					
		a. Amount of Direct Assistance \$0.00 b. Less Unawarded Balance of Current Year's Funds \$0.00 c. Less Cumulative Prior Awards(s) This Budget Period \$0.00 d. AMOUNT OF DIRECT ASSISTANCE THIS ACTION \$0.00					

15. PROGRAM INCOME SUBJECT TO 45 CFR 75.307 SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:
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 74 or 45 CFR Part 92 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 Yes No)

Electronically signed by Dorothy Kelley , Grants Management Officer on : 04/01/2010

17. OBJ. CLASS: 41.15 **18. CRS-EIN:** 1586001729A1 **19. FUTURE RECOMMENDED FUNDING:** \$0.00

FY-CAN	CFDA	DOCUMENT NO.	AMT. FIN. ASST.	AMT. DIR. ASST.	SUB PROGRAM CODE	SUB ACCOUNT CODE
10 - 3770722	93.914	H89HA0007V	\$5,035,869.00	\$0.00	N/A	N/A
08 - 3770750	93.914	H89HA0007V	\$255,664.00	\$0.00	N/A	N/A

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/WebEPSEExternal/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 Notice of Grant Award authorizes an unobligated balance in the amount of \$255,664 from budget period 3/1/08 - 2/28/09 into the current budget. The sum of \$255,664 was deobligated from old Document Number H89HA0007T and reobligated under the new Document Numbr H89HA0007V. Please be advised that if the final resolution of the audit determines that the unobligated balance of Federal funds used for offset is incorrect, HRSA is not obligated to make additional Federal funds available to cover the shortfall.
2. This Notice of Grant Award is issued to provide FY 2010 Part A Supplemental funds and notification of all Conditions of Award, Program Terms and Reporting Requirements.

Program Specific Term(s)

1. Please note that there is a new document number each budget period that must be used to draw down and report the grant funds.
2. Foreign travel is not permitted.
3. The amount available, in the aggregate, for first-line entities to spend on administrative costs is calculated by subtracting the grantee's administrative costs (up to 10%) and the grantee's quality management costs (up to 5% or \$3,000,000, whichever is less) from the total grant amount and multiplying the difference by 10%.
4. Refer to Reporting Requirement 1. Subsequent revisions to the allocations must be submitted to the DGMO along with a letter from the Planning Council Chair(s).
5. In accordance with Program Policy No. 97-03, grant funds may not be used for: 1.) outreach programs which have as their purpose exclusively, HIV prevention education, or 2.) broad-scope awareness activities about HIV services that target the general public (See HAB website www.hab.hrsa.gov for information on DSS Program policies).
6. Unless otherwise specified, all conditions, program terms and reporting requirements must be electronically submitted through the HRSA Electronic Handbooks.
7. On a regularly scheduled basis, HRSA grantees are required during their project period to participate in a performance review of their HRSA funded program(s) by a review team from HRSA's Office of Regional Operations, formerly the Office of Performance Review. If your organization has been selected for a performance review, you will be contacted at least twelve weeks before your performance review begins in order to provide you with additional information about the scope and process for your review, and to schedule the dates for the on-site phase. Upon completion of the performance review, grantees are expected to prepare an Action Plan that identifies key actions to improve program performance as well as addresses any identified program requirement issues.
8. Pursuant to sections 2617(b)(4)(E) and 2682(b) of Title XXVI of the Public Health Service (PHS) Act, the lead State agency shall collect and submit to the Secretary all audits consistent with the OMB circular A-133, from grantees within the State, including audits regarding funds expended in accordance with this part. Therefore grantees that receive Ryan White funding shall submit to the lead State agency a copy of their most recent A-133 audit, and any other audit specific to Ryan White funding the grantee may have conducted. The State will forward these audits to HRSA where they will be posted in their entirety on the HRSA web site. Therefore, please submit to the lead State agency, preferably in electronic format, a copy of your most recent audit or audits by November 1, 2010.
9. Circulars A-87 and A-122 regarding cost principles). If your organization is eligible to be a covered entity under Section 340B of the Public Health Service Act, and the assessment shows that participating in the 340B Drug Pricing Program and its Prime Vendor Program is the most economical and reasonable manner of purchasing or reimbursing for covered outpatient drugs (as defined in that section), failure to participate may result in a negative audit finding, cost disallowance, or grant funding offset.
10. Minimum WICY Expenditures: Part A grantees are required to use a minimum amount/percentage of their FY 2010 award to provide

services to women, infants, children and youth (WICY).

The minimum "set-aside" amounts/percentages for each state/territory must be determined separately for each priority population, and may not be less than the percentage/ratio of each population to the total number of persons.

Women, Infants, Children, and Youth (WICY) Waiver: If the grantee can document that one or more WICY priority populations are receiving HIV-related health services through the state Medicaid program under Title XIX of the Social Security Act, the State Children's Health Program (SCHIP) under Title XXI of the same Act, or other qualified federal or state programs in accordance with HRSA guidelines, then the grantee may request a waiver of the minimum WICY expenditure requirement from HRSA. Grantees approved for a WICY waiver do not have to report the amount of grant expenditures used to provide services to the waived priority population(s), but must document and report expenditures for non-waived populations. (Updated WICY Guidelines and Reporting Instructions will be provided separately.)

11. The Grantee is required to notify the DGMO, within 30 days, of any changes in Planning Council Composition that impact legislative compliance with Reflectiveness or the mandated membership categories. A letter signed by the Planning Council Chair(s) must be submitted assuring that 33% of the Council members are non-conflicted persons living with HIV Disease (PLWH) and are receiving Part A funded HIV-related services. In addition, the 33% PLWH Council members and the Council as a whole must accurately reflect the demographics of the epidemic in the EMA/TGA. Reflectiveness must be based on the prevalence of HIV Disease (AIDS Prevalence plus HIV Prevalence, real or estimated) in your EMA/TGA as reported in your FY2010 application. The notification and letter must be accompanied by revised tables or narrative describing compliance with Planning Council Composition and Reflectiveness
12. The grantee may not use more than ten (10) percent of the FY 2010 grant funds for administration, accounting, reporting, program oversight and planning council activities. Indirect costs are considered administrative.

Reporting Requirement(s)

1. Due Date: 06/30/2011

The grantee must submit a Final FY 2010 Part A Annual Progress Report, via the HRSA Electronic Handbook, consistent with reporting guidelines and instructions provided. Included in the report the grantee must submit a Report on Expenditures for Women, Infants, Children, and Youth (WICY). All grantees must be able to document Part A expenditures separately for WICY, as mandated by the Ryan White Treatment and Modernization Extension of Act of 2009 as follows:

- a. The amounts and percentages of Part A service-related expenditures to provide services to WICY separately; and
- b. The reported amounts are, at a minimum, not less than the percentage constituted by the ratio of each population with Acquired Immune Deficiency Syndrome (AIDS) to the general population with AIDS living within the EMA/TGA. Updated WICY Guidelines and Reporting Instructions will be provided separately. (See Program Term No. 4 for Waiver Information.)

2. Due Date: 09/30/2010

The grantee must submit the FY 2009 Part A and MAI Final Expenditure Table. The table must be submitted electronically via the HRSA Electronic Handbook using the format provided in that system.

3. Due Date: Within 120 Days of Budget Start Date

A final FY 2010 MAI Annual Plan for the use of the Part A MAI funds for the budget period 3/1/2010 to 2/28/2011 must be submitted by all Grantees to HRSA via the EHB, consistent with Part A MAI reporting guidelines and instructions provided separately to grantees. The EHBs will open for Grantees to begin their Annual Plan submission on June 1, 2010, thirty days before the 6/30/2010 deadline.

4. Due Date: 06/30/2010

The grantee must submit a report of Maintenance of Effort (MOE) Expenditures for fiscal years 2007 and 2008 thru the HRSA Electronic Handbook. The MOE expenditures reported must be based on the local budget items and tracking methodology described by the grant in their FY 2010 Part A grant application.

5. Due Date: 05/30/2010

The grantee must submit the FY 2010 Part A and MAI Planned Allocation Table, indicating the priority areas established by the Planning Council (PC) and the dollar amount of FY 2010 Part A and MAI funds allocated to each prioritized service category related to Part A eligible Core Medical and Support Services. The table must be submitted through the HRSA Electronic Handbook (EHB) using the format provided in that system. Use only the categories identified on the Table.

Under separate cover the grantee must send a letter from the HIV Health Services PC Chairperson/co-Chairs, indicating endorsement of the allocations and program priorities. This letter must be sent to your Division Services Systems (DSS) Project Officer on or before the due date of this condition.

6. Due Date: 06/30/2010

The Program Report must be submitted through the HRSA Electronic Handbook.

The following items that must be submitted:

? A revised SF-424A and narrative justification for Administration, Clinical Quality Management and HIV Services for all FY 2010 funding. The Form can be found at <http://www.hhs.gov/forms/PHS-5161-1.doc>. Grantee should only print the Budget Information-Non Construction Programs (Section A-F)

? A complete FY 2010 Implementation Plan which reflects all the Core Medical and Support service categories and priorities for which funds were allocated by the by the Planning Council and reflected in the FY 2010 Part A and MAI Planned Allocations Table.

? A Contract Review Certification (CRC) for all contracted funds in Administration, Clinical Quality Management, and HIV Services.

7. Due Date: 10/30/2011

A final FY 2010 MAI Annual Report detailing how Part A MAI funds were used and the outcomes achieved for the budget period 3/1/2010 to 2/28/2011, must be submitted by all Grantees to HRSA via the EHB, consistent with Part A MAI reporting guidelines and instructions provided separately to grantees. The EHBs will open for Grantees to begin their Annual Report submission on 10/1/2011, thirty days before the 10/31/2011 deadline.

8. Due Date: Within 90 Days of Budget End Date

The grantee must submit a Federal Financial Report (SF-425) within 90 days after the budget period end date. This report should reflect cumulative reporting within the project period (Document Number) and must be submitted using the Electronic Handbook (EHB). The Federal Financial Report will not be accepted unless the amount of expenditures for the three separate funding streams are reflected in the Remarks category of the SF-425 form, as listed below: The Part A Formula Amount \$13,372,699 The Part A Supplemental Amount \$5,291,533 The Part A MAI Amount \$1,672,622

9. Due Date: 09/30/2011

The grantee must submit the FY 2010 Part A and MAI Final Expenditure Table The table must be submitted electronically via the HRSA Electronic Handbook using the format provided in that system.

10. Due Date: 03/15/2011

Acceptance of this grant award indicates the grantee's assurance that it will comply with data requirements of the annual Ryan White Program Data Report (RDR) and the annual Ryan White Services Data Report (RSR), and that it will mandate such compliance by each of its contractors and subcontractors. RDRs and RSRs are due annually on March 15 or an alternate date as defined by HRSA. Acceptance of the RDR and RSR reports will reside in the RDR and RSR systems.

Failure to comply with these reporting requirements will result in deferral or additional restrictions of future funding decisions.

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

Contacts

NoA Email Address(es):

Name	Role	Email
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Note: NoA emailed to these address(es)

Program Contact:

For assistance on programmatic issues, please contact Songhai Barclift at:
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Rockville, MD, 20857-0001
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Phone: (301) 443-0523
Fax: (301) 443-0366

Division of Grants Management Operations:

For assistance on grant administration issues, please contact Djuana Gibson at:
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