



**MISSOURI
DEPARTMENT OF SOCIAL SERVICES**

**REFUGEE RESETTLEMENT
PROGRAM
STATE PLAN**

Revised August 2017

ADMINISTERED BY

The State of Missouri

Department of Social Services
Steve Corsi, Psy.D., Acting Director

Family Support Division
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(TANF/Refugee Program Manager)

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I. ADMINISTRATION

A. Authority

1. The Missouri Department of Social Services (DSS) is the single state agency responsible for developing and administering the Missouri Refugee Resettlement Plan as mandated by the Refugee Act of 1980 (P.L. 96-212) and implemented at the federal level by the Office of Refugee Resettlement, Department of Health and Human Services (ORR/DHHS). Please refer to attached Delegation of Lead State Agency Authority pursuant to 45 CFR §400.5(a).
2. A Program Manager of the Family Support Division's (FSD) is the State Refugee Coordinator and designates who will serve as the primary contact for the Office of Refugee Resettlement (ORR). Please refer to attached organizational charts.
3. Missouri's Refugee Resettlement program is publicly administered.
 - a. Missouri's Refugee Resettlement is state-wide. Refugee individuals and families may apply for Refugee Cash and/or Medical Assistance at any Family Support Division Resource Center, located throughout the state. Refugee Social Services and other discretionary programs are provided by contracted Refugee Resettlement Agencies and are also available throughout the state.
4. Missouri intends to withdraw as the administering agency of the Refugee Resettlement program effective February 28, 2018 pursuant to 45 CFR §400.301. The plan will remain in effect until this date. In regards to RMA and RCA, the Family Support Division (FSD) will continue to process applications received prior to March 1, 2018 and will transfer the cases upon approval to the designated lead agency.

B. Organization

The Missouri Department of Social Services, Family Support Division (FSD) is responsible for the administration of an array of refugee services pursuant to 45 CFR §400.154 and 400.155. The FSD ensures these services are provided by designated agencies throughout the state.

The FSD directly provides Refugee Cash and Medical Assistance benefits, as well as Temporary Assistance for Needy Families (TANF), Food Stamps and Medicaid to refugees. Refugees may apply for assistance in person at the FSD Resource Centers, via mail or Internet. The FSD contracts with state, public or private agencies to offer medical screening services and Refugee School Impact, Refugee Social Services, and other discretionary programs. The FSD ensures that language training and employment

services are made available, as refugees are actively encouraged to register for employment services pursuant to 45 CFR §400.5(c).

The State Refugee Coordinator and Assistant Refugee Coordinator are responsible for the coordination of public and private resources in refugee resettlement in the state, according to the Refugee Act and pursuant to 45 CFR §400.5(d). The role of the State Refugee Coordinator includes the following:

- Publish the annual Refugee Resettlement State Plan
- Manage federal funds
- Monitor contracts
- Track performance
- Submit required reports
- Consult and coordinate with Refugee Resettlement agencies
- Conduct quarterly meetings

C. Assurances

The Missouri Department of Social Services (DSS) assures that the State will:

1. Comply with the provisions of Title IV, Chapter 2 of the Immigration and Nationality Act, and the official issuances of the Director pursuant to 45 CFR §400.5(i)(1).
2. Comply with all other requirements of Part 400 pursuant to 45 CFR §400.5(i)(2).
3. Comply with all other applicable Federal statutes and regulations in effect during the time that it is receiving grant funding pursuant to 45 CFR §400.5(i)(3).
4. Amend the Plan to comply with ORR standards, goals, and priorities established by the Director, as needed pursuant to 45 CFR §400.5(i)(4).
5. Assure provision of services to all refugees without regard to race, religion, nationality, sex, or political opinion pursuant to 45 CFR §400.5(g).
6. Convene planning meetings with representatives of the public/private sector at least quarterly, unless exempted by ORR pursuant to 45 CFR §400.5(h).
7. Use the same mediation/conciliation procedures for the RCA program as those used in its Temporary Assistance (TA) program, also known as the State of Missouri's Temporary Assistance for Needy Families (TANF) program pursuant to 45 CFR §400.83(a)(2).
8. Use the hearings standards and procedures pursuant to 45 CFR §400.83(b).
9. Include refugee programs and populations in the state pandemic influenza emergency plan and other operational plans. (State Letter 09-30 and SL 06-10)

II. ASSISTANCE AND SERVICES

A. Coordination of Cash and Medical Assistance to Promote Self-Sufficiency

The primary goal of the Missouri Refugee Resettlement Program is to encourage effective refugee resettlement and promote economic self-sufficiency within the shortest possible time through a coordinated and effective use of support services and cash and medical assistance, pursuant to 45 CFR §400.79 and 45 CFR §400.5(b). The FSD ensures that cash, medical and employment services will be made available to refugees in accordance with regulations established by the Office of Refugee Resettlement (ORR).

Procedures governing refugee enrollment in cash and medical assistance require communication between the FSD Resource Centers and refugee-specific service providers. The Temporary Assistance and Childcare Processing Center encourages and facilitates this communication. In most cases, a refugee and/or refugee family is accompanied by a refugee resettlement agency representative to the local FSD Resource Center to apply for Refugee Cash Assistance (RCA) as well as Refugee Medical Assistance (RMA), and/or other programs as applicable. If the client is not accompanied by a representative whose agency has enrolled them in employment activities, the FSD office will refer RCA clients to employability services when they come in to fill out the application for cash assistance. The Assistant Refugee Coordinator also contacts the resettlement agencies on a monthly basis to assist providers in serving all refugees who have applied for cash assistance.

Eligibility for Refugee Medical Assistance (RMA) includes determining a client ineligible for MO HealthNet Assistance (Medicaid and State Children's Health Insurance Program - SCHIP) before enrolling the refugee in RMA. If a refugee who is receiving MO HealthNet Assistance and has been in the United States less than the eligibility time period for RMA becomes ineligible for MO HealthNet Assistance due to earnings from employment, the refugee will be transferred to RMA without an RMA eligibility determination pursuant to 45 CFR §400.104(b).

Missouri does not require that a refugee actually receive or apply for RCA as a condition of eligibility for RMA. A refugee client shall continue to receive RMA until reaching the end of the client's time-eligibility period pursuant to 45 CFR §400.100(b).

B. Employment and Language Services

1. Employment Services

As a condition to receive Refugee Cash Assistance (RCA), employable refugees must register with a designated service provider or a Missouri Career Center in the immediate area within the first thirty days of receipt of cash assistance, thereby ensuring the

development of an employability plan by the service provider pursuant to 45 CFR §400.75.

The employability plan for each client must be designed to lead to the earliest possible employment. It must contain a definite employment goal, attainable in the shortest time period consistent with the employability of the refugee in relation to job openings in the area pursuant to 45 CFR §400.79(c). The FSD and the designated service provider will determine if employability services and employment are appropriate pursuant to 45 CFR §400.81. Failure or refusal to accept employability services or employment may result in sanctions, which would cause a loss of benefits pursuant to 45 CFR §400.82.

Missouri will use the same procedures for mediation/conciliation as those used in its Temporary Assistance program, and will use the hearings standards and procedures pursuant to 45 CFR §400.83.

Missouri ensures that refugees are eligible to receive employment services for up to sixty (60) months and contracts with resettlement agencies to provide the following employability services, utilizing funding through Refugee Social Services, Targeted Assistance Formula, and other related discretionary grants pursuant to 45 CFR §400.154 and 155:

- Employment services
- Employability assessment services
- On-the-job training
- English language instruction
- Vocational training
- Skills recertification
- Daycare
- Transportation
- Translation and interpreter services
- Case management services
- Assistance in obtaining Employment Authorization Documents (EADs)
- Other services as needed to achieve and maintain economic self-sufficiency of the client when these services are not available from any other funding source

Citizenship, naturalization services and referral and interpreter services can be provided to refugees for more than sixty (60) months after arrival or until they become citizens pursuant to 45 CFR §400.152(b).

2. Language Training and Interpretive Services

State policies prohibit discrimination based on national origin as required by Title VI of the Civil Rights Act of 1964 and assure that Limited English Proficient persons have meaningful access to benefits and services. There are various resources available within Missouri to implement language access programs. As service providers resettle refugees in Missouri, refugees are assessed during the initial intake as to what

languages are spoken, along with their proficiency in the English language. Contracted service providers assume the responsibility for interpreter/translation services and language training as an important component of their service contracts with the FSD. The contracts specify that English Language Training must be provided concurrently with employability services pursuant to 45 CFR §400.156.

The FSD staff enlists interpreters as needed through a statewide contract with interpreter services. If face-to-face interpreters are not available, telephone interpreter services are accessed. Several documents used by FSD have been translated into other languages. The FSD assures that RCA policies and rights and responsibilities will be effectively communicated to each refugee, either by translation or interpretation.

Missouri received 1,420 newly arriving refugees, representing 13 countries, during Federal Fiscal Year 2017 (FFY 2017). Numbers are provided on newly arriving refugees placed in Missouri through the Office of Refugee Resettlement. Refugee resettlement agencies have proposed to provide Reception and Placement services for 1,400 refugee arrivals in FFY 2018. Please refer to Attachment C - 'Proposed Arrival Capacities for Missouri FFY 2018' chart for detailed information regarding countries/ethnicities of anticipated arrivals. Missouri's Office of Administration administers and monitors contracts with interpreters to assure availability and quality of services.

C. Refugee Cash Assistance

1. Refugee Cash Assistance Program – TANF Elements

Missouri operates a publicly administered Refugee Cash Assistance (RCA) program. Refugees must be determined ineligible for Temporary Assistance for Needy Families (TANF) and/or not receiving Supplemental Security Income (SSI) before being enrolled in RCA, which is administered consistent with the state's TANF program. The FSD details the requirements of the Refugee Cash Assistance program in its Income Maintenance Manual to ensure compliance with ORR guidelines.

The guidelines for RCA are the same as TANF in reference to work programs and job expectations. RCA is consistent with TA in regard to:

- a. Determination of initial and on-going eligibility (treatment of income and resources, budgeting methods, need standard) pursuant to 45 CFR §400.66(a)(1).
- b. Determination of benefit amounts (payment levels based on size of the assistance unit, income disregards). The following table illustrates the TANF need standard and the TANF/RCA payment standards for case sizes ranging from one to five individuals pursuant to 45 CFR §400.66(a)(2).

Case Size (Number of Persons)	TANF Consolidated/Need Standard	34.526% of Need Standard	TANF Maximum Grant	RCA Maximum Grant
1	393	136	\$136	\$136
2	678	234	\$234	\$234
3	846	292	\$292	\$292
4	990	342	\$342	\$342
5	1123	388	\$388	\$388

- c. Proration of shelter, utilities and similar needs. Missouri does not allow for a proration of shelter and utilities for the TANF and RCA programs pursuant to 45 CFR §400.66(a)(3).
- d. Any TA rules relating to financial eligibility and payments pursuant to 45 CFR §400.66(a)(4).
- e. The FSD will not consider any resources remaining in the applicant's country of origin in determining income eligibility pursuant to 45 CFR §400.66(b).
- f. The FSD will not consider a sponsor's income and resources to be accessible to a refugee solely because the person is serving as a sponsor pursuant to 45 CFR §400.66(c).
- g. The FSD will not consider any cash grant received by the applicant under the Department of State or Department of Justice Reception and Placement programs pursuant to 45 CFR §400.66(d).
- h. The FSD will use the date of application as the date refugee cash assistance eligibility begins pursuant to 45 CFR §400.66(e).
- i. The FSD will notify the appropriate local refugee resettlement agency when a refugee residing in the agency's catchment area applies for RCA pursuant to 45 CFR §400.68(a).
- j. The FSD will contact the RCA applicant's sponsor or the local resettlement agency concerning offers of employment and inquire whether the applicant has voluntarily quit employment or has refused to accept an offer of employment within thirty consecutive days immediately prior to the date of application pursuant to 45 CFR §400.68(b).
- k. The State is not subject to 45 CFR §400.60.
- l. The FSD does not provide differentials or incentive payments related to the RCA program.
- m. Refugees who apply for, or receive RCA are required to register for employment services within thirty (30) days of receipt of RCA and must

accept an appropriate employment, training, or language training opportunity pursuant to 45 CFR §400.81, unless otherwise exempt from registration and participation.

Criteria for exemption from registration for employment services, participation in employability service programs, and acceptance of appropriate offers of employment pursuant to 45 CFR §400.76(b) and documented in the FSD Income Maintenance Manual, Refugee Resettlement, section 1510.015.25 are as follows:

1. A person who is attending full-time training that is determined appropriate using the guidelines established in the FSD Maintenance Manual, Refugee Resettlement, section 1510.015.30 – Appropriate Work and Training Criteria, which is consistent with 45 CFR §400.81.
2. A parent or other relative caring for a child under the age of six (6).
3. A person age sixty (60) or over.
4. A person who has an illness or incapacity which prevents working. If claiming an illness or incapacity which is expected to last for three months or more, medical verification is required.
5. A person whose presence in the home is required because of illness or incapacity of another member of the household.
6. A parent or caretaker of a child, when the other nonexempt parent or caretaker in the home is registered and has not refused to accept employment without good cause.

2. Refugee Cash Assistance Program Administration

- a. Refugee Cash Assistance (RCA) applications and eligibility determinations have been centralized at the TA/Childcare processing unit. The specialized unit processes and maintains records, corresponding with appropriate service agencies to ensure compliance with program requirements.
- b. RCA benefits are distributed via a centralized distribution process operated by the FSD.
- c. The FSD Income Maintenance unit policy manager holds the title of State Refugee Coordinator (SRC) and supervises the Assistant State Refugee Coordinator (ASRC), who provides direct program management. The SRC assures contractors providing TANF work compliance services coordinate with refugee-related resources to promote self-sufficiency.

The Cash and Medical Assistance Estimate reflects staff allocations to RCA and RMA administration as follows: one half (.50) full-time equivalency (FTE) for Assistant State Refugee Coordinator; FTEs for eligibility, determination, maintenance, fiscal administration based on on-going time studies; .15 FTE for Refugee Health Coordinator allocated only to RMA administration.

- d. The States charges actual costs of direct and indirect RCA and RMA expenses to the Office of Refugee Resettlement through the Cash and Medical Assistance program.

D. Refugee Medical Assistance

1. Refugee Medical Assistance Eligibility

The State must provide any individual the opportunity to apply for medical assistance and must determine the eligibility of each applicant.

- a. Determination for Refugee Medical Assistance (RMA) includes determining a refugee client ineligible for Medicaid and the State Children's Health Insurance Program (SCHIP) before enrollment in RMA pursuant to 45 CFR §400.93. Once determined ineligible for Medicaid and SCHIP through an application review process, household composition, income, resources, qualified alien status, and date of entry/status are used to determine eligibility for RMA. Missouri has chosen not to participate in Medicaid expansion per the Affordable Care Act.
- b. In most cases, newly arriving refugees are accompanied by a refugee resettlement agency representative to the local FSD Resource Center to apply for Refugee Cash Assistance (RCA) as well as Refugee Medical Assistance (RMA), and/or other programs as applicable. RMA applications and eligibility determinations have been centralized at the TA/Childcare Processing Center. The specialized unit processes and maintains records, corresponding with appropriate service agencies to ensure compliance with program requirements.

2. Financial Eligibility Requirements

- a. The FSD bases eligibility for Refugee Medical Assistance on the applicant's income and resources on the date of application pursuant to 45 CFR §400.102(d), using the financial eligibility standard pursuant to 45 CFR 400.101(b)(1) with the additional spend down allowance option of up to 200% of the national poverty level pursuant to 45 CFR §400.103. The eligibility standard is reflective of the TANF/RCA payment chart displayed on page seven.
- b. Missouri does not consider any cash assistance payments (Reception and Placement, Matching Grant, or RCA) provided to an applicant in determining eligibility for RMA pursuant to 45 CFR §400.102(c).

3. Continued Coverage

- a. A refugee who is receiving Medicaid (MO HealthNet and/or SCHIP) who has been in the U.S. less than the time eligibility period for RMA, and becomes ineligible for Medicaid because of earnings from employment, will be transferred to RMA without an eligibility determination pursuant to 45 CFR §400.104(b).

4. Mandatory Services

- a. A refugee receiving RMA benefits receives at least the same level of coverage as an individual receiving Medicaid under MO HealthNet and/or SCHIP programs pursuant to 45 CFR §400.105. *As of May 1, 2017, the entire state is included in the managed care system.*



5. Additional Services

- a. Missouri provides Medical Screening services for all newly arriving refugees. Information on these services is noted in Section E. Refugee Medical Screening Program.

6. Newly Arriving Refugees – Care and Treatment

- a. The State's Refugee Health Coordinator (RHC) and RHC Supervisor have state level access to the Center for Disease Control and Prevention's (CDC) Electronic Database Notification (EDN) system. Any Licensed Public Health Agency (LPHA) may apply for clinic level access.

The RHC receives notification of arriving refugees through EDN. The RHC downloads the refugee's documents, which includes: Alien Information (contains sponsor contact information), Medical Exam for Immigrant and Refugee Applicant, vaccination history, Tuberculosis (TB) worksheet, and Pre-Departure Medical Screening. Along with the Refugee Health Assessment Report form (see form in the Attachments Section), the documents are put into a packet and

sent to the LPHA with jurisdiction over the refugee's arrival area. The refugee's information is entered into the Missouri Department of Health and Senior Services (DHSS) database.

- b. The LPHA is responsible for reviewing the refugee's medical documents, contacting the refugee to ensure a screening is scheduled, and filling out and returning the Refugee Health Assessment form and Tuberculosis worksheet, if indicated, to DHSS. The information captured by completed Refugee Health Assessment form is entered into the database. The information captured by the completed Tuberculosis worksheet is entered into EDN.
- c. Refer to the listing of Missouri Local Public Health Agencies in the Attachments Section for medical screening providers.
- d. Refer to the Refugee Health Assessment Report form in the Attachments Section for the screening services that are provided. The RHC is in the process of reviewing and revising the form and protocol for medical screening services; when finalized, a copy will be sent to ORR and training will be provided to providers state-wide.

7. RMA Costs

- a. Refugee Medical Assistance direct costs include the following:
 - Managed Care costs for refugees residing in Managed Care Health Plan Regions as defined in D.4 in this section;
 - Non-medical costs such as non-emergency medical transportation and translation services (dependent on service provider).
- b. Refugee Medical Assistance (RMA) administrative costs include the following:
 - Salaries and fringe benefits of staff providing intake/resource and eligibility determinations for RMA;
 - Salaries and fringe benefits of Missouri Medicaid managers (MO HealthNet) that provides administration of medical services; purchases and monitors health care services and delivery systems;
 - Salaries and fringe benefits of finance staff that coordinate expenditures and fiscal reporting;
 - Attorney fees for state regulations reviews and hearings requested by applicants/recipients of RMA;
 - State and local training for agency staff as well as service providers;
 - Maintenance and upgrade of data base systems, data reporting, and process issues with transference to another system, both data base and office-specific related.

E. Refugee Medical Screening Program

1. Medical Screening Program Approval

- a. The State of Missouri is requesting re-approval to continue to operate a medical screening program pursuant to 45 CFR §400.107.

The Refugee Health Program operates within the Bureau of Communicable Disease Control and Prevention, Missouri Department of Health and Senior Services (DHSS). The State Refugee Health Coordinator serves as the primary contact for the Office of Refugee Resettlement (ORR). The Refugee Health Coordinator (RHC) is responsible for the overall administration of this program, ensuring that refugees have access to medical screening, developing procedures to identify refugees arriving with health conditions requiring attention, facilitating treatment, and providing health-related statistical and financial data for reporting to ORR.

The RHC works closely with the Assistant State Refugee Coordinator to ensure that all reports such as the ORR-1 Cash and Medical Assistance Estimate and ORR-6 Progress Reports are completed and submitted as required. The RHC is an active member of the Association of Refugee Health Coordinators and participates in that organization's monthly conference calls. The RHC utilizes organizations such as the Substance Abuse and Mental Health Services Administration (SAMHSA), ORR, the Centers for Disease Control and Prevention (CDC) and the Institute of Medicine (IOM) for technical assistance as needed.

The Refugee Health Program staff review health assessment information quarterly to ensure the refugees that are contacted are receiving an examination for tuberculosis. Through the use of community health nurses, bilingual outreach workers, and translation services, refugees identified in need of treatment for tuberculosis will be provided appropriate medication. Local health care workers are responsible for education, transportation, and home follow-up. Furthermore, refugees with Class B-1 and B-2 conditions receive services through the local health departments and private physicians throughout the state. In addition to tuberculosis testing and screening, local health agencies provide screening for a variety of other health concerns. Please refer to the attached Refugee Health Assessment Report pursuant to 45 CFR §400.5(f).

2. Refugee Medical Screening (RMS) Assurances

- a. All screening services outlined in ORR State Letter 12-09 are generally covered by Medicaid, dependent on the provider's parameters. Tests that may not be paid by Medicaid are those sent to Missouri's DHSS State Laboratory for screening, of which most expenses are for medical screening of patients whose tests were sent either prior to Medicaid approval or for those not eligible for

Medicaid. The tests/screenings are mainly related to parasitology, Hepatitis B, Tuberculosis and liver function.

- b. At this time, the State does not bill for additional services beyond ORR State Letter 12-09.
 - c. Missouri assures medical screenings costs associated with the Refugee Resettlement program are reasonable. DHSS is currently reimbursed at the Medicare cost rate for the Current Procedural Terminology (CPT) code that corresponds to the screening and assessment services provided. Please refer to the attached Memorandum of Understanding for Refugee Medical Screening and CPT Base Cost charts for additional information. DHSS and DSS (Family Support and MO HealthNet Divisions) analyzed costs for medical screenings during FFY 2017, providing additional cost savings through identifying individuals determined eligible for Medicaid after their initial health visit, enabling health centers to rebill under Medicaid instead of applying the cost to Refugee Medical Screening services.
 - d. Refugees receive medical screening within the first ninety (90) days of entry to the United States. The RHC and refugee resettlement agencies report to each other, as well as to local public health agencies, the status of new arrivals and work to assure the ninety-day time limit is met, pursuant to 45 CFR §400.107(b).
3. Refugee Health Program/Medical Screening
- a. Medical Screening Direct Costs: Medical screening payments are based on fee-for-service, with variables related to age of patient and type of facility. Screening costs are incurred through tests and screenings sent to the DHSS State Laboratory, of which most expenses are for medical screening patients whose tests were sent either prior to Medicaid approval or for those not eligible for Medicaid. The total cost figures are capped at \$110,000 per year through a reimbursement agreement between DSS and DHSS, of which approximately \$12,000 is directed to the RHC's salary, counted under total program administrative costs.
 - b. Medical Screening Administrative Costs: Missouri does not intend to incur administrative costs for medical screening services for FY 2018.

F. Refugee Social Services (RSS)

1. The State provides Refugee Social Services statewide, through subcontracts with refugee resettlement agencies.
2. The Refugee Social Service program pursuant to 45 CFR §400.154 and 45 CFR §400.155, serving refugees who have been in the United States (US) less than sixty (60) months (five years). The program supports employability services and other

services that address refugee's barriers to employment such as social adjustment services, interpretation and translation services, daycare for children, citizenship, and naturalization services. Employability services are designed to enable refugees to obtain jobs within one year of becoming enrolled in services.

G. Cuban/Haitian Entrants

Missouri provides statewide services for all refugees, including Cuban/Haitian entrants as required by the Office of Refugee Resettlement pursuant to 45 CFR §401 and mandated by Public Law 96-422.

H. Unaccompanied Refugee Minors

As of and prior to October 1, 2014, Missouri has not participated in the Unaccompanied Refugee Minors (URM) program.

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ATTACHMENT A: DESIGNATION OF LEAD STATE AGENCY



GOVERNOR OF MISSOURI

JEFFERSON CITY
65102

ERIC R. GREITENS
GOVERNOR

P.O. Box 720
65107-0720

December 5, 2017

Dr. Steve Corsi, Psy.D.
Acting Director
Department of Social Services
221 West High Street
Jefferson City, MO 65101

RE: Designation of Lead Agency for Refugee Resettlement Program

Dear Dr. Corsi:

As the Governor of the State of Missouri, I hereby designate the Missouri Department of Social Services (DSS) as the lead agency pursuant to 45 CFR § 400.5(a).

This designation of DSS as the lead state agency shall include authority to DSS Acting Director Steve Corsi to perform all duties pursuant to 45 CFR Part 400.7 which states, "A plan or plan amendment under title IV of the Act must be submitted to the State Governor or his or her designee, for review, comment, and signature before the plan is submitted to ORR." You shall have the authority to review and sign grant applications, certifications of assurances, transmittals, and other related documents that may be required as part of the grant process to transition the Refugee Program to the Office of Refugee Resettlement Program pursuant to 45 CFR Part 400.301.

In acting on my behalf in reviewing and approving grant applications and related documents, you will be guided by all applicable laws and regulations governing these programs.

This delegation of authority is personal to you as the Acting Director of the Missouri Department of Social Services, and may not be re-delegated. Unless otherwise revoked, this delegation will remain in effect as long as you are serving in your present capacity of Acting Director of the Missouri Department of Social Services.

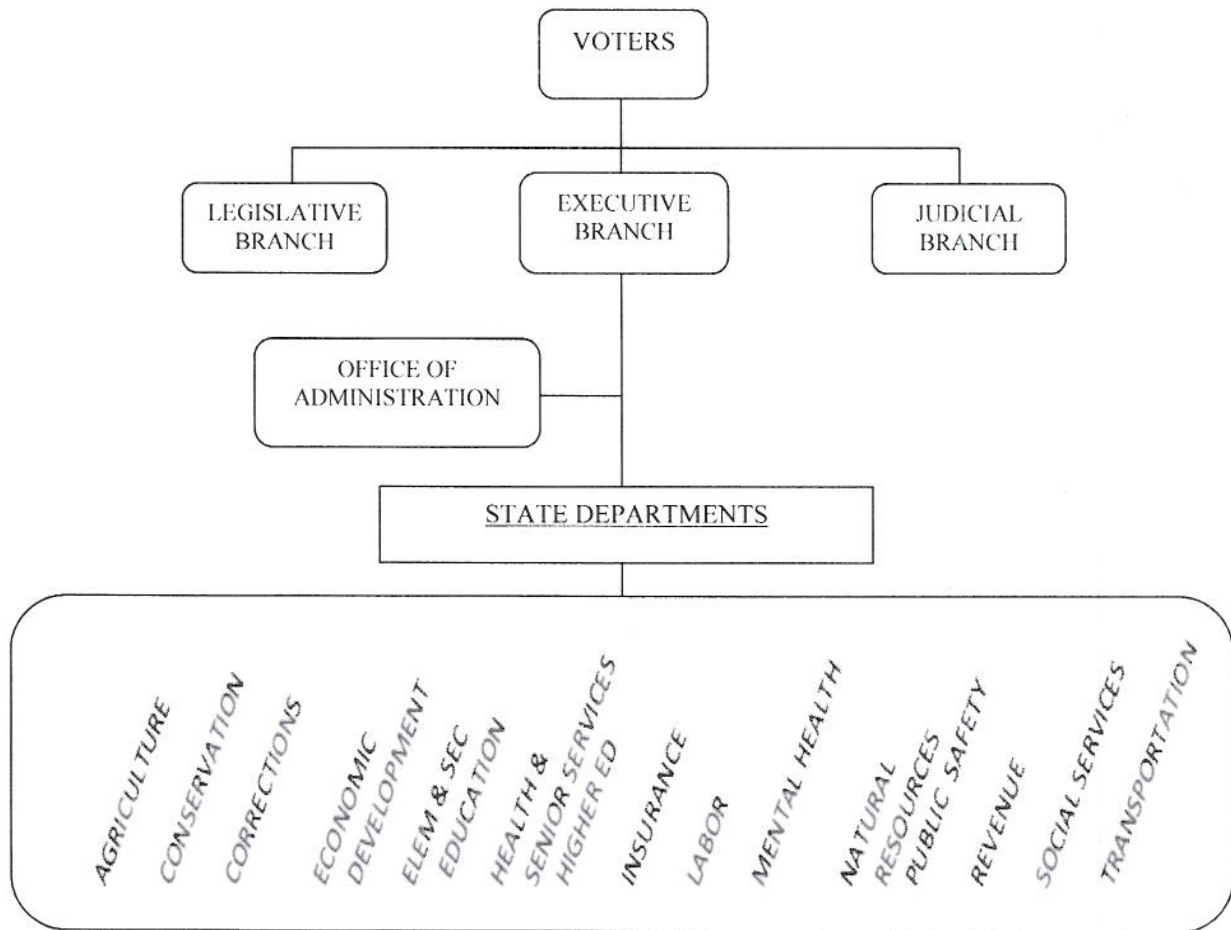
A copy of this letter of delegation should be submitted along with any grant applications and related documents signed by you on my behalf.

Sincerely,

Eric R. Greitens
Governor

www.governor.mo.gov

ATTACHMENT B(A) : MISSOURI – STATE ORGANIZATIONAL CHART



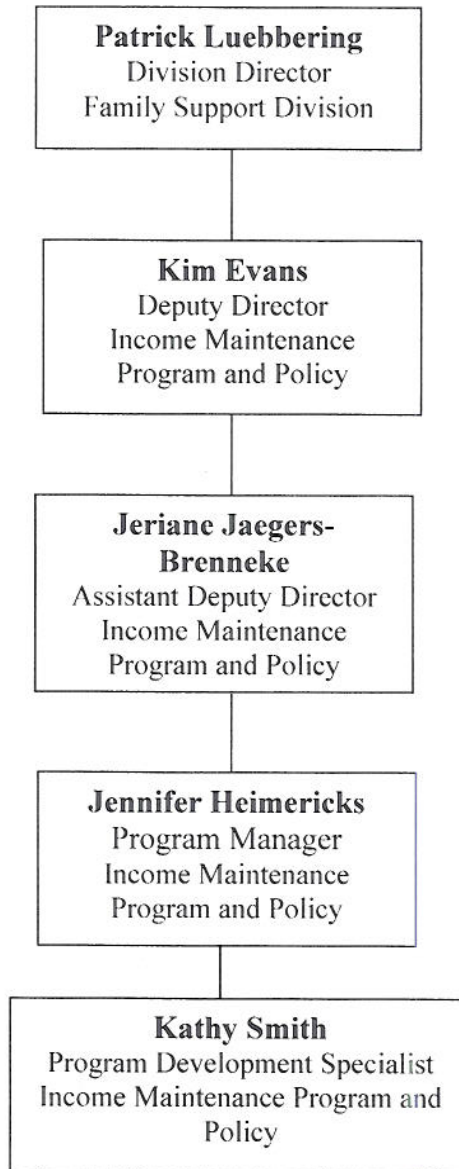
ATTACHMENT B(B): MISSOURI DEPARTMENT OF SOCIAL SERVICES ORGANIZATIONAL CHART



- DSS has four (4) program division (Children's Division, Family Support Division, MO HealthNet Division and Division of Youth Services) and two (2) support divisions (Divisions of Finance and Administrative Services and Legal Services) reporting to the Office of the Director. The Office of the Director oversees and coordinates the divisions' programs and services. Steve Corsi is the DSS Director.

ATTACHMENT B(c): MISSOURI DEPARTMENT OF SOCIAL SERVICES ORGANIZATIONAL CHART
- FAMILY SUPPORT DIVISION -

Department of Social Services
Family Support Division
615 Howerton Court
PO Box 2320
Jefferson City, MO 65102-2320



- Jennifer Heimericks is delegated the responsibilities of the State Refugee Coordinator.
- Kathy Smith is delegated the responsibilities of the Assistant State Refugee Coordinator.

ATTACHMENT C: PROPOSED ARRIVAL CAPACITIES FOR MISSOURI – FFY 2018

Refugees are placed in Missouri through the Federal Office of Refugee Resettlement (ORR). Information below was obtained from the resettlement agencies' Reception and Placement Abstracts.

<u>Missouri</u> Refugee Resettleme nt Agencies	<u>AF</u> (Africa)	<u>EA</u> (East Asia)	<u>ECA</u> (Europe and Central Asia)	<u>LAC</u> (Latin America and the Caribbean)	<u>NE/SA</u> (Near East and South Asia)	Totals	Total/ Agency
<u>Della Lamb</u>							
Ethiopian Community Development Council, Inc. affiliate							
US Tie	20	5	0	5	0	30	160
No US Tie	70	0	0	5	35	110	
SIV	0	0	0	0	20	20	
<u>Catholic Charities of Central and Northern Missouri – Refugee and Immigration Ser</u>							
United States Conference of Catholic Bishops affiliate							
US Tie	50	10	15	0	10	85	140
No US Tie	40	5	0	0	10	55	
SIV	0	0	0	0	0	0	
<u>Jewish Vocational Services</u>							
United States Committee for Refugees and Immigrants affiliate							
US Tie	40	15	10	15	10	90	400
No US Tie	185	0	0	0	90	275	
SIV	0	0	0	0	35	35	
<u>International Institute of St. Louis</u>							
United States Committee for Refugees and Immigrants affiliate							
US Tie	60	50	0	50	30	190	600
No US Tie	170	0	0	0	100	270	
SIV	0	0	0	0	140	140	
<u>International Institute of St. Louis – Springfield Branch</u>							
United States Committee for Refugees and Immigrants affiliate							
US Tie	15	5	5	0	5	30	100
No US Tie	70	0	0	0	0	70	
SIV	0	0	0	0	0	0	
TOTALS	720	90	30	75	485	1,400	
% of Total	51%	6%	2%	5%	35%	100%	

ATTACHMENT D: MEMORANDUM OF UNDERSTANDING – REFUGEE HEALTH

MOU Number M00361

**Memorandum of Understanding Between
The Missouri Department of Social Services
Family Support Division
and
The Missouri Department of Health and Senior Services**

1. Purpose

- 1.1 This agreement is entered into between the Missouri Department of Social Services, Family Support Division (FSD) and the Missouri Department of Health and Senior Services (DHSS) for the purpose of setting forth the terms and conditions for refugee preventative health services including preventative medical screening and assessment for early diagnosis, and intervention services provided by local public health agencies and the State Public Health Laboratory.
- 1.2 The FSD Missouri Refugee Resettlement Program State Plan ("Missouri State Plan") provides for preventative health services including medical screenings and assessments to newly arriving refugees in the state. FSD's Missouri State Plan cooperates with DHSS' the Refugee Health Program, which operates within DHSS' Bureau of Communicable Disease Control and Prevention. Local public health agencies and the State Public Health Laboratory will assist DHSS in providing initial health screenings and assessments.

2. Definitions

- 2.1 "Refugee" is used in this contract to define the following classifications of individuals:
- a. Individual(s) who entered the country with refugee status under section 207 of the Immigration and Nationality Act (INA) as indicated on USCIS Forms I-551, I-151 or I-94, or holds permanent resident status as a result of adjustment of status under PL 96-212;
 - b. Individual(s) from any country who has been granted asylum under section 208 of the INA;
 - c. Individual(s) paroled as a refugee or granted political asylum as indicated by USCIS Form I-94 - (Section 212(d)5 of the INA).
 - d. Individuals who are victims of severe forms of trafficking, are provided a T Nonimmigrant Status (T visa), and thus, are certified as eligible for refugee services. Also family members pursuant to section 107(b)(1)(A) of the Victims of Trafficking and Violence Protection Act of 2000 shall be eligible for federal and certain State benefits and services to the same extent as refugees;
 - e. Cuban and Haitian entrants, identified as such on the USCIS Form I-94 who meet federal eligibility criteria in 45 CFR part 401;
 - f. Amerasians from Vietnam who are admitted to the U.S. as immigrants pursuant to section 584 of the Foreign Operations, Export Financing, and Related Programs Appropriations Act, 1998;
 - g. Iraqi and Afghan Special Immigrants per Section 8120 of PL 111-118;
 - h. Individuals who previously held one of the statuses identified above whose status has subsequently been adjusted to that of permanent resident alien.

3. Term of Agreement/Modifications

- 3.1 This agreement shall be effective October 1, 2014 through September 30, 2015 and shall be reviewed annually thereafter for possible renewal and revisions.
- 3.2 Any changes to this agreement must be by formal written amendment reviewed, approved and signed by the authorized personnel of the parties. No other documents, including correspondence, acts and oral communications by or from any person, shall be construed as an amendment to the agreement.
- 3.3 Either party may terminate this agreement after providing a minimum of thirty (30) days written notice to the other party.

4. Confidentiality

- 4.1 Any information pertaining to specific individuals served under this agreement, or otherwise protected from public disclosure by state and/or federal law shared by the parties as a result of the performance under this agreement, shall remain confidential and only released to the public as permitted by applicable law. No reports, documentation, or material prepared as required by this agreement which pertain to individually identifiable persons shall be released to the public without the prior, written consent of each party, unless otherwise required by law.
- 4.2 If required, each party and any required personnel of each party must sign specific documents regarding confidentiality, security, or other similar documents upon request.
- 4.3 **HIPAA:** All parties are subject to, and must comply with, applicable provisions of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), as amended by the Health Information Technology for Economic and Clinical Health Act (HITECH) (PL-111-5) (collectively, and hereinafter, HIPAA) and all regulations promulgated pursuant to authority granted therein.
 - a. All parties are "Covered Entities" as defined in the Code Federal Regulations (CFR) at 45 CFR 160.103. Therefore, the parties may disclose, share and use protected health information (PHI) for the purposes permitted or required by law.

5. Responsibilities of the Parties

5.1 DHSS Responsibilities:

- 5.1.1 DHSS shall designate a State Refugee Health Coordinator (RHC) to serve as the primary contact for the Department of Health and Human Services, Administration for Children and Families' Office of Refugee Resettlement (ORR) and to be responsible for the overall administration of the Refugee Health Program, as well as developing procedures to identify refugees arriving with health conditions requiring attention
- 5.1.2 DHSS' RHC shall work closely with the local public health agencies throughout Missouri to ensure that within sixty (60) days of DHSS or the (Local Public Health Agency) (LPHA) receiving notification of a refugee's arrival in the state, each refugee receives a health screening that includes the following screenings set out in the Missouri State Plan:
 - a. Parasitic infection screening;
 - b. Hepatitis B testing;
 - c. Tuberculosis skin testing;
 - d. Liver function testing;
 - e. Lead screening;
 - f. HIV testing;
 - g. Chest x-ray;
 - h. Any immunizations required by the ORR Domestic Medical Screening Guidelines, attached hereto as Attachment A and incorporated as if fully set forth herein; and
 - i. Screenings for obvious nutritional, vision, hearing and dental problems.
- 5.1.3 The RHC shall work closely with DSS' State Refugee Coordinator to ensure all reports (i.e., ORR-1, ORR-6, and monthly reports of services provided), as well as health-related statistical and financial data reports are completed so that the State Refugee Coordinator can submit the reports as required to ORR.
- 5.1.4 The RHC shall be an active member of the Association of Refugee Health Coordinators and participate in the organization's monthly conference calls.
- 5.1.5 DHSS shall submit to DSS invoices and expenditure reports for health services and the RHC's salary on a quarterly basis. DHSS shall not submit invoices that exceed a total amount of one hundred ten thousand dollars (\$110,000) for the entire effective period of this agreement.

- 5.1.6 DHSS shall submit the invoices and expenditure reports to DSS by the fifteenth (15th) of the month following the end of the quarter. DHSS shall submit the final invoice and expenditure report no later than November 15. DHSS shall submit all invoices and expenditure reports to:

Department of Social Services
Family Support Division
Community Support Unit
P.O. Box 2320
Jefferson City, MO 65102

- 5.1.7 DHSS shall maintain detailed documentation supporting its claims for reimbursement in its invoices and expenditure reports for five (5) years and shall provide the documentation to DSS upon request.

- 5.1.8 Any failure by DHSS to submit the reports required herein when due may result in DSS withholding or rejecting payments under the agreement.

5.2 DSS Responsibilities:

- 5.2.1 On behalf of DHSS, on an annual basis DSS shall draw from the federal funds provided under the Refugee Cash and Medical Assistance Program Grant an amount not to exceed one hundred ten thousand dollars (\$110,000) that DHSS shall use to:

- a. fund fifteen percent (15%) of the annual salary for the RHC; and
- b. provide preventive health services to newly-arrived refugees in the state in accordance with the terms and conditions of this agreement, including but not limited to the services listed herein. DSS shall reimburse DHSS for these services at the Medicare cost rate for the Current Procedural Terminology (CPT) code that corresponds to the screening and assessment services provided.

- 5.2.2 DSS shall analyze and monitor monthly reports provided by DHSS for trends in relocation and information regarding screening and assessment recommendations.

- 5.2.3 DSS shall review and analyze DHSS' invoices and expenditure reports to determine whether the medical services provided to refugees were appropriate and accurate. DSS shall not reimburse DHSS for services provided and paid under the Missouri Medicaid program.

- 5.2.4 Upon receipt of a referral to the closest FSD local office, DSS shall provide refugees the opportunity to apply for medical assistance and will determine whether each refugee applicant is eligible for medical assistance.

- a. DSS shall only enroll a refugee applicant in the Refugee Medical Assistance (RMA) program if the refugee applicant is ineligible for both Medicaid and the State Children's Health Insurance Program

6. Financial Provisions

- 6.1 In accordance with pertinent federal instructions and regulations, the parties agree to the following funding amounts and provisions:

- a. Funds for the above services are provided through grants received from Office of Refugee Resettlement in an amount not to exceed one hundred ten thousand dollars (\$110,000).

- 6.2 The parties agree to negotiate mutually acceptable terms for use of these funds should changes in usage be necessary during the term of this agreement.

- 6.3 **Federal Funds:** This agreement involves the use of federal funds. In performing its responsibilities under this agreement, DHSS shall comply with the applicable federal funds requirements listed below.

- a. Office of Management and Budget (OMB) administrative requirements and cost principles, as applicable, including any subsequent amendments, listed below:
 - 1) Uniform Administrative Requirements – A-102 - State/Local Governments; 2 CFR 215 - Hospitals, Colleges and Universities, For-Profit Organizations (if specifically included in federal agency implementation), and Not-For-Profit Organizations (OMB Circular A-110); and

- 2) Cost Principles – 2 CFR 225 – State/Local Governments (OMB Circular A-87); A-122 - Not-For-Profit Organizations; A-21 – Colleges and Universities; 48 CFR 31.2 – For-Profit Organizations; 45 CFR 74 Appendix E – Hospitals.
 - b. In accordance with the Departments of Labor, Health and Human Services, and Education and Related Agencies Appropriations Act, "Steven's Amendment", DHSS shall not issue any statements, press releases, and other documents describing projects or programs funded in whole or in part with Federal money unless the prior approval of DSS is obtained and unless they clearly state the following as provided by DSS:
 - 1) The percentage of the total costs of the program or project which will be financed with Federal money;
 - 2) The dollar amount of Federal funds for the project or program; and
 - 3) The percentage and dollar amount of the total costs of the project or program that will be financed by nongovernmental sources.
 - c. Requirements of the Single Audit Act Amendments of 1996 (P.L. 104-156) and Circular A-133, including subsequent amendments or revisions, as applicable or 2 CFR 215.26 as it relates to for-profit hospitals and commercial organizations. A copy of any audit report shall be sent to DSS for each year of the agreement, if applicable. DHSS shall return to the DSS any funds disallowed in an audit of the agreement.
- 6.5 It has been determined that, for the purposes of this agreement, the DHSS is a subrecipient as defined in Office of Management and Budget (OMB) Circular A-133, Section 210. Therefore, the DHSS shall comply with all applicable implementing regulations, and all other laws, regulations and policies authorizing or governing the use of any federal funds paid to the DHSS through this agreement. The current requirements are contained in Exhibit 1.
- a. DHSS shall:
 - 1) provide the DSS with access to any of the independent auditors' reports that present instances of noncompliance with federal laws and regulations that bear directly on the performance of this agreement;
 - 2) in cases of such noncompliance, provide DSS with copies of responses to auditors' reports and a plan for corrective action;
 - 3) make all reports prepared in accordance with the requirements of OMB Circular A-133 available for inspection by representatives of DSS during normal business hours;
 - 4) keep all records as may be reasonably necessary to facilitate an effective audit, for a period of five (5) years following the expiration or termination of the agreement, or until all litigation, claims or audit findings have been resolved and final action is taken; and
 - 5) cooperate with DSS in resolving questions that DSS may have concerning the auditors' report and plans for corrective action.

In witness thereof, the parties below hereby execute this agreement.

Jayson Campbell
Approval Signature for Family Support Division

1/14/15
Date

Pat Bedell for Gret Fischer
Authorized Signature for Department of Health
and Senior Services

DEC 22 2014
Date

Jennifer R. Hill
Authorized Signature for the Department of
Social Services

1-20-15
Date

Exhibit #1: Federal Funding Accountability and Transparency Act (FFATA) Data Form

**See instructions for additional information*

Legal Business Name of Entity	Missouri Department of Health and Senior Services				
Doing Business As (if different)					
Street Address	920 Wildwood Dr.				
City	Jefferson City	State	MO	Zip Code + 4*	65109-5796
DUNS Number*	878092600				
Parent Organization's DUNS Number*	N/A				
Principal Place of Performance*	Statewide				
Contact Person's Name / Title	Renee' Godsey				
Contact Person Phone Number	573-526-0614				
Contact Person E-Mail	Renee.Godsey@health.mo.gov				

Executive Compensation Information*

**Complete this section if required. See instructions for additional information before completing.*

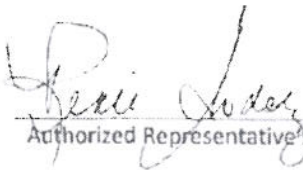
List the organization's top five most highly compensated executives for the preceding contractor fiscal year.

Name	Amount
1.	
2.	
3.	
4.	
5.	

Certification:

I attest the facts stated above are true and correct.

I understand the information provided will be reported by the Department of Social Services to the FFATA Subaward Reporting System (FSRS) and the information will be accessible to the public.

	<u>Renee Godsey</u>
Authorized Representative's Signature	Printed Name
<u>Controller</u>	<u>12/23/14</u>
Title	Date

Amendment to Memorandum of Understanding

MOU #: M00361

MOU Description:
Refugee Preventative Health Services

Amendment # 001

Effective Date: October 1, 2015



Amendment Description: Language Update

Parties to the MOU:

Missouri Department of Social Services, Family Support Division
and
Missouri Department of Health and Senior Services

The above referenced agreement between the Missouri Department of Social Services, Family Support Division and the Missouri Department of Health and Senior Services is hereby amended as follows:

1. Section 3.1 is hereby revised as follows:
 - 3.1 This agreement shall be effective October 1, 2015 and shall be reviewed annually thereafter for possible revisions.
2. Section 5.2.1.b is hereby revised as follows:
 - 5.2.1.b provide preventive health services to newly-arrived refugees in the state in accordance with the terms and conditions of this agreement, including but not limited to the services listed herein. DSS shall reimburse DHSS for these services at the Medicaid cost rate for the Current Procedural Terminology (CPT) code that corresponds to the screening and assessment services provided.
3. This amendment shall be effective October 1, 2015. All other terms and conditions shall remain unchanged.

In witness thereof, the parties below hereby execute this agreement.

Approval Signature for Family Support Division

8-26-15
Date

Authorized Signature for Department of Health and Senior Services

SEP 16 2015
Date

Authorized Signature for the Department of Social Services

11-5-15
Date

ATTACHMENT E: MISSOURI CPT BASE RATES (AS OF JUNE 5, 2017)

Screening Activity & CPT Code	CPT/HCPCS Descriptors	Base Payment Rate
History and Physical Exam*		
99381	Initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance /risk factor reduction interventions, and the ordering of laboratory /diagnostic procedures, new patient; infant (age younger than 1 year)	\$24.59
99382	Initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance /risk factor reduction interventions, and the ordering of laboratory /diagnostic procedures, new patient; early childhood(age 1 through 4 years)	\$24.59
99383	Initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance /risk factor reduction interventions, and the ordering of laboratory /diagnostic procedures, new patient; late childhood(age 5 through 11 years)	\$24.59
99384	Initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance /risk factor reduction interventions, and the ordering of laboratory /diagnostic procedures, new patient; adolescent (age 12 through 17 years)	\$24.59
99385	Initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance /risk factor reduction interventions, and the ordering of laboratory /diagnostic procedures, new patient; 18 through 39 years	\$34.74
99386	Initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance /risk factor reduction interventions, and the ordering of laboratory /diagnostic procedures, new patient; 40 through 64 years	\$34.74
99387	Initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance /risk factor reduction interventions, and the ordering of laboratory /diagnostic procedures, new patient; 65 years and older	\$34.74
Doctor Visit #2*		
99213	Office/outpatient visit [return visit]	\$38.89
Nurse Visit		
99211	Office/outpatient visit	\$15.30

MISSOURI REFUGEE STATE PLAN

Screening Activity & CPT Code	CPT/HCPCS Descriptors	Base Payment Rate
Laboratory Testing		
CBC		
85025	Complete CBC w/ WBC differential	\$10.53
Serum Chemistries		
80047	Basic metabolic panel	\$11.45
80048	Basic metabolic panel	\$11.45
80053	Comprehensive metabolic panel	\$14.14
Urinalysis		
81000	Urinalysis	\$3.40
81001	Urinalysis	\$4.30
81002	Urinalysis	\$1.88
81003	Urinalysis	\$1.88
81005	Urinalysis	\$2.93
Cholesterol		
82465	Total cholesterol	\$5.67
83718	HDL	\$11.08
Pregnancy Testing		
81025	Urine pregnancy test	\$8.16
84703	Chorionic gonadotropin assay, qualitative	\$8.16
84702	Chorionic gonadotropin test, quantitative	\$8.95
Blood Lead Level		
83655	Assay of lead	\$16.38
83540	Assay of iron	\$8.77
82728	Assay of ferritin	\$18.44
85046	Reticulocyte/Hgb concentrate	\$6.96
HIV Testing		
86701	HIV-1, antibody, rapid test	\$12.01
86702	HIV-2, antibody, rapid test	\$14.36
86703	HIV-1/HIV-2 single result, antibody, rapid test	\$14.36
87390	HIV-1 enzyme immunoassay (EIA)	\$25.39
87391	HIV-2 EIA	\$25.39
86689	HTLV/HIV confirmatory test, antibody - <i>if screening test positive</i>	\$26.19
87534	HIV-1 DNA direct probe	\$28.86
87535	HIV-1 DNA amplified probe	\$38.08
87537	HIV-2 DNA direct probe	\$28.86
87538	HIV-2 DNA amplified probe	\$38.08
87536	HIV-1 RNA quantative RT-PCR - <i>only in infants of HIV + mothers</i>	\$101.62
87539	HIV-2 RNA quantative RT-PCR - <i>only in infants of HIV + mothers</i>	\$61.65

Screening Activity & CPT Code	CPT/HCPCS Descriptors	Base Payment Rate
Laboratory Testing (continued)		
Hepatitis B Testing		
87340	Hepatitis B surface antigen EIA	\$13.98
86704	Hepatitis B core antibody total	\$16.32
86706	Hepatitis B surface antibody	\$14.53
87341	Hepatitis B surface antigen EIA, confirm - <i>if initial screen (87340) positive</i>	\$13.98
Hepatitis C Testing		
86803	Hepatitis C antibody	\$19.32
86804	Hepatitis C antibody, confirm - <i>if initial screen (86803) positive</i>	\$20.96
Syphilis Screening		
86592	Syphilis test non-treponemal [VDRL or RPR]	\$5.67
86593	Syphilis test non-treponemal, quantitative - <i>if initial screen (86593) positive</i>	\$5.67
Syphilis Confirmatory		
86780	Treponema pallidum [TP-PA; FTA; ELISA; IgG]	\$14.36
Chlamydia Testing		
87491	Chlamydia and gonorrhea DNA amplification probe	\$38.08
87810	Chlamydia immunoassay	\$17.27
87270	Chlamydia DFA	\$17.27
87320	Chlamydia EIA	\$17.27
87110	Chlamydia culture	\$14.35
Newborn Screening (outpatient)		
NA	Newborn screening	Manually priced
Screening Activity & CPT Code	CPT/HCPCS Descriptors	Base Payment Rate
Serology and Immunization		
Serology		
86762	Rubella antibody	\$14.36
86765	Rubeola antibody	\$14.36
86735	Mumps antibody	\$14.36
86787	Varicella-zoster antibody	\$14.36
86648	Diphtheria antibody	\$14.36
86774	Tetanus antibody	\$14.36
86658 x 3	Enterovirus antibody [polio 1, 2, 3]	\$14.36
86708	Hepatitis A antibody total	\$16.77

MISSOURI REFUGEE STATE PLAN

Screening Activity & CPT Code	CPT/HCPCS Descriptors	Base Payment Rate
Immunization (continued) Note from MHD: Vaccines are paid by NDC in the physician's office and clinics for adults. For children, most vaccines are covered by the Vaccines for Children program and the vaccine ingredient is provided by the federal government. The provider can only bill MHD for the administration of the vaccine. The administration amount is \$5.35 per component.		
90707	Measles, mumps and rubella virus vaccine (MMR), live	\$33.94
90716	Varicella virus vaccine, live	\$58.98
90696	Diphtheria, tetanus toxoids, acellular pertussis vaccine and poliovirus vaccine, inactivated (DTaP-IPV)	Manually priced
90698	Diphtheria, tetanus toxoids, and acellular pertussis vaccine, haemophilus influenza Type B, and poliovirus vaccine, inactivated (DTaP - Hib - IPV)	\$23.75
90700	Diphtheria, tetanus toxoids, and acellular pertussis vaccine (DTaP)	\$20.31
90714	Tetanus and diphtheria toxoids (Td)	\$16.02
90715	Tetanus, diphtheria toxoids and acellular pertussis vaccine (Tdap)	Manually priced
90723	Diphtheria, tetanus toxoids, acellular pertussis vaccine, Hepatitis B, and poliovirus vaccine, inactivated (DTaP-HepB-IPV)	Manually priced
90713	Poliovirus vaccine, inactivated, (IPV)	\$52.38
90632	Hepatitis A vaccine, adult dosage	Manually priced
90633	Hepatitis A vaccine, pediatric/adolescent	Manually priced
90636	Hepatitis A and hepatitis B (HepA-HepB)	Manually priced
90744	Hepatitis B vaccine, pediatric/adolescent	\$45.07
90746	Hepatitis B vaccine, adult dosage, for intramuscular use	\$54.90
90748	Hepatitis B and Hemophilus influenza b vaccine (HepB-Hib), for intramuscular use	Do Not Pay
90648	Haemophilus influenza b vaccine (Hib)	Manually priced
90649	Human Papilloma virus (HPV) vaccine, types 6, 11, 16, 18 (quadrivalent) 3 dose schedule, for intramuscular use	\$128.28
90650	Human Papilloma virus (HPV) vaccine, types 16, 18, bivalent, 3 dose schedule, for intramuscular use	Do Not Pay
90670	Pneumococcal conjugate vaccine, 13 valent, for intramuscular use	Do Not Pay
90732	Pneumococcal polysaccharide vaccine, 23-valent, adult or immunosuppressed patient dosage, for use in individuals 2 years or older, for subcutaneous or intramuscular use	\$11.49
90680, 90681	Rotavirus vaccine	Manually priced
90734	Meningococcal conjugate vaccine, serogroups A, C, Y and W-135 (tetravalent), for intramuscular use	Manually priced
90736	Zoster (shingles) vaccine, live, for subcutaneous injection	Do Not Pay

MISSOURI REFUGEE STATE PLAN

Screening Activity & CPT Code	CPT/HCPCS Descriptors	Base Payment Rate
Serology and Immunization (continued)		
TB screening		
86480	Tb test cell immun measure [IGRA]	\$83.88
86481	Tb ag response t-cell susp [IGRA]	\$89.84
86580	TST/PPD reading	\$5.67
71010	Chest x-ray, frontal	\$15.76
71020	Chest x-ray, PA and lateral	\$20.46
Stool O & P		
87177 x 2	Ova and parasites smear	\$8.00
treat	Albendazole	Manually priced
Strongyloidiasis Test		
86682	Helminth antibody	\$14.36
treat	Ivermectin	Manually priced
Schistosomiasis Test		
86682	Helminth antibody	\$14.36
treat	Praziquantel	Manually priced
Malaria		
86750	Malaria antibody	\$14.36
87899	Malaria rapid screen and stain	\$16.24
87207 x 3	Parasite blood smear	\$8.12
87798	Malaria PCR, speciation	\$38.08
treat	Atovaquone-Proguanil	Manually priced
Multivitamins		
treat	Multivitamin	Manually priced

ATTACHMENT F: Missouri's Local Public Health Agencies – as of June, 2017

<http://health.mo.gov/living/lpha/lphas.php>

ATTACHMENT G: REFUGEE HEALTH ASSESSMENT REPORT FORM



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
SECTION FOR COMMUNICABLE DISEASE PREVENTION
HEALTH PROGRAM FOR REFUGEES

REFUGEE HEALTH ASSESSMENT REPORT

AN EONA EMPLOYER (JEFFERSON CITY, MO 65102-0570) SERVICE PROVIDED ON NONADMINISTRATIVE BASIS

Save Print Reset

This section is to be filled out by BCDOP

NAME (FAMILY NAME FIRST FOLLOWED BY REMAINING NAME(S))	SOCIAL SECURITY NUMBER	DATE OF BIRTH MO DAY YEAR	SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
WAS SCREENING COMPLETED? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, COMPLETE SECTIONS B THRU F IF NO, CHECK REASON IN SECTION A	CLASSIFICATION <input type="checkbox"/> A <input type="checkbox"/> B	<input type="checkbox"/> B1 IMMIGRANT <input type="checkbox"/> PAROLEE <input type="checkbox"/> ASYLEE <input type="checkbox"/> K1 <input type="checkbox"/> B2 OTHER <input type="checkbox"/> REFUGEE <input type="checkbox"/> K2 <input type="checkbox"/> K3
SPONSOR		DATE RECEIVED	PROCESSING DATE MONTH YEAR
			A-NUMBER
			COUNTY CODE
			ETHNICITY CODE

FILL OUT FORM COMPLETELY

A. IF SCREENING WAS NOT COMPLETED, PLEASE INDICATE THE REASON. CHECK ONLY ONE BOX.

- Locating information was in error or missing.
- The client was never seen by the sponsor.
- The client moved out of county before Health Department contact.
- The client was located but numerous attempts to contact failed.
- The offer for screening was refused.
- The client accepted screening but did not keep the appointment.
- The client began screening but did not return. (Please indicate any known results in Sections B thru D and CIRCLE known diseases in Section E.)
- The client was screened by a private provider.
- Other _____

B. PLEASE CHECK ONE BOX TO INDICATE THE CLIENT'S IMMUNIZATION STATUS.

COMPLETE PRIOR TO HEALTH DEPARTMENT CONTACT
 INCOMPLETE -- TO BE GIVEN BY HEALTH DEPARTMENT
 INCOMPLETE -- TO BE GIVEN BY OTHER PROVIDER
 COMPLETED BY HEALTH DEPARTMENT

C. WAS THE CLIENT REFERRED TO ANY OF THE FOLLOWING PROGRAMS?

	YES	NO
A. FAMILY PLANNING	<input type="checkbox"/>	<input type="checkbox"/>
B. MCH -- MATERNITY CARE	<input type="checkbox"/>	<input type="checkbox"/>
C. MCH -- CHILD CARE	<input type="checkbox"/>	<input type="checkbox"/>
D. WIC	<input type="checkbox"/>	<input type="checkbox"/>

D. PLEASE INDICATE THE FIRST AND LAST DATES OF SCREENING.

A. DATE BEGAN MO DAY YR DATE COMPLETED MO DAY YR

B. NO. OF HOME VISITS NUMBER OF CLINIC VISITS

E. PLEASE INDICATE FINDINGS AND ACTION TAKEN. CHECK ONE BOX PER LINE ONLY.

	CLIENT NOT EXAMINED	CLIENT EXAMINED			
		CONDITION NOT PRESENT	FOLLOWUP BY HEALTH DEPT	CONDITION PRESENT	FOLLOWUP BY OTHER PROVIDER
A. HEPATITIS B (SURFACE ANTIGEN POSITIVE)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. PARASITIC INFECTIONS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. GROSS NUTRITIONAL PROBLEMS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. VISUAL IMPAIRMENT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. HEARING IMPAIRMENT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F. DENTAL PROBLEMS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G. HIGH RISK PREGNANCY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H. OTHER (SPECIFY)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

F. TUBERCULOSIS EXAMINATION

TUBERCULIN (MANTOUX) SKIN TEST
 DATE GIVEN: / / DATE READ: / / mm of INDURATION
 NOT DONE REASON: _____

CHEST X-RAY:
 DATE GIVEN: / / NORMAL ABNORMAL CAUTARY NONCAUTARY
 NOT DONE REASON: _____

CHEMOTHERAPY:
 TWO OR MORE TB DRUGS ONE TB DRUG NO TB DRUGS
 REASON: _____

G. BLOOD LEAD LEVELS (RECORD B.L. ON ALL CHILDREN 16 YEARS OF AGE AND YOUNGER) RECORD AS MGDL - MICROGRAMS PER DECILITER

COMMENTS:

n

MO 500 380 (2/88)

DISTRIBUTION: WHITEHOUSE, CANARY/CLOGAL HEALTH UNIT, PINNACLES PENDING

8/82

REFUGEE HEALTH ASSESSMENT REPORT FORM (CONT)

DEFINITIONS

COMPLETION OF HEALTH SCREENING - Health screening is completed when (a) immunization status has been determined, (b) items in section E as appropriate have been found present or absent, (c) it has been determined the client does or does not need services available in section C, (d) the appropriate referral has been made and follow-up responsibilities assigned. When this is done, please complete the form and return to the Missouri Department of Health and Senior Services, Section of Epidemiology Services.

HOME VISITS - Include visits made by any local health unit employee involved in the screening process when the refugee cannot come to the health unit to receive or complete screening. Does not include follow-up visits.

CLINIC VISITS - Anytime a refugee comes to the clinic for health screening related purposes. Does not include visits made to the clinic for services in Section C.

EXAMINATION - Any evaluation for the purpose of screening for, or diagnosis of, health condition; includes historical review, physical and mental evaluation.

FOLLOW-UP - Any activities following examination that result in the individual's health problem being resolved. These activities may:
 1. Assure that a recommended/required treatment regimen is adhered to.
 2. Ascertain that instructions and directions were thoroughly understood and carried out.
 3. Include telephone calls, personal contact by home visits, clinical visits, or visits to other health professionals.

SECTION E

- (a) **Hepatitis B** - Self-explanatory
- (b) **Parasitic infections** - Identifications of pathogenic parasites in the feces of a person.
- (c) **Gross nutritional problem** - A condition characterized by anemia or abnormal growth parameters.
- (d) **Visual impairment** - A condition which requires additional or professional diagnosis for treatment and care as determined by the local health unit.
- (e) **Hearing impairment** - A condition which requires additional or professional diagnosis for treatment and care as determined by the local health unit.
- (f) **Dental problems** - Complaint of pain, swelling or discomfort, and visible infection or broken-down tissues; for example, broken teeth, gum boils, obvious carious lesions, etc.
- (g) **High risk pregnancy** - Self-explanatory.

PARASITE CODES

- 01 *Ascaris lumbricoides*
- 02 *Chilomastix mesnili*
- 03 *Clonorchis sinensis*
- 04 *Endolimax nana*
- 05 *Entamoeba coli*
- 06 *Entamoeba hartmanni*
- 07 *Entamoeba histolytica*
- 08 *Enterobius vermicularis*
- 09 *Giardia lamblia*
- 10 Hookworm
- 11 *Hymenolepis nana*
- 12 *Iodamoeba butschlii*
- 13 *Isospora belli*
- 14 *Metagonimus heterophytes*
- 15 *Strongyloides* sp.
- 16 *Taenia saginata*
- 17 *Taenia* sp.
- 18 *Trichuris trichiura*
- 19 Other

ETHNICITY CODES

Afghanistan	110	Iran	460
Albania	120	Iraq	465
Argentina	150	Laos, Hmong	531
Bulgaria	245	Laos, Mien	532
Burma	250	Laos, Other	533
Cambodia	255	Malaysia	580
Chile	275	Pakistan	700
China	280	Poland	730
Cuba	300	Rumania	755
Czechoslovakia	310	Somalia	800
El Salvador	330	Soviet Union	825
Ethiopia	335	Thailand	875
Haiti	420	Vietnam	945
Hungary	445	Other	998
Indonesia	456	Unknown	999

MO 680-0330 (2-00)

ATTACHMENT H: NONDISCRIMINATION POLICY STATEMENT

[HTTP://DSS.MO.GOV/FILES/MISSOURI-NONDISCRIMINATION-POLICY-STATEMENT.HTM](http://dss.mo.gov/files/missouri-nondiscrimination-policy-statement.htm)

ATTACHMENT I: EQUAL EMPLOYMENT OPPORTUNITY POLICY STATEMENT

[HTTP://DSS.MO.GOV/FILES/DSS-EQUAL-EMPLOYMENT-OPPORTUNITY-POLICY.PDF](http://dss.mo.gov/files/dss-equal-employment-opportunity-policy.pdf)

ATTACHMENT J: ASSURANCES – NON-CONSTRUCTION PROGRAM

View Burden Statement

OMB Number 4040-0007
Expiration Date 06/30/2014**ASSURANCES - NON-CONSTRUCTION PROGRAMS**

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0040), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

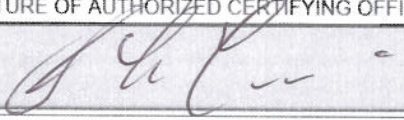
NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

1. Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
8. Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.

MISSOURI REFUGEE STATE PLAN

9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements.
10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.)
14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.
19. Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL	TITLE
	Acting Dept. Director
APPLICANT ORGANIZATION	DATE SUBMITTED
Dept. of Social Services	12/15/17

Standard Form 424B (Rev. 7-97) Back

ATTACHMENT K: CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

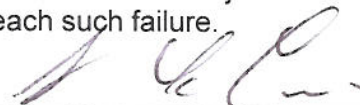
The undersigned certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.



12/15/17

Director's Signature

Date

ATTACHMENT L: CERTIFICATION REGARDING DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS

Certification Regarding Debarment, Suspension, and Other Responsibility Matters--Primary Covered Transactions

Instructions for Certification

1. By signing and submitting this proposal, the prospective primary participant is providing the certification set out below.

2. The inability of a person to provide the certification required below will not necessarily result in denial of participation in this covered transaction. The prospective participant shall submit an explanation of why it cannot provide the certification set out below. The certification or explanation will be considered in connection with the department or agency's determination whether to enter into this transaction. However, failure of the prospective primary participant to furnish a certification or an explanation shall disqualify such person from participation in this transaction.

3. The certification in this clause is a material representation of fact upon which reliance was placed when the department or agency determined to enter into this transaction. If it is later determined that the prospective primary participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.

4. The prospective primary participant shall provide immediate written notice to the department or agency to which this proposal is submitted if at any time the prospective primary participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.

5. The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549. You may contact the department or agency to which this proposal is being submitted for assistance in obtaining a copy of those regulations.

6. The prospective primary participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency entering into this transaction.

7. The prospective primary participant further agrees by submitting this proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction," provided by the department or agency entering into this covered transaction, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

8. A participant in a covered transaction may rely upon a certification of a prospective

participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs.

9. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

10. Except for transactions authorized under paragraph 6 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.

Certification Regarding Debarment, Suspension, and Other Responsibility Matters-- Primary Covered Transactions

(1) The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:

(a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded by any Federal department or agency;

(b) Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

(c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and

(d) Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.

(2) Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion--Lower Tier Covered Transactions

Instructions for Certification

1. By signing and submitting this proposal, the prospective lower tier participant is providing the certification set out below.

2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

3. The prospective lower tier participant shall provide immediate written notice to the person to which this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or had become erroneous by reason of changed circumstances.

4. The terms "covered transaction", "debarred, suspended", "ineligible", "lower tier covered transaction", "participant", "person", "primary covered transaction", "principal", "proposal", and "voluntarily excluded", as used in this clause, have the meaning set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.

5. The prospective lower tier participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.

6. The prospective lower tier participant further agrees by submitting this proposal that it will include this clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from covered transactions, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs.

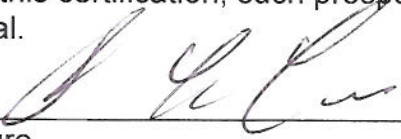
8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

Certification Regarding Debarment, Suspension, Ineligibility an Voluntary Exclusion--
Lower Tier Covered Transactions

(1) The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.

(2) Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

Signature  Date 12/15/17

ATTACHMENT M: CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

This certification is required by the regulations implementing the Drug-Free Workplace Act of 1988: 45 CFR Part 76, Subpart, F. Sections 76.630(c) and (d)(2) and 76.645(a)(1) and (b) provide that a Federal agency may designate a central receipt point for STATE-WIDE AND STATE AGENCY-WIDE certifications, and for notification of criminal drug convictions. For the Department of Health and Human Services, the central point is: Division of Grants Management and Oversight, Office of Management and Acquisition, Department of Health and Human Services, Room 517-D, 200 Independence Avenue, SW Washington, DC 20201.

Certification Regarding Drug-Free Workplace Requirements (Instructions for Certification)

1. By signing and/or submitting this application or grant agreement, the grantee is providing the certification set out below.
2. The certification set out below is a material representation of fact upon which reliance is placed when the agency awards the grant. If it is later determined that the grantee knowingly rendered a false certification, or otherwise violates the requirements of the Drug-Free Workplace Act, the agency, in addition to any other remedies available to the Federal Government, may take action authorized under the Drug-Free Workplace Act.
3. For grantees other than individuals, Alternate I applies.
4. For grantees who are individuals, Alternate II applies.
5. Workplaces under grants, for grantees other than individuals, need not be identified on the certification. If known, they may be identified in the grant application. If the grantee does not identify the workplaces at the time of application, or upon award, if there is no application, the grantee must keep the identity of the workplace(s) on file in its office and make the information available for Federal inspection. Failure to identify all known workplaces constitutes a violation of the grantee's drug-free workplace requirements.
6. Workplace identifications must include the actual address of buildings (or parts of buildings) or other sites where work under the grant takes place. Categorical descriptions may be used (e.g., all vehicles of a mass transit authority or State highway department while in operation, State employees in each local unemployment office, performers in concert halls or radio studios).
7. If the workplace identified to the agency changes during the performance of the grant, the grantee shall inform the agency of the change(s), if it previously identified the workplaces in question (see paragraph five).
8. Definitions of terms in the Nonprocurement Suspension and Debarment common rule and Drug-Free Workplace common rule apply to this certification. Grantees' attention is called, in particular, to the following definitions from these rules:

Controlled substance means a controlled substance in Schedules I through V of the Controlled Substances Act (21 U.S.C. 812) and as further defined by regulation (21 CFR 1308.11 through

1308.15);

Conviction means a finding of guilt (including a plea of nolo contendere) or imposition of sentence, or both, by any judicial body charged with the responsibility to determine violations of the Federal or State criminal drug statutes;

Criminal drug statute means a Federal or non-Federal criminal statute involving the manufacture, distribution, dispensing, use, or possession of any controlled substance;

Employee means the employee of a grantee directly engaged in the performance of work under a grant, including: (i) All direct charge employees; (ii) All indirect charge employees unless their impact or involvement is insignificant to the performance of the grant; and, (iii) Temporary personnel and consultants who are directly engaged in the performance of work under the grant and who are on the grantee's payroll. This definition does not include workers not on the payroll of the grantee (e.g., volunteers, even if used to meet a matching requirement; consultants or independent contractors not on the grantee's payroll; or employees of subrecipients or subcontractors in covered workplaces).

Certification Regarding Drug-Free Workplace Requirements

Alternate I. (Grantees Other Than Individuals)

The grantee certifies that it will or will continue to provide a drug-free workplace by:

- (a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
- (b) Establishing an ongoing drug-free awareness program to inform employees about --
 - (1) The dangers of drug abuse in the workplace;
 - (2) The grantee's policy of maintaining a drug-free workplace;
 - (3) Any available drug counseling, rehabilitation, and employee assistance programs;and
- (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
- c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);
- (d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will --
 - (1) Abide by the terms of the statement; and
 - (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
- (e) Notifying the agency in writing, within ten calendar days after receiving notice under paragraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

(f) Taking one of the following actions, within 30 calendar days of receiving notice under paragraph (d)(2), with respect to any employee who is so convicted --

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

(g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e) and (f).

(B) The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

Place of Performance (Street address, city, county, state, zip code)

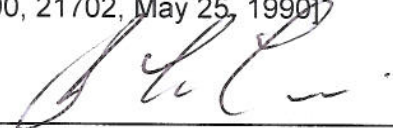
Missouri Department of Social Services, 615 Howerton Court, PO Box 2320
Jefferson City, Cole County, Missouri 65102-2320

Check if there are workplaces on file that are not identified here.

Alternate II. (Grantees Who Are Individuals)

(a) The grantee certifies that, as a condition of the grant, he or she will not engage in the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance in conducting any activity with the grant;

(b) If convicted of a criminal drug offense resulting from a violation occurring during the conduct of any grant activity, he or she will report the conviction, in writing, within 10 calendar days of the conviction, to every grant officer or other designee, unless the Federal agency designates a central point for the receipt of such notices. When notice is made to such a central point, it shall include the identification number(s) of each affected grant. [55 FR 21690, 21702, May 25, 1990]



Signature

12/15/12
Date

ATTACHMENT N: CERTIFICATION REGARDING ENVIRONMENTAL TOBACCO SMOKE

Public Law 103227, Part C Environmental Tobacco Smoke, also known as the Pro Children Act of 1994, requires that smoking not be permitted in any portion of any indoor routinely owned or leased or contracted for by an entity and used routinely or regularly for provision of health, day care, education, or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law does not apply to children's services provided in private residences, facilities funded solely by Medicare or Medicaid funds, and portions of facilities used for inpatient drug or alcohol treatment. Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1000 per day and/or the imposition of an administrative compliance order on the responsible entity by signing and submitting this application the applicant/grantee certifies that it will comply with the requirements of the Act.

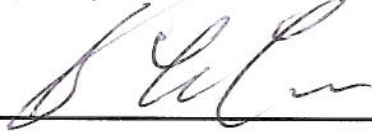
The applicant/grantee further agrees that it will require the language of this certification be included in any subawards which contain provisions for the children's services and that all subgrantees shall certify accordingly.

Signature  Date 

ATTACHMENT O: CERTIFICATION REGARDING MAINTENANCE OF EFFORT

In accordance with the applicable program statute(s) and regulation(s), the undersigned certifies that financial assistance provided by the Administration for Children and Families, for the specified activities to be performed under the Refugee Resettlement Program by the State of Missouri (Applicant Organization), will be in addition to, and not in substitution for, comparable activities previously carried on without Federal assistance.

Director's Signature



Date

