

Last Updated: 2/03/25

GMIS Portal Notice of Award (NOA)



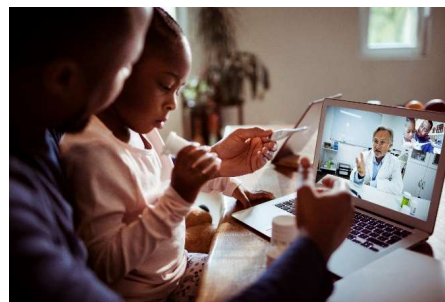
Duration: 60 Minutes



Audience: Primary & Secondary Users

Learning Objectives

- ✓ Analyze award notifications and utilize navigation tools to locate and manage award information.
- ✓ Execute procedures for accepting or declining from an award.
- ✓ Adjust and revise budgets accurately to reflect project changes and funding requirements.
- ✓ Modify workplans to align with project goals and new directives effectively.
- ✓ Withdraw a Funding Award.
- ✓ Complete new Forms.



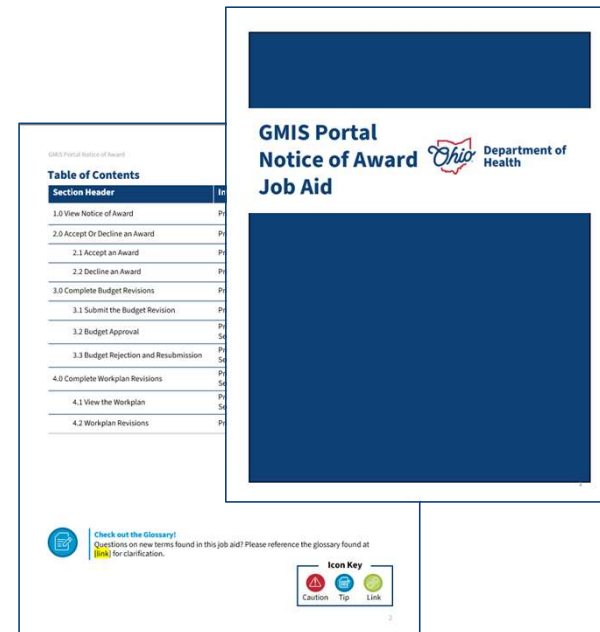
Please Reference the Job Aid!

The following Job Aid Sections can be referenced for greater detail and a more in-depth overview for content covered in the next slides:

- **1.0 View Notice of Award.**
- **2.0 Accept or Decline an Award.**
- **3.0 Complete Budget Revisions.**
- **4.0 Complete Workplan Revisions.**
- **5.0 Withdraw a Funding Award**
- **6.0 Complete Added Forms**



GMIS Portal Notice of Award Job Aid.



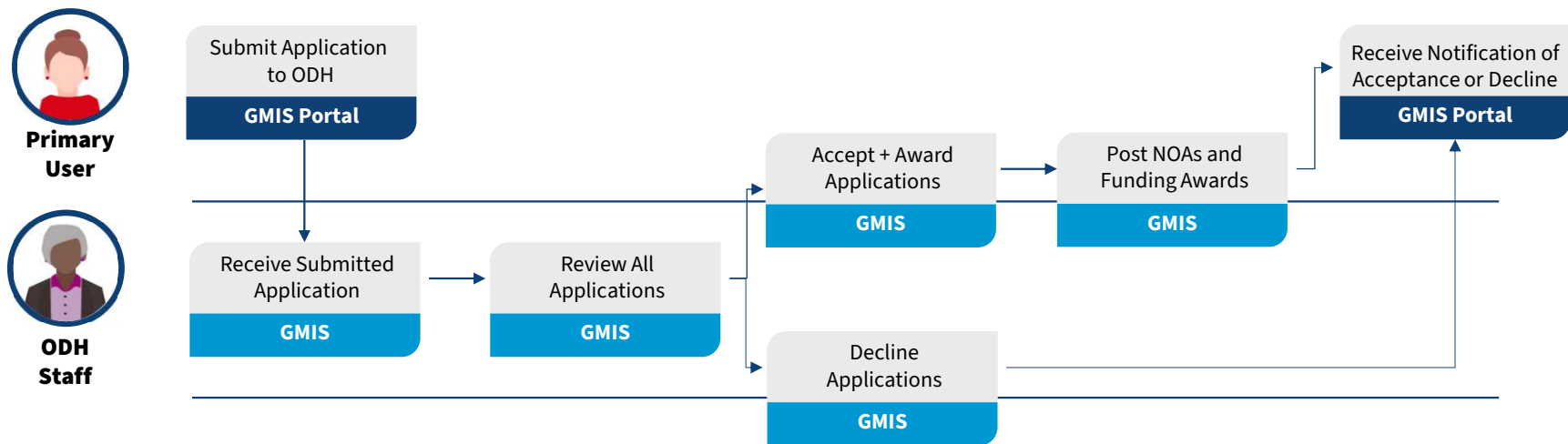
Notice of Award Overview



Audience: Primary & Secondary Users

NOA Process

Here is a high-level overview for the Notice of Award (NOA) Process



Receive a NOA



Audience: Primary & Secondary Users



View section 1.0 View Notice of Award.

View My Awards

Awards can be accessed through the 'My Awards' screen once logged into the GMIS Portal.

ODH Grants
The Ohio Department of Health offers grants

Funding Awards
My Awards ▼

9 items • Sorted by Award Number • Filtered by All funding awards • Updated a few seconds ago

Search this list...

	<input type="checkbox"/>	Award Num... ▼	Funding Award Name ▼	Solicitation ▼	Status ▼	Amount ▼	A... ▼
1	<input type="checkbox"/>	00000010	00510012SP0528	SP2028 Integration of Oral Health into Prenatal Car...	Pending Acceptance	\$90,000.00	
2	<input type="checkbox"/>	00000009	00510012SP0428	SP2028 Integration of Oral Health into Prenatal Car...	Pending Acceptance	\$10,000.00	
3	<input type="checkbox"/>	00000008	00510012SP0328	SP2028 Integration of Oral Health into Prenatal Car...	Pending Acceptance	\$400,000....	



New Awards – Pending Acceptance

If you have received an award for a grant, the status will automatically be 'Pending Acceptance'.

Award Layout

View the specific details of Award Status and Amount information through the Notice of Award PDF.

[Home](#)
[Browse Grants](#)
[My Applications](#)
[My Awards](#)
[My Agency Profile](#)
[Reports](#)

Funding Award
00510012SP0528

Programmatic Contact Person
Joe Barnard

Subrecipient
Athens County Health Department

Amount
\$90,000.00

Status
Pending Acceptance

[Details](#)
[Workplan](#)
[Budget](#)
[Expense Reports](#)
[Progress Reports](#)
[Deliverables](#)
[Tasks](#)
[Files](#)

Files (0)

Add Files

Accept / Decline NOA

Withdrawal

Ohio Department of Health

Notice of Award

246 North High Street, Columbus Oh, 43215

1. Date Issued: 07/31/2024	2. Program Title:									
3. Revision: Initial										
4. Project: 00510012SP0428	6. Project Director - Agency Name, Agency Address									
5. EIN: S3333456	Sarah A. Augustin Athens County Health Department 1550 Sheridan Drive									
7. Budget Period: 07/01/2024 to 06/30/2024										
Project Period: to										
8. ODH Award computation for grant:										
a. Amount of current ODH funding: \$0 b. Amount of ODH funding this action: \$10,000 c. Total ODH funding (from 10-4): \$10,000										
9. Source of Financial Assistance:										
(a.) ODH Funding: <table> <tr> <th>Source</th> <th>Authorization</th> <th>Grant Funds</th> </tr> <tr> <td>PS-001</td> <td>122121212</td> <td>\$10,000</td> </tr> <tr> <td colspan="2">Total ODH Funding:</td> <td>\$10,000</td> </tr> </table>		Source	Authorization	Grant Funds	PS-001	122121212	\$10,000	Total ODH Funding:		\$10,000
Source	Authorization	Grant Funds								
PS-001	122121212	\$10,000								
Total ODH Funding:		\$10,000								
(b.) The Ohio Department of Health authors Athens County Health Department to expend the following funding sources at the stated percentage (%) of the total approved budget funding sources: <table> <tr> <th>Total Subgrantee Funding Sources</th> <th>Total Approved Budget</th> </tr> <tr> <td></td> <td>\$10,000</td> </tr> </table>		Total Subgrantee Funding Sources	Total Approved Budget		\$10,000					
Total Subgrantee Funding Sources	Total Approved Budget									
	\$10,000									
10. Program Income will be used in accordance with:										
<input type="checkbox"/> Deductive Alternative: Used to reduce the amount budgeted for grant funds and applicant share proportionately. <input type="checkbox"/> Additive Alternative: Used to further the objectives of the legislation under which the grant was made and increase the total budget. All expenditures of grant funds must have prior written approval in the form of a budget revision. <input checked="" type="checkbox"/> Reaching Alternative: Used to finance part or all of the cost sharing requirement and will reduce the amount of applicant share. Any Program Income generated in excess of 10% (Program Income) must be treated in accordance with the Deductive Alternative.										
11. This Award is subject to the terms and conditions incorporated directly in the following:										
a. The Program legislation cited in the Authorization Section above. b. The Ohio Department of Health "Grants Administration Policy and Procedures". c. The Ohio Department of Health Solicitations and Subrecipient Program Application. d. The notice of award agreement including terms and conditions, if any, noted below in Section 12, Remarks.										
12. Remarks: Other terms and conditions attached.										
GRANT AWARDS IS CONTINGENT UPON THE AVAILABILITY OF FUNDS. In compliance with Ohio Grants Administration Policy, payments are based on actual expenditures and a cost reimbursement basis. Your initial payment will be based upon submission of an expenditure report. When payment is issued, specific information will be provided through your ODH account's Payment link. A Special Conditions link is available for viewing and responding to special conditions within OAH. The 30-day time period in which the subrecipient must respond to special conditions will begin when the link is available. Subsequent payments will be subject to and subsequent responses to the special conditions or a plan detailing how those special conditions will be satisfied is submitted in OAH.										
ODH makes awards to subgrantee entities at its sole discretion. Funds are subject to Section 8, Article XVIII of the Ohio Constitution and the terms and conditions set forth in sections 21, 33, 35, and 37 of the Ohio Revised Code. This award is subject to the availability of federal or state funds (whichever is applicable). ODH may terminate the grant at any time should it be determined that the grant is not being used in accordance with the terms and conditions of the award. The Award, signed by the Director of the Department of Health, is effective for the Budget Period dates in section 7 above. Acceptance of the grant terms and conditions is acknowledged by the subrecipient upon receipt and expenditure of funds through the grant system.										
Bruce Vanderhoff, MD, MBA										

Department of Health

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Accepting or Declining a NOA



Audience: Primary Users



Primary Users Must Manually Accept or Decline Awards!

Historically, users did not have to specify acceptance of awards, and awards were automatically accepted. Primary Users must now accept or decline awards in the GMIS Portal.

The screenshot shows the 'My Awards' page in the GMIS Portal. At the top, there is a navigation bar with links: Home, Browse Grants, My Applications, My Awards (active), My Agency Profile, and Reports. Below the navigation bar, the main content area displays details for a 'Funding Award' with ID '00510012SP0528'. A red box highlights the 'Accept / Decline NOA' button, with a mouse cursor pointing at it. To the right of this button is a 'Withdrawal' button. Below the award ID, there is a table with four columns: Programmatic Contact Person, Subrecipient, Amount, and Status. The values are: Joe Barnard, Athens County Health Department, \$90,000.00, and Pending Acceptance. Below the table, there is a tabbed interface with tabs for Details, Workplan, Budget, Expense Reports, Progress Reports, Deliverables, Tasks, and Files (selected). Under the 'Files' tab, there is a section titled 'Files (0)' with an 'Add Files' button. Below this, there is a table with columns: Title, Owner, Last Modified, and Size.

Programmatic Contact Person	Subrecipient	Amount	Status
Joe Barnard	Athens County Health Department	\$90,000.00	Pending Acceptance

Title	Owner	Last Modified	Size
-------	-------	---------------	------



View section 2.0 Accept or Decline an Award.

Accepting or Declining the NOA

After properly reviewing all award information, primary users may accept or decline the award.

Accept/Decline NOA

A Terms and Conditions agreement acts as a legal contract between you (the company) and the user. It's where you maintain your rights to exclude users from your app in the event that they abuse your website/app, set out the rules for using your service and note other important details and disclaimers.

Having a Terms and Conditions agreement is completely optional. No laws require you to have one. Not even the super-strict and wide-reaching General Data Protection Regulation as such. Your Terms and Conditions agreement will be uniquely yours. While some clauses are standard and commonly seen in pretty much every Terms and Conditions agreement, it's up to you to set the rules and guidelines that the user must agree to.

Terms and Conditions agreements are also known as Terms of Service or Terms of Use agreements. These terms are interchangeable, practically speaking.

☐ Accept NOA

☐ Decline NOA

Submit

Confirm

Are you sure you would like to accept this NOA?

Yes

Cancel

Back

Budget Revisions



Audience: Primary & Secondary Users

Budget Revisions Are On The Funding Award

If a Budget Revision is requested by ODH, details for the revision will be found in the 'Tasks' tab on the funding award.

The screenshot displays the 'Funding Award' page for ID 00510012SP0428. At the top, there are buttons for 'Accept / Decline NOA' and 'Withdrawal'. Below this, key information is listed: Programmatic Contact Person (Joe Barnard), Subrecipient (Athens County Health Department), Amount (\$125,000.00), and Status (Funded). A navigation bar includes tabs for Details, Workplan, Budget, Expense Reports, Progress Reports, Deliverables, Tasks (highlighted with a red box), and Files. The 'Tasks' section shows 'Grant Tasks (1)' with a sub-header '1 item • Updated 8 minutes ago'. A table below lists the task details, with the first row highlighted by a red box.

	Subject	Name	Record Type	Status	Action Required by Date
1	Budget Revision	GT-0040	Special Condition	Open	7/31/2024

Budget Navigation

Download Template

Download Template

This downloads an Excel template file that can be completed and then re-uploaded. It will contain all budget line items for the tab.

Upload Template

Upload Template

This allows the user to upload the completed Excel template file, containing all budget line items.

Add Row

Add Row

If the user would like to enter each budget line item manually instead of uploading a budget Excel spreadsheet, they can select Add Row.

Save & Close

Save & Close

This saves the budget line item and closes the input screen.

Save & Edit Next

Save & Edit Next

This saves the budget line item and goes to the next budget line item to edit.


Edit



Pencil Icon can be used to edit a budget line item.

Navigate To The Budget Tab

After reading details of the Grant Task, navigate to the 'Budget' tab and select 'New Budget Revision'.

 Funding Award
00510012SP0428

Accept / Decline NOAWithdrawal

Programmatic Contact Person
Joe Barnard

Subrecipient
Athens County Health Department

Amount
\$125,000.00

Status
Funded

DetailsWorkplanBudgetExpense ReportsProgress ReportsDeliverablesTasksFiles

Funding Award Budget

New Budget Revision

Budget Name	Status	Period Start Date	Period End Date	Amount
FA-Budget - 00510012SP0428	Active	Jul 9, 2024	Aug 10, 2024	\$150,000.00

Navigate the Budget

Summary Personnel Other Direct Costs Equipment Contracts Deliverables

Category	Total Budgeted Amount
Personnel	\$0
Other Direct Costs	\$0
Equipment	\$0
Contracts	\$0
Deliverables	\$0
Indirect Costs	\$0
Total Amount	\$0

Complete

New Other Direct Cost

* Description
Select an Option

* Amount

* Funding Activity
Select an Option

☐ Indirect Allowed

* Narrative

Cancel

Save & Close

Save & Add More



DO NOT Select 'Complete' Button!

All budget tabs must be filled out before selecting the 'Complete' button at the bottom of the Summary screen to ensure all budget items are properly recorded.

Submit the Budget Revision

Budget Revision

Select if the budget revision was assigned to you by ODH. This is when the amount requested is being revised to match the amount rewarded.

Budget Revision – Reallocation

Select if the budget reallocation was assigned to you by ODH. This is when the amount requested is being revised to match the amount awarded, in circumstances when additional funding is awarded or reduced.

Budget Adjustment

This is when the amount requested is NOT being revised. Utilize this to change any line items within a budget category, but the overall budget category total is not being changed.

The screenshot shows a web form for submitting a budget revision. At the top, there are tabs: Summary, Personnel, Other Direct Costs, Equipment, Contracts, and Deliverables. The 'Summary' tab is selected. Below the tabs is a table with two columns: 'Category' and 'Total Budgeted Amount'. The table lists the following categories and amounts: Personnel (\$76,500), Other Direct Costs (\$25,500), Equipment (\$35,000), Contracts (\$13,000), Deliverables (\$0), Indirect Costs (\$0), and a 'Total Amount' row showing \$150,000. A red dashed line originates from the 'Budget Revision' and 'Budget Revision – Reallocation' headers and points to the 'Total Amount' row. Below the table, there is a section for '* Comments' with a text input field. To the right of the comments is a dropdown menu for '* Revision Type' with the text 'Select an Option'. At the bottom right of the form are two buttons: 'Back' and 'Submit'.

Category	Total Budgeted Amount
Personnel	\$76,500
Other Direct Costs	\$25,500
Equipment	\$35,000
Contracts	\$13,000
Deliverables	\$0
Indirect Costs	\$0
Total Amount	\$150,000

* Comments



* Revision Type
Select an Option

Back Submit

Equipment Waivers

If there is a request to purchase equipment after the first 6 months of the grant, you will be required to submit an Equipment Waiver. Equipment Waivers can be found on the budget tab.

Summary Personnel Other Direct Costs **Equipment** Contracts Deliverables

Description	Activity	Quantity	Unit Price	Amount	Indirect Allow...	Narrative	
Camera	Activity123	1	5000	\$5,000		test	Submit Waiver 
Copier	Activity123	1	15000	\$15,000		test	Submit Waiver 

Back



Waiver Requirements

While there is not a formal template for an Equipment Waiver, your request must include the item name, quantity, unit cost, and the reason why the equipment is needed.

Submitting the Equipment Waiver

Submit Waiver

Upload Waiver

Upload Files

Or drop files

Equipment Waiver 9.4.docx

Funding Award
00510012SP0428

Accept / Decline NOA

Withdrawal

Programmatic Contact Person
Joe Barnard

Subrecipient
Athens County Health Department

Amount
\$125,000.00

Status
Funded

Details

Workplan

Budget

Expense Reports

Progress Reports

Deliverables

Tasks

Files

Grant Tasks (3)

3 Items - Updated a few seconds ago

	Subject	Name	Record Type	Status	Action Required by...
1	<u>Budget Revision</u>	GT-0040	Special Condition	Completed-Approved	7/01/2024
2	<u>Expense Report - M3 - Extension Request Task</u>	GT-0041	Extension Request	Completed-Approved	
3	<u>Submit Waiver - 09/04/2024</u>	GT-0042	Equipment Waiver	Submitted	

Cancel

Submit Waiver

Workplan Revisions



Audience: Primary & Secondary Users

Workplan

Goal

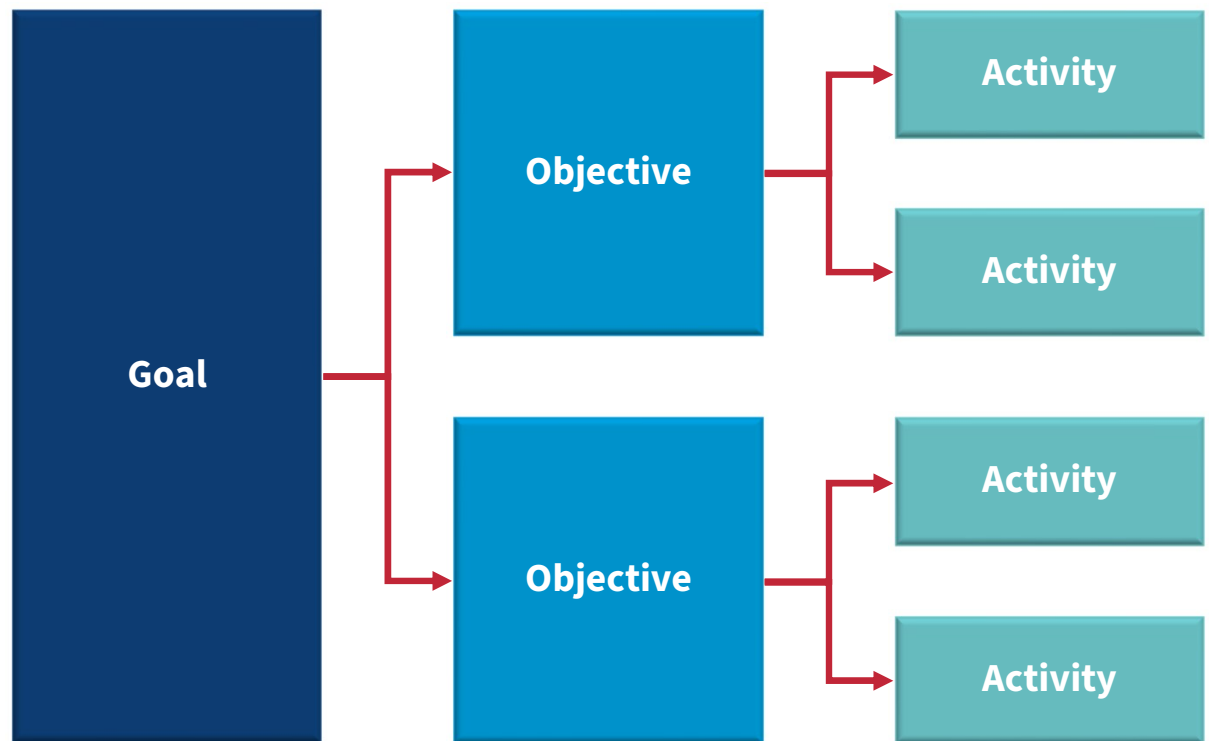
The overarching category – typically long term and represent larger purpose of workplan.

Objective

The measurable targets – contain measurable steps to achieve your goal.


Activity

The concrete actions or tasks – will directly achieve the objective.



Viewing A Workplan Revision

In some circumstances, ODH may request a revision to the Workplan to modify an Agency's goals, objectives, or activities. This is found on the Tasks tab of the Funding Award.

 Funding Award
00510012SP2725

Accept / Decline NOARequest Withdrawal


Programmatic Contact Person
Joe Barnard

Subrecipient
Athens County Health Department

Amount
\$1,000.00

Status
Funded

DetailsWorkplanBudgetExpense ReportsProgress ReportsDeliverables**Tasks**Files

 Grant Tasks (1)
1 item • Updated a few seconds ago

	Subject	Name	Record Type	Status	Action Required by Date
1	Workplan Revisions	GT-0101	Special Condition	Open	

Editing Goals, Objectives, and Activities

✓ FA-IA-0000000221 Workplan

Name: FA-IA-0000000221 Workplan

Status: Active

Description: New Workplan Description

Revision Overview:

Edit Workplan

✓ FA-Improve oral health and hygiene

Description: To improve oral health and hygiene outcomes for underserved populations within the county by increasing access to preventive dental services, education, and community outreach. DEMO UPDATED

SMARTIE: true

Edit Goal

01

✓ FA-Increase Access to Preventive Dental Services

Description: Increase Access to Preventive Dental Services by completing the activities related to improve overall oral health and hygiene.

Key Indicator: Key indicator is number of prevention centers and clinic

External Partner:

Edit Objective

02

Activity Name	Proposed Star...	Proposed Co...	Key Personnel	Plan to Evalua...	
FA-Activity 1.2: Org...	Nov 30, 2024	Feb 27, 2025	Local schools and ...	Total number of ev...	<div><div></div><div>03</div></div>

Withdraw a Funding Award



Audience: Primary & Secondary Users

Withdraw a Funding Award

Navigate to the Funding Award to Withdraw.

Funding Award
00220011BA0124

Accept / Decline NOAWithdrawal

Programmatic Contact Person
Ben Low

Subrecipient
Ohio QA Test 7

Amount
\$15,000.00

Status
Funded

DetailsWorkplanBudgetExpense ReportsProgress ReportsDeliverablesTasksFiles

Expense Report

Name	Period Start Date	Period End Date	Status	Due Date	Description	
Expense Report - M1	08/20/2024	09/19/2024	Approved	08/30/2024, 04:00 PM	Month 1	Edit
Expense Report - M2	09/20/2024	10/19/2024	Approved	11/05/2024, 04:00 PM	Month 2	Edit
Expense Report - M3	10/20/2024	11/19/2024	Approved	12/05/2024, 04:00 PM	Month 3	Edit
Expense Report - M4	11/20/2024	12/19/2024	Approved	01/05/2025, 04:00 PM	Month 4	Edit
Expense Report - M5	12/20/2024	01/19/2025	Approved	02/05/2025, 04:00 PM	Month 5	Edit
Expense Report - M6	01/20/2025	02/19/2025	Approved	03/05/2025, 04:00 PM	Month 6	Edit
Expense Report - M7	02/20/2025	03/19/2025	Cancelled	04/05/2025, 04:00 PM	Month 7	Edit
Expense Report - M8	03/20/2025	04/19/2025	Cancelled	05/05/2025, 04:00 PM	Month 8	Edit
Expense Report - M9	04/20/2025	05/19/2025	Cancelled	06/05/2025, 04:00 PM	Month 9	Edit
Expense Report - M10	05/20/2025	06/19/2025	Cancelled	07/05/2025, 04:00 PM	Month 10	Edit
Expense Report - M11	06/20/2025	07/19/2025	Cancelled	08/05/2025, 04:00 PM	Month 11	Edit
Expense Report - M12	07/20/2025	08/20/2025	Cancelled	09/05/2025, 04:00 PM	Month 12	Edit
Expense Report - Final	08/20/2024	08/20/2025	Draft	09/05/2025, 04:00 PM	Final	Edit



View section 5.0 Withdraw a Funding Award.

Completing New Forms



Audience: Primary & Secondary Users

Complete New Forms

New requested forms for completion will be found on the 'Forms' tab of the Funding Award.

The screenshot displays the 'Forms' tab for a specific funding award. The top section shows the award details: 'Funding Award 00510012DN0225', 'Programmatic Contact Person Elizabeth Augustini', 'Subrecipient Athens County Health Department', 'Amount \$75,000.00', and 'Status Funded'. Below this is a navigation bar with tabs: 'Details', 'Workplan', 'Budget', 'Expense Reports', 'Progress Reports', 'Deliverables', 'Tasks', 'Files', and 'Forms' (which is highlighted). The 'Forms' tab shows a table with the following columns: 'Name', 'Status', 'Form Type', and 'Description'. A single form is listed: 'Sex Trafficking End of Grant Assessment' with a status of 'Draft' and a form type of 'Dynamic'. An 'Edit' button is visible next to the form. A red dotted line connects the 'Edit' button to a detailed view of the form on the right. This detailed view is titled 'Submit Form' and contains the following questions and input fields:

- A text input field containing the number '100'.
- A question: 'Did you provide services to new victims of trafficking during the reporting period? If no, skip to question 5.' with radio button options for 'Yes' (selected) and 'No'.
- A question: 'Of the total number of victims of trafficking served how many were new individuals who received services from your organization for the first time during the reporting period?' with radio button options for 'Yes' and 'No' (selected).
- A question: 'Total number of new potential and/or confirmed victims of sex trafficking during the reporting period.' with a text input field containing the number '10'.
- A blue 'Submit' button.



View section 6.0 Complete Added Forms.

Have Questions?

For any further inquiries or additional support, please reach out to:

Grant.Support@odh.ohio.gov.

Thank You!

We appreciate your time and participation in today's training session. Your engagement is key to our shared success! In today's session you learned how to:

- ✓ Analyze award notifications and utilize navigation tools to locate and manage award information.
- ✓ Execute procedures for accepting or declining from an award.
- ✓ Adjust and revise budgets accurately to reflect project changes and funding requirements.
- ✓ Modify workplans to align with project goals and new directives effectively.
- ✓ Withdraw a Funding Award.
- ✓ Complete new Forms.