Program Support Center Financial Management Portfolio Cost Allocation Services

5600 Fishers Lane | Office 08N144 Rockville, MD 20857 PHONE: (301) 492-4855 FAX: (301) 492-5081

EMAIL: CAS-Bethesda@psc.hhs.gov

February 8, 2024

Lindsey Loveday, CPA
Assistant Controller – Financial Services
University of Oklahoma Health Sciences Center
865 Research Parkway, Suite 560
P.O Box 26901
Oklahoma City, OK 73126

Dear Ms. Loveday:

A copy the facilities and administrative (F&A) cost rate agreement for the University of Oklahoma Health Sciences Center is being sent to you for signature. This agreement reflects an understanding reached between your organization and a member of my staff concerning the rate(s) that may be used in support of your claim for F&A costs on grants and contracts with the Federal Government.

The Office of Management and Budget (OMB) has requested that we reach an agreement with each major institution on the components of published F&A rates. The enclosed forms are provided for that purpose.

Please have the agreement signed by an authorized representative of your organization and return within ten business days of receipt. The signed agreement can be sent to me by email, while retaining the copy for your files. Only when the signed agreement is returned, we will then reproduce and distribute the agreement to the appropriate awarding organizations of the Federal Government for their use.

An F&A cost proposal, together with the supporting information, are required to substantiate your claim for indirect costs under grants and contracts awarded by the Federal Government. Therefore, your next proposal based on actual costs for the fiscal year ending 06/30/2025 is due in our office by 12/31/2025. Please submit your next proposal electronically via email to CAS-Bethesda@psc.hhs.gov.

Sincerely,

Darryl W. Mayes -S

Digitally signed by Darryl W. Mayes -S Date: 2024.02.16.07:14:21 -05'00'

Darryl Mayes, Deputy Director Cost Allocation Services

PLEASE SIGN AND RETURN THE NEGOTIATION AGREEMENT

# **COLLEGES AND UNIVERSITIES RATE AGREEMENT**

EIN: 73-1563627

**ORGANIZATION:** 

University of Oklahoma Health Sciences Center

865 Research Parkway, Suite 560

P.O. Box 26901

Oklahoma City, OK 73126

Date: 02/08/2024

FILING REF.: The preceding

agreement was dated

05/18/2023

The rates approved in this agreement are for use on grants, contracts and other agreements with the Federal Government, subject to the conditions in Section III.

SECTIO	ON I: INDIREC	T COST RATES			
RATE T	YPES: FIXE	D FINAL PRO	V. (PROVIS	SIONAL)	PRED. (PREDETERMINED)
	EFFECTIVE P	<u>ERIOD</u>			
TYPE	FROM	TO	RATE(%)	LOCATION	APPLICABLE TO
FINAL	07/01/2021	06/30/2023	45.00	On Campus	Organized Research
PRED.	07/01/2023	06/30/2026	43.00	On Campus	Organized Research
FINAL	07/01/2021	06/30/2023	35.00	On Campus	Instruction
PRED.	07/01/2023	06/30/2026	34.00	On Campus	Instruction
FINAL	07/01/2021	06/30/2023	33.00	On Campus	Other Sponsored Activities
PRED.	07/01/2023	06/30/2026	32.00	On Campus	Other Sponsored Activities
FINAL	07/01/2021	06/30/2023	26.00	Off Campus	All Programs
PRED.	07/01/2023	06/30/2026	26.00	Off Campus	All Programs
PROV.	07/01/2026	Until Amended			Use same rates and conditions as those cited for fiscal year ending Jun 30, 2026

# \*BASE

Modified total direct costs, consisting of all direct salaries and wages, applicable fringe benefits, materials and supplies, services, travel and up to the first \$25,000 of each subaward (regardless of the period of performance of the subawards under the award). Modified total direct costs shall exclude equipment, capital expenditures, charges for patient care, rental costs, tuition remission, scholarships and fellowships, participant support costs and the portion of each subaward in excess of \$25,000. Other items may only be excluded when necessary to avoid a serious inequity in the distribution of indirect costs, and with the approval of the cognizant agency for indirect costs.

ORGANIZATION: University of Oklahoma Health Sciences Center

**AGREEMENT DATE: 02/08/2024** 

SECTIO	ON I: FRINGE	BENEFIT RATES	5**		
ТҮРЕ	FROM	IQ	RATE(%)	LOCATION	APPLICABLE TO
FIXED	7/1/2022	6/30/2023	30.00	All	Non Spon/Hrly & Sal
FIXED	7/1/2022	6/30/2023	33.80	All	Spon. Hrly & Salaried
FIXED	7/1/2022	6/30/2023	8.30	All	Part Time Employees
FIXED	7/1/2022	6/30/2023	16.80	All	Faculty Limited Benefits
FIXED	7/1/2022	6/30/2023	18.30	All	Res. & Post Doc Fel
FIXED	7/1/2022	6/30/2023	0.30	All	Students
FIXED	7/1/2023	6/30/2024	30.10	All	Non Spon/Hrly & Sal
FIXED	7/1/2023	6/30/2024	33.90	All :	Spon. Hrly & Salaried
FIXED	7/1/2023	6/30/2024	7.90	All	Part Time Employees
FIXED	7/1/2023	6/30/2024	19.20	All	Faculty Limited Benefits
FIXED	7/1/2023	6/30/2024	17.10	All	Res. & Post Doc Fel
FIXED	7/1/2023	6/30/2024	1.30	All	Students
PROV.	7/1/2024	Until Amended			Use same rates and conditions as those cited for fiscal year ending Jun

# \*\* DESCRIPTION OF FRINGE BENEFITS RATE BASE:

Salaries and wages.

Note: The State of Oklahoma requires all grants worked on by state employees to pay the State's portion of the Employees Defined Benefit Retirement Plan. At this time, the amount is 3.8% and is included in the Fringe Benefit Rate of "Hourly and Salaries Sponsored Staff".

30, 2024

ORGANIZATION: University of Oklahoma Health Sciences Center

**AGREEMENT DATE: 02/08/2024** 

# **SECTION II: SPECIAL REMARKS**

# **TREATMENT OF FRINGE BENEFITS:**

The fringe benefits are charged using the rate(s) listed in the Fringe Benefits Section of this Agreement. The fringe benefits included in the rate(s) are listed below.

# TREATMENT OF PAID ABSENCES:

Vacation, holiday, sick leave pay and other paid absences are included in salaries and wages and are claimed on grants, contracts and other agreements as part of the normal cost for salaries and wages. Separate claims are not made for the cost of these paid absences.

OFF-CAMPUS DEFINITION: The off-campus rate will apply for all activities: a) Performed in facilities not owned by the institution and where these facility costs are not included in the F&A pools; or b) Where rent is directly allocated/charged to the project(s). Actual costs will be apportioned between on-campus and off-campus components. Each portion will bear the appropriate rate.

## FRINGE BENEFITS:

FICA
TIAA/CREF
Retirement
Disability Insurance
Worker's Compensation
Life Insurance
Unemployment Insurance
Health Insurance
Dental Insurance
AD&D

The next Facilities and Administrative Cost rate proposal, based on actual costs for the fiscal year ending June 30, 2025 is due in our office by December 31, 2025.

Equipment means tangible personal property (including information technology systems) having a useful life of more than one year and a per-unit acquisition cost which equals or exceeds \$5,000.

ORGANIZATION: University of Oklahoma Health Sciences Center

**AGREEMENT DATE: 02/08/2024** 

# SECTION III: GENERAL

# A. <u>LIMITATIONS:</u>

The rates in this Agreement are subject to any statutory or administrative limitations and apply to a given grant, contract or other agreement only to the extent that funds are available. Acceptance of the rates is subject to the following conditions: (1) Only costs incurred by the organization were included in its facilities and administrative cost pools as finally accepted: such costs are legal obligations of the organization and are allowable under the governing cost principles; (2) The same costs that have been treated as facilities and administrative costs are not claimed as direct costs; (3) Similar types of costs have been accorded consistent accounting treatment; and (4) The information provided by the organization which was used to establish the rates is not later found to be materially incomplete or inaccurate by the Federal Government. In such situations the rate(s) would be subject to renegotiation at the discretion of the Federal Government.

### B. ACCOUNTING CHANGES:

This Agreement is based on the accounting system purported by the organization to be in effect during the Agreement period. Changes to the method of accounting for costs which affect the amount of reimbursement resulting from the use of this Agreement require prior approval of the authorized representative of the cognizant agency. Such changes include, but are not limited to, changes in the charging of a particular type of cost from facilities and administrative to direct. Failure to obtain approval may result in cost disallowances.

## C. FIXED RATES:

If a fixed rate is in this Agreement, it is based on an estimate of the costs for the period covered by the rate. When the actual costs for this period are determined, an adjustment will be made to a rate of a future year(s) to compensate for the difference between the costs used to establish the fixed rate and actual costs.

## D. <u>USE BY OTHER FEDERAL AGENCIES:</u>

The rates in this Agreement were approved in accordance with the authority in Title 2 of the Code of Federal Regulations, Part 200 (2 CFR 200), and should be applied to grants, contracts and other agreements covered by 2 CFR 200, subject to any limitations in A above. The organization may provide copies of the Agreement to other Federal Agencies to give them early notification of the Agreement.

### E. <u>OTHER:</u>

If any Federal contract, grant or other agreement is reimbursing facilities and administrative costs by a means other than the approved rate(s) in this Agreement, the organization should (1) credit such costs to the affected programs, and (2) apply the approved rate(s) to the appropriate base to identify the proper amount of facilities and administrative costs allocable to these programs.

BY THE INSTITUTION:	ON BEHALF OF THE GOVERNMENT:
University of Oklahoma Health Sciences Center	DEPARTMENT OF HEALTH AND HUMAN SERVICES
(INSTITUTION) A Good	(AGENCY) Darryl W. Mayes - S Digitally signed by Darryl W. Mayes - S Date: 2024.02.16 07:13:24 -05'00'
(SIGNATURE)	(SIGNATURE)
Kenneth A Rowe	Darryl W. Maves
(NAME)	(NAME)
(TITLE) Prefident	Deputy Director, Cost Allocation Services (TITLE)
2-60-2024	02/08/2024
(DATE)	(DATE)
	HHS REPRESENTATIVE: Steven Zuraf
	TELEPHONE: (301) 492–4855

# COMPONENTS OF PUBLISHED FACILITIES AND ADMINISTRATIVE COST RATE

Institution:	Universi	ty of Oklai	noma Hea	Ith Scient	Jniversity of Oklahoma Health Sciences Center				
FY Covered by Rate:	July 01, 2021	July 01, 2021 - June 30, 2026						_	
Type of Rate:	Org	Organized Resea	arch		Instruction		Other	Other Sponsored Activities	ctivities
RATE COMPONENTS:	ON FY '22 - '23	ON FY '24 - '26	<u>OFF</u> FY '22 - '26	ON ON EY '22 - '23	ON FY '24 - '26	<u>OFF</u> FY '22 - '26	ON FY '22 - '23	ON 57 '22 - '23	ON FY '22 - '23
Bidg & Improv - Depr/Use Allow	2.6	2.2		1.1			2.4	_	}   
Equipment - Depr/Use Allow	3.1	3.0		0.8	0.7		0.2	0.5	
Interest	9.0	9.0		0.1	0.1		1.0	0.5	
Operations & Maintenance	11.7	10.3		4.0	3.5		3.3	2.5	
Library	0.3	0.2		3.0	2.8		0.1	0.1	
Utility Cost Allowance	0.7	0.7							
Administrative Component	26.0	<u>26.0</u>	26.0	26.0	26.0	26.0	26.0	26.0	26.0
Total	45.0	43.0	26.0	35.0	34.0	26.0	33.0	32.0	26.0

met 1

CONCURRENCE

Signature (Und. Dict.)

Y

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