

National Indian Health Board 



September 12, 2023

The Honorable Kevin McCarthy
Speaker of the House
H-232 Capitol Building
Washington, DC 20515

The Honorable Hakeem Jeffries
House Minority Leader
H-204 Capitol Building
Washington, DC 20515

The Honorable Charles Schumer
Senate Majority Leader
S-221 Capitol Building
Washington, DC 20510

The Honorable Mitch McConnell
Senate Minority Leader
S-230 Capitol Building
Washington, DC 20510

RE: Reauthorization of the Special Diabetes Program for Indians by September 30, 2023

Dear Speaker McCarthy, Minority Leader Jeffries, Majority Leader Schumer, and Minority Leader McConnell:

On behalf of the undersigned Tribal partner organizations and the 574+ sovereign federally recognized American Indian and Alaska Native (AI/AN) Tribal nations we serve, we write today to thank you for your longstanding support of the Special Diabetes Program for Indians (SDPI) and ask for your commitment to reauthorize this vital program before it expires at the end of this month. ***Please bring the SDPI forward for consideration for a floor vote by September 30, 2023.***

The Special Diabetes Program for Indians serves 780,000 American Indians and Alaska Natives across 302 programs in 35 states.¹ SDPI focuses on a culturally informed and community-directed approach to treat and prevent Type 2 diabetes in Tribal communities. American Indians and Alaska Natives disproportionately suffer from Type 2 diabetes, but thanks to the success of SDPI, that statistic is improving.

¹See: https://www.ihs.gov/sites/sdpi/themes/responsive2017/display_objects/documents/factsheets/2023SDPIGrants.pdf

As part of the Balanced Budget Act of 1997, Congress established the SDPI program to address the growing epidemic of diabetes in AI/AN communities. At a rate approximately twice the national average, AI/ANs have the highest prevalence of diabetes. Further, AI/ANs are 1.8 times more likely to die from diabetes. In some Tribal communities, over 50 percent of adults have been diagnosed with Type 2 diabetes. However, from 2013 to 2017, diabetes incidence in AI/ANs decreased each year for the first time, thanks to the success of the SDPI program. American Indians and Alaska Natives are the only racial/ethnic group that have seen a decrease in prevalence.² SDPI has also resulted in significant savings in Medicare due to a reduction in End Stage Renal Disease (ESRD). Between 1996 and 2013, incidence rates of ESRD in AI/AN individuals with diabetes declined by 54 percent. This reduction alone is estimated to have saved \$520 million between 2006-2015.³

SDPI is bipartisan, and widely supported in Congress, but has yet to be reauthorized. Earlier this year, the Congressional Diabetes Caucus led bipartisan sign-on letters requesting support to reauthorize SDPI. The letters received 60 Senate signers and 240 House signers. And while these letters may show how bipartisan this program is, they do not reauthorize this effective federally funded program.

More recently, legislation was passed out of committee in both the House ([H.R. 3561](#)) and Senate ([S. 1855](#)) that would reauthorize the SDPI program at \$170 million per year for two years, but awaits consideration by the full House and Senate. Failure to reauthorize SDPI will create unnecessary program uncertainty and impact the continuity of care for the patients who depend on this highly effective program. Despite the lack of funding, the Special Diabetes Program for Indians continues to prove how successful and widely bipartisan it is.

Unless the Speaker of the House and the Senate Majority Leader bring legislation to the floor for a vote, the program will expire September 30, 2023 which will result in diminished type 2 diabetes care for thousands of AI/ANs. This program is highly successful, bipartisan, and has proven to be a worthwhile financial investment of taxpayer dollars.

The future of this successful program is in the hands of Congress. Passing legislation to reauthorize the SDPI program must be a top priority in September. The undersigned organizations urge House and Senate leadership to schedule the legislation for a floor vote and reauthorize the Special Diabetes Program for Indians by September 30, 2023.

Sincerely,

Alaska Native Health Board
Albuquerque Area Indian Health Board, Inc.
American Indian Higher Education Consortium

² See: https://aspe.hhs.gov/sites/default/files/migrated_legacy_files//189221/SDPI_Paper_Final.pdf

³ *Id.*

California Rural Indian Health Board
Great Plains Tribal Leaders' Health Board
Inter Tribal Association of Arizona
Midwest Alliance of Sovereign Tribes
National Congress of American Indians
National Council of Urban Indian Health
National Indian Child Welfare Association
National Indian Education Association
National Indian Health Board
Northwest Portland Area Indian Health Board
Rocky Mountain Tribal Leaders Council
Self-Governance Communication and Education Tribal Consortium
Southern Plains Tribal Health Board
United South and Eastern Tribes Sovereignty Protection Fund