Date \_\_\_\_\_\_\_\_\_\_

The Honorable \_\_\_\_\_\_\_\_\_\_\_\_

Office Building Address

Washington, DC 20\_\_\_

**RE: Long Term Reauthorization of the Special Diabetes Program for Indians**

Dear **[INSERT NAME OF CONGRESSMAN OR SENATOR**]:

On behalf of the [**INSERT NAME OF TRIBE OR ORGANIZATION]**, and someone who knows first-hand the tremendous burden diabetes places on my Tribal community, I am writing to ask for your support for the Special Diabetes Program for Indians (SDPI) long-term reauthorization by December 31, 2024. It would be a tragedy for this highly effective and popular program to expire for the first time since its creation due to Congressional inaction. ***Therefore, we request that Congress approve S. 1855/H.R. 5378 to renew this successful, life-saving program for two years at $170 million/year.***

Thanks to Congressional reauthorization of the Special Diabetes Program (SDP) and the Special Diabetes Program for Indians (SDPI) through December 2024, my community has received the resources needed to address our disproportionate burden of diabetes. As you may know, American Indian and Alaska Native adults are 2 times more likely to have diagnosed diabetes compared with non-Hispanic whites and the death rate due to diabetes for American Indians and Alaska Natives is 1.8 times higher than the general U.S. population. However, the federal investment in SDPI has already shown significant improvements and is advancing the health care quality and access for Tribal communities.

Since the start of the program, American Indians and Alaska Natives (AI/ANs) nationwide have experienced a reduction in A1C levels, reduced cholesterol levels, and weight loss. Recently, the Centers for Disease Control and Prevention (CDC) published data in its Morbidity and Mortality Weekly Report about the remarkable decline in End-Stage Renal Disease (ESRD) due to diabetes seen in American Indians and Alaska Natives in 1996-2013. During this time period, AI/ANs have experienced a ***54% decline in incidence rates of ESRD due to diabetes* –** the steepest decline of any other ethnic group. A May 2019 report from the Health & Human Services Assistant Secretary for Planning and Evaluation estimates that up to ***2,600 AI/ANs have avoided ESRD*** over the life of the program, leading to a ***savings of up to $520 million for Medicare***.

Because of these savings, SDPI not only saves lives, but also makes financial sense. We strongly urge Congress to increase funding for the program to $170 million, which would allow more Tribes to benefit from the successful program and allow individual Tribes like ours to receive more resources to double down on the work we do in our communities to combat diabetes. This modest increase would help address rampant medical inflation costs, which have eaten up over 34% of the program’s resources since 2004.

Established in 1997, SDPI currently supports over 310 diabetes programs in 35 states that have led to significant advances in diabetes education, prevention, and treatment. (**Please add a few sentences about SDPI-supported programs in your Area and/or Tribal Community)**. SDPI is saving lives, transforming communities, and saving our federal healthcare system dollars as well.

SDPI enjoys widespread, bipartisan support in Congress. In May and June 2023, a bipartisan group of 60 Senators and 258 House Members wrote to Congressional leaders to encourage the swift renewal of the program. The House has passed H.R. 5378 and the Senate’s Health, Education, Labor, and Pensions Committee has passed out S. 1855. Congress just needs to pass the final legislation. The lives of our people depend on it.

**[INSERT NAME OF TRIBE]** has relied on Congressional support of SDPI over the years. We would appreciate your support once again in renewing this life saving program for American Indians and Alaska Natives before December 31, 2024.

To learn more about diabetes in AI/AN communities and stories of how SDPI is saving lives please visit <http://nihb.org/sdpi>.

Sincerely,

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