The Special Diabetes Program for Indians (SDPI) is typically renewed as part of the “Sustainable Growth Rate” Fix (or “Doc Fix”) which governs the rates physicians are paid by Medicare. Accompanying this legislation, are a group of public health programs known as the “Medicare Extenders.” SDPI, along with the Special Diabetes Program (SDP), to promote research for Type 1 Diabetes, is one of those programs. Over the last several years, Congress has enacted only short-term legislation for the Doc Fix, and consequently, SDPI has only been renewed for a year at a time.

The current Doc Fix legislation expires on March 31, 2015. The path forward is unclear, but it seems that how to pay for the overall Doc Fix measure remains the biggest concern. (The Congressional Business Office estimated $144 billion in November 2014) NIHB and Tribes continue to ask for a long-term or permanent SDPI renewal. **Tribes are asking that SDPI be included in any renewal of the Doc Fix by March 31.**

On September 16, 2014, Senator John Tester (D-MT), Chairman of the Senate Committee on Indian Affairs, introduced a bill to permanently reauthorize the SDPI. The bill would have funded the program permanently at its current level of $150 million. The permanency of the program would be a great asset to promoting stability for this important initiative and for reversing the trend of Type 2 diabetes in Indian Country. That bill didn’t pass during the last Congress so it would have to be re-introduced to be considered now. However, if this bill were enacted, Congress would not have to enact appropriations each year to provide funding because SDPI is a “mandatory” funding program.

The Tribes have been asking for **$200 million a year for 5 years.** This cost would cover increases to ensure that all Tribes get access to this life saving program. Most recent conversations with key staff indicate that another short-term patch is the most likely scenario for 2015, meaning that an increase or long-term renewal will remain a challenge.

Despite the underlying politics of the Doc Fix, SDP and SDPI remain very popular with lawmakers. In 2013, 75 percent of the House **and 75 percent** of the Senate signed a letter supporting the renewal of these programs. Positive outcomes, innovative programming and the availability of data all contribute to the political popularity of SDPI.
This year, we are asking for the program to be renewed with a funding increase and for several years at a time. Tribes have consistently asked for long-term renewal for his program. By providing funding for multiple years, SDPI grantees would be able to improve:

- Staff retention
- Programmatic long-term planning, which increases efficiency and improves patient care
- More stable outside contracts with vendors and suppliers