



JULY 22 2016

Dear Tribal Leader:

I am writing to update you on the Indian Health Service (IHS) Special Diabetes Program for Indians (SDPI) and its fiscal year (FY) 2016 Community-Directed (C-D) grant application process.

The SDPI is currently authorized through FY 2017 at \$150 million per year. The President's FY 2017 budget proposes to make the SDPI permanent at this funding level. We are grateful for your partnership and support of this important program, which provides funding for critically important diabetes treatment and prevention services in our communities.

As you know, the IHS conducted a national Tribal consultation regarding proposed changes to the SDPI in preparation for the FY 2016 funding opportunity announcement. Among the decisions announced in the June 29, 2015-dated Tribal Leader Letter, was that funds that had previously been directed to the SDPI Diabetes Prevention and Healthy Heart (DP/HH) Initiatives would be used to augment the SDPI C-D funds. Also stated in this letter was that it was essential that all applicants submit quality applications by the due date in order to receive SDPI FY 2016 funding. The IHS Division of Diabetes Treatment and Prevention provided extensive technical assistance to all applicants starting before and continuing throughout the application process.

The SDPI differs from other grant programs in that SDPI C-D funds are allocated to successful applicants through national and Area formulas. The formula that allocates national funds to each IHS Area undergoes national Tribal consultation with each new grant cycle and the formulas used to allocate Area funds to grantees are agreed upon by the grantees in each Area. As such, the competition required under the new funding opportunity announcement was to achieve a fundable score in the objective review process, not against other applicants. All eligible applicants whose applications received a score of at least 60 points (out of a possible 100 points) in the objective review process were awarded funding. Under these criteria, a majority of the Tribal, Urban, and IHS applicants were successful in achieving this threshold.

SDPI FY 2016 funding was awarded to 276 primary grantees, with an additional 25 sub-grantees, for a total of 301 programs. Of the primary grantees, 232 are Tribes; 29 are Urban Indian Organizations; and 15 are IHS sites. With the addition of the DP/HH funds, virtually all SDPI C-D grantees received an increase in funds compared to FY 2015.

Congratulations to each of the SDPI FY 2016 grantees. We look forward to working together over the course of this 5-year grant cycle (pending continued SDPI authorization).

For a complete list of FY 2016 grantees and their funding amounts, please visit the Web site at: https://www.ihs.gov/MedicalPrograms/Diabetes/HomeDocs/Resources/FactSheets/SDPI_FY2016_CD_GrantPrograms.pdf.

I am also pleased to announce that the IHS Report to Congress, “*Special Diabetes Program for Indians 2014 Report to Congress, Changing the Course of Diabetes: Turning Hope Into Reality*,” is now available on our Web site at the following address:

<https://www.ihs.gov/newsroom/reportstocongress/>.

I hope you will take a few minutes to read the good news in this Report about how our collective efforts are truly changing the course of the diabetes epidemic in our communities:

- Increases in diabetes prevalence (proportion of people with diabetes) among adults are slowing;
- In youth, diabetes remains rare and prevalence is not increasing;
- Long-term control of key diabetes clinical measures is being sustained; and
- The incidence rate (new cases) for end-stage renal disease in people with diabetes is decreasing.

If you have any questions relating to the SDPI, please contact Ann Bullock, M.D., Director, Division of Diabetes Treatment and Prevention, IHS, by telephone at (844) 447-3387. For questions relating to SDPI grant issues, please contact Mr. Robert Tarwater, Director, Division of Grants Management, IHS, by telephone at (301) 443-5204.

Thank you for your partnership with the IHS in advancing the important work of diabetes treatment and prevention in our communities.

Sincerely,

/Mary Smith/

Mary Smith
Principal Deputy Director