



OCT 02 2019

Dear Tribal Leader:

I am writing to initiate Tribal Consultation on the distribution of funding for the Indian Health Service (IHS or Agency) Special Diabetes Program for Indians (SDPI) in fiscal year (FY) 2021.

The SDPI has been funding diabetes treatment and prevention activities in IHS, Tribal, and Urban Indian Organization (UIO) health programs since FY 1998. With the extension included in the Continuing Appropriations Act, 2020, and Health Extenders Act of 2019 (HR 4378), the current SDPI authorization will expire on November 21, 2019. At the time of publication, we do not know if, or when, Congress will address authorization for the remainder of the final year of the current SDPI grant cycle (FY 2016-FY 2020) or the next grant cycle (FY 2021-FY 2025), nor do we know the total funding amount that might be authorized.

Regardless, the IHS will proceed with Tribal Consultation to ensure sufficient time for all Tribal Leaders to have the opportunity to provide comments. The Tribal Leaders Diabetes Committee (TLDC) met on December 12-13, 2018, and recommended that the Agency conduct Tribal Consultation on the distribution of SDPI funding for FY 2021 in the fall of 2019. When Tribal Consultation is complete, the TLDC will convene to review the comments and provide recommendations to the IHS to consider prior to making a decision.

I invite Tribal Leaders to provide input on the following Consultation questions, as well as on any other issue related to the SDPI. Due to grants regulations, if SDPI funding is authorized, a new funding opportunity announcement will have to be issued for FY 2021. As such, Tribal input is particularly important, as FY 2021 provides an opportunity for changes to the SDPI funding distribution and formula. As it is unlikely there will be an increase in overall SDPI funding, please take into consideration that a recommended increase in one component of the funding distribution would have to be offset by a decrease in another component.

1. Currently, the SDPI funding distribution is as follows:

- Tribal and IHS Community-Directed grant programs \$130.2 million
  - UIO Community-Directed grant programs \$8.5 million
  - SDPI Support \$6.1 million
  - Data Infrastructure Improvement \$5.2 million
- a. If SDPI is funded at \$150M, should there be changes in the funding distribution? If so, what changes should be made?
- b. If the SDPI receives an increase in funding above the current \$150M, how should those funds be utilized?

(Possible considerations could include funding Tribes and UIOs not currently funded, providing an increase for existing programs, etc.)

2. The last change to the SDPI national funding formula was for the FY 2004 funding cycle. Based on recommendations from Tribal Consultation, the following national funding formula has been used to determine allocation to each IHS Area for the SDPI Tribal and IHS Community-Directed grant program:

- User Population = 30 percent
- Tribal Size Adjustment (TSA) = 12.5 percent (adjustment given for small Tribes)
- Disease Burden = 57.5 percent (diabetes prevalence).

User population and diabetes prevalence data from 2012 have been used in the national funding formula.

- a. Should there be changes to the national funding formula?
- b. Should more recent user population and diabetes prevalence data be used? If so, how would the resultant changes in the Area funding distribution be addressed?

I have enclosed a detailed SDPI FY 2019 budget for your review. Each of the IHS Area Directors will identify a meeting or coordinate a conference call to Consult with Tribes on the SDPI FY 2021 funding distribution. We encourage you to attend the Area Tribal Consultation and/or submit written comments to [consultation@ihs.gov](mailto:consultation@ihs.gov) within the Consultation period.

**The comment submission deadline is Monday, December 2, 2019.**

The TLDC will review Tribal Consultation and Urban Confer comments from all 12 IHS Areas as they provide final national recommendations to IHS. A subsequent Tribal Leader letter with the final decisions on the FY 2021 SDPI funding distribution will follow.

Thank you for your partnership on the SDPI throughout the past 22 years. IHS, Tribal, and UIO grantees have made the SDPI's remarkable success possible. Together, we have improved diabetes prevention and treatment outcomes in our communities. To learn more about these efforts and activities throughout the country, I encourage you to visit the IHS Division of Diabetes Treatment and Prevention (DDTP) Web site at [www.ihs.gov/diabetes](http://www.ihs.gov/diabetes).

Thank you in advance for your input on this important Tribal Consultation. If you have any questions about the process, or the SDPI program in general, please contact the DDTP by e-mail at [diabetesprogram@ihs.gov](mailto:diabetesprogram@ihs.gov) or contact your Area TLDC representative.

Sincerely,

/Michael D. Weahkee/

RADM Michael D. Weahkee, MBA, MHSA  
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Enclosure