

Special Diabetes Program for Indians

OKLAHOMA

Saving lives in Oklahoma and providing a strong return on federal investment.

History

Congress established the Special Diabetes Program for Indians (SDPI) in 1997 to address the growing epidemic of diabetes in American Indian and Alaska Native (AI/AN) communities. This program has grown and become the nation's most strategic and effective federal initiative to combat diabetes. SDPI is currently authorized through fiscal year 2017.

SDPI Outcomes

SDPI funding supports over 300 diabetes treatment and prevention programs in 35 states, and the results have been extraordinary. The structure of the grant program has allowed Tribes to collect data and document that this investment is both saving lives and saving the federal healthcare system money. For example, according to the United States Renal Data System, there has been a remarkable decline in diabetes incidence rates among AI/ANs since 1998 that has resulted in **a 29% decline, more than any other race**, in prevalence rates of end-stage renal disease (ESRD) – a costly complication often linked with diabetes. ESRD requires expensive treatments and is the single largest driver of Medicare costs. The Medicare cost per year for hemodialysis (a common ESRD treatment) exceeded \$84,000 per patient in 2013.



"I want everyone to know that you don't have to wait until you have a stroke to take advantage of all the Healthy Heart Program has to offer. Get started early and learn how to manage your diabetes!"

- Glendine Blanchard
Absentee Shawnee Tribe Healthy Heart

Diabetes in Oklahoma

According to the Centers for Disease Control and Prevention (CDC), in 2014, approximately 423,000 people in Oklahoma – **10.9% of the population** – had diagnosed diabetes, and many suffered from serious diabetes related conditions such as heart disease, neuropathy, and eye, foot and skin complications. In addition to the human toll diabetes places on the people of Oklahoma, it also places a large financial burden on the state's healthcare system. In 2013, the staggering estimate of direct and indirect cost of diabetes in Oklahoma was approximately \$2.84 billion.

FY 2016 SDPI funding in Oklahoma to support 27 Community-Directed Grant Programs at:

- Absentee Shawnee Tribe
- Central Oklahoma Health
- Cheyenne and Arapaho
- Citizen Potawatomi
- Delaware Nation
- Tulsa Indian Health
- Kaw Nation
- Lawton Indian Hospital
- Northeastern Tribe
- Otoe-Missouria Tribe
- Ponca Tribe
- Seminole Nation
- Tonkawa Tribe
- Wyandotte Nation
- Caddo Nation
- Cherokee Nation
- Choctaw Nation
- Comanche Nation
- Fort Sill Apache
- Iowa Tribe
- Kickapoo Tribe
- Muscogee Nation
- Osage Nation
- Pawnee Nation
- Sac & Fox Nation
- Chickasaw Nation
- Wichita and Affiliated

Renewal is Vital

Congress must renew this critical program to ensure that the SDPI funded programs can continue their important work and that lessons learned from these programs can be shared and replicated to keep Indian Country on the path to a diabetes-free future.

National Indian
Health Board



To find out more about SDPI, visit www.nihb.org/SDPI