

November 6, 2017

The Honorable Mitch McConnell  
Majority Leader  
United States Senate  
S-230 U.S. Capitol Building  
Washington, D.C. 20510

The Honorable Chuck Schumer  
Minority Leader  
United States Senate  
419 Hart Senate Office Building  
Washington, D.C. 20510

Dear Majority Leader McConnell and Democratic Leader Schumer:

On behalf of the 114 million Americans living with or at risk for diabetes, the American Diabetes Association and the Endocrine Society are grateful for your leadership and support of the Special Diabetes Program (SDP). Because of your commitment to SDP, we were disappointed that the program was not included in the Senate Finance Committee's most recent healthcare extenders draft. The Special Statutory Program for Type 1 Diabetes Research (SDP-Type 1) expired on September 30<sup>th</sup>. While the Special Diabetes Program for Indians (SDPI) was extended until December 31<sup>st</sup> when Congress acted on the Federal Aviation Administration Reauthorization, it was a temporary fix that does not fully address SDP.

Although the House of Representatives has proposed legislation that funds both components of SDP through fiscal year 2019, the bill that the House passed last week makes significant cuts to the Prevention and Public Health Fund (PPHF). The PPHF helps prevent and detect costly and life-threatening diseases like diabetes—including providing 43% of funding for the Division of Diabetes Translation at CDC—and our organizations cannot support such cuts. We ask the Senate to come to a bipartisan agreement on SDP reauthorization without making cuts to other critical prevention and public health programs.

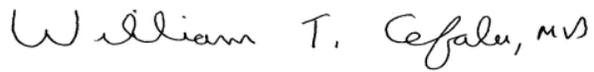
Critical research towards a cure for type 1 diabetes and programs for American Indians and Alaska Natives are in jeopardy the longer SDP renewal is delayed. **We urge you to include a long-term renewal of SDP in any healthcare extenders package or other legislative vehicle that will come before the Senate.**

As you know, SDP-type 1 funds type 1 diabetes research at the National Institutes of Health, which has accelerated our understanding of how to improve outcomes for people with type 1 diabetes. This dedicated funding has yielded better treatments and tangible progress towards a cure for type 1 diabetes. SDPI supports treatment and prevention in American Indian and Alaska Native communities impacted by type 2 diabetes at a rate of 15.1 percent, prevalence higher than any other minority population in the United States. SDPI has resulted in a 54 percent reduction in kidney failure rates among Native American populations between 1996 and 2013. These programs, which have a proven track record of success, are currently funded at \$150 million per program per year. Unfortunately, funding for SDP-type 1 expired on September 30<sup>th</sup> and funding for SDPI will expire on December 31<sup>st</sup> if Congress fails to act.

These programs have wide bipartisan support—in 2016, 356 House Members and 75 Senators signed letters endorsing the reauthorization of SDP. However, without an immediate, sustained investment by Congress for both components of SDP, promising research and prevention programs will be

compromised. Our organizations ask you to take immediate steps to provide a multi-year renewal of SDP. Thank you for your support for these programs as you work towards reauthorizing SDP and other critical public health programs.

Sincerely,



William T. Cefalu, MD  
Chief Scientific, Medical & Mission Officer  
American Diabetes Association



Barbara Byrd Keenan, FASAE, CAE  
Chief Executive Officer  
Endocrine Society

cc: Senator Orrin Hatch, Chairman, Senate Finance Committee; Senator Ron Wyden, Ranking Member, Senate Finance Committee; Senator Lamar Alexander, Chairman, Senate Finance Committee; Senator Patty Murray, Ranking Member, Senate Finance Committee