



SDPI Program Application

5 SW D Avenue

P.O. Box 908

Lawton, OK 73502

T: (580)360-0460 F: (580)280-4676 E: diabetesprevention@comanchenation.com

Name _____ Date of Birth _____

(Please Print Clearly)

Address (street) _____ Tribal Roll No. _____

City, State, Zip _____ Tribal Affiliation _____

Telephone _____ Email _____

(Optional)

Are you a Diabetic? (Circle one) YES NO If yes, what type _____

Type of insurance: _____

(Please List Type of Insurance)

The following are required to be turned in before services are rendered:

_____ **Completed Application**

_____ **CDIB Card** - Must be a member of a federally recognized tribe. Descendancy papers and/or card will not be accepted.

_____ **Insurance Cards** – Medicare, Medicaid, Tricare, Sooner Care, Humana, and Private

_____ **Diagnosis of Diabetes** - Written on a prescription by either a Primary Care Physician, Physician's Assistant or Nurse Practitioner with his/her written or electronic signature.

_____ **Proof of Residence** - Must reside in the 7-county service area.

The information I provided is true and correct. I also understand that any willful dishonesty may render for refusal of this application or termination from the Comanche Nation Diabetes SDPI Program.

_____ *(Participant Signature)*

_____ *(Date)*

Comanche Nation Diabetes & SDPI Program

Assistive Devices (Standard Wheelchair, Walker/Rollator (walker w/wheel & seat). (Prescription Required)	Once Every 5 Years	Amputees Only
Diabetic Medication & Continuous Glucose Monitor/Sensors (Prescription Required)	Once Per Month	
Diabetic Supplies Lancets & Test Strips Glucometer	Once Per Month Once Every 5 Years	Test Strips (2 - 50 count bottles) Lancets – 100 count
Therapeutic Footwear SDPI Program (Prescription Required)	Once Per Year	NOT EXCEED \$200

****It is the responsibility of the applicant to verify address and contact number upon calling in a voucher request****

Please Note

A statement of Authorization of Pick Up will be needed for Test Strips & Lancets if you are unable to pick up yourself. A photo ID will be required upon pick up.

In the event you do not utilize our services within a five- year time limit, your case file will be closed. You will be required to submit a new application.