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STATE REPRESENTATIVE • 69TH ASSEMBLY DISTRICT

P.O. Box 8953 Madison, WI 53708-8953

Testimony before the Assembly Committee on Health, Aging and Long-Term Care

Assembly Bill 418

January 17, 2024

Thank you, Chair Moses, and members of the Assembly Committee on Health, Aging and Long-Term Care for holding this hearing on Assembly Bill (AB) 418, relating to healthy aging grants and making an appropriation. As stated in the Legislative Reference Bureau's analysis, this Bill provides \$378,000 each fiscal year of the 2023-25 fiscal biennium to a private, nonprofit entity to support evidence based health promotion programs to support healthy aging.

The population entering long-term care facilities is ever growing. One leading factor for individuals entering a long-term care facility is injury from a fall. According to the CDC, Wisconsin currently has the highest mortality rate due to falls of any state in the United States. AB 418 provides funding for best-practice strategies to prevent falls, manage chronic conditions, and increase physical activity to reduce costs and improve wellness. Furthermore, it will provide balance and strength training which also helps to reduce an older adult's fall risk

Prevention, in this case, is worth more than a pound of cure. Based on available information from CMS, falls-related health costs in Wisconsin are estimated at about \$1 billion annually. At a time that spending is tight, utilizing resources for healthy aging grants leads to lower costs over time for prevents unplanned, out-of-pocket expenses for older adults. Additionally, falls occupy the time of emergency services, leading some departments with insufficient funding and capacity.

Thank you for your kind consideration of this Bill. Together, we can keep our aging population safe and healthy while reducing the burden on Medicaid in Wisconsin. I am happy to answer any questions you may have.



PO Box 7882, Madison, WI 53707-7882 http://legis.wisconsin.gov/senate/18/feyen

To: The Assembly Committee on Health, Aging and Long-Term Care From: Sen. Dan Feyen Re: Assembly Bill 418

Hello Chair and members of the committee, thank you for taking the time to hear testimony on AB 418.

According to the CDC, Wisconsin has the highest rate of deadly falls among older adults in the country. Between 2018 and 2020, there were 4,986 deaths due to falls among the Wisconsinites 65 years and older. This is nearly triple the total all-ages number of motor vehicle deaths.

Each year, it is estimated that 1 in 4 people aged 65 or older suffers a fall. When an older person falls, the impact is felt throughout the community. In 2021 there were 43,000 emergency department visits due to falls. Hospitalization costs totaled more than \$427 million that year. An estimated \$1 billion is spent annually on falls-related health costs in Wisconsin. This includes both Medicaid and out-of-pocket expenses. With Wisconsin's aging population, we can only expect these numbers to rise.

Thankfully, falls are not an inevitable part of old age. Research has shown that people are able to reduce their risk of falls through physical activity and other preventative strategies.

AB 418 recreates and refocuses the Healthy Aging Grant program at DHS to provide funding for the Falls Free Wisconsin initiative.

The grant will be awarded to a private non-private entity that takes an all-encompassing approach to falls prevention. With a list of boxes that need to be checked in order to qualify, such as coordinating efforts to reduce falls, training and working with county departments and other service agencies, coordinating with DHS on policy issues, raising public awareness on falls prevention, and implementing evidence-based health programs for older adults.

This grant will help to lower hospital and emergency department visits and will help Wisconsin's elderly take a proactive approach to their health. Thank you very much for holding a public hearing on this bill.



State of Wisconsin Department of Health Services

Tony Evers, Governor Kirsten L. Johnson, Secretary

TO: Members of the Assembly Committee on Health, Aging and Long-Term Care

FROM: HJ Waukau, Legislative Director

DATE: January 17, 2024

RE: AB 418 relating to: healthy aging grants and making an appropriation.

The Wisconsin Department of Health Services (DHS) would like to submit written testimony for information only on Assembly Bill 418 (AB 418), regarding healthy aging grants and making an appropriation. The bill directs DHS to allocate a grant of \$378,000 in each fiscal year of the 2023-25 fiscal biennium to a private, nonprofit entity that conducts certain activities related to healthy aging, including coordinating the implementation of evidence-based health promotion programs to support healthy aging; serving as a statewide clearinghouse on evidence-based falls injury, disease prevention, self-management, and health promotion programs; providing training and technical assistance to the staff of county departments, administering agencies, and other providers of services to aging populations; and collecting and disseminating information on falls injury, disease prevention, and health promotion in healthy aging populations.

There are currently over one million adults over 65 years old in Wisconsin. By 2040, that number is expected to grow by almost 50%. Investing in interventions that promote older adults' health and support their ability to remain in their homes and communities is central to help limit cost growth in long-term care programs and to promote quality of life for individuals as they age. AB 418 also calls out a number of falls-related initiatives that could be funded under the bill. This is timely as DHS recently issued a report highlighting Wisconsin as having the highest fall death rate among older adults in the United States.¹

There are several evidence-based healthy aging, or health promotion, programs available in Wisconsin that have been demonstrated to reduce costs, improve health, and prevent or delay age-related disease and disability. While the benefits of these programs are clear, the infrastructure for administering them is not sufficient to support the need or potential of a strong statewide prevention strategy for older adults and people with disabilities. AB 418 could provide an important capacity-building foundation for these programs and activities statewide. AB 418 would also support the goals of improved health promotion and disease prevention at the local level and statewide, helping older adults live their best lives.

DHS would like to thank the Committee for the opportunity to submit written testimony for information only and offers itself as a resource.

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Protecting and promoting the health and safety of the people of Wisconsin

¹ Wisconsin Department of Health Services, "EMS and Falls in Wisconsin, 2022 Report," September 2023, <u>https://www.dhs.wisconsin.gov/publications/p03493.pdf</u>.



Contact: Connie Schulze Director, Government Affairs 104 King Street, STE 303 Madison, WI 53703 608/516-2552 mobile cschulze@uwhealth.org

Assembly Committee on Health, Aging and Long-Term Care Testimony Provided by May R. Lauby Adult Injury Prevention Coordinator Wednesday, January 17, 2024 Re: Support for AB418

Dear Chairperson Moses and Members of the Committee:

Thank you for allowing me to join you this morning to express our support for Assembly Bill 418 (AB418) related to Health Aging Grants. My name is Mary Lauby and I am proud to serve as the Adult Injury Prevention Coordinator at UW Health's Level I Adult Trauma Center. I am here today representing the interests of our patients, especially those who suffer falls and receive care at our health system, and at health systems throughout Wisconsin. In our view, the fairly modest investment of \$378,000 annually you are considering would be money well spent.

Our Level I Trauma Center cares for patients with the most severe injuries from across the state and like other trauma centers throughout the U.S., we find many patients are adults with injuries that are the result of a fall. In fact, our trauma center patient census has increased each year for the past five years as the patient population treated for injuries from falling represents an ever-greater percentage of patients overall. Between 2018 and 2021, the total adult trauma patient population increased by 16% and the patients being treated for injuries from falls increased by 35%. In 2022, 60% of all adult trauma patients had injuries from falling. Furthermore, Wisconsin continually reports the highest rate of deaths from falls in the U.S.

These are alarming statistics but we are committed to improving the outlook for patients. In 2021, the UW Hospitals and Clinics Authority Board, the governing body for UW Health, endorsed preventing falls in older adults as a healthcare priority. The following year, the board approved fall prevention as a community health improvement strategy. As a result of their endorsement, we were able to steer resources toward this goal and while we are proud of our efforts to-date, we know this is not a problem a single health system can solve.

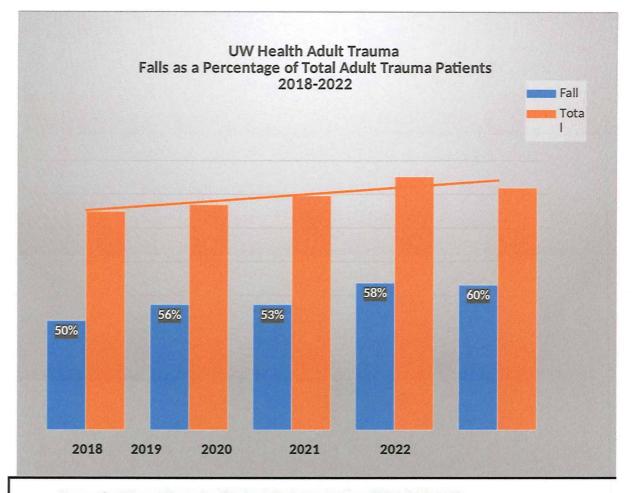
Communities across Wisconsin need resources to support local, nonprofit experts in healthy aging and adult wellness and exercise, along with their partners in EMS and healthcare to create effective prevention practices and interventions. In our case, we convened a workgroup of UW Health practitioners and staff including physicians, surgeons, geriatricians, physical therapists and staff from Trauma, Surgery, Family Medicine and Geriatrics to join forces with our community partners, such as the Wisconsin Institute for Health Aging, EMS, and others to reduce injuries and deaths from falls. This combined effort allowed us to benefit from interventions that were working and to share our expertise

with one another. While this cooperative effort was just launched last year, we expect to see positive results in future years.

We applaud the authors of AB418, Rep. Rozar and Sen. Feyen for their leadership and for recognizing the need for organized fall prevention efforts administered by DHS. Please advance AB418 from committee at your earliest convenience with a vote of "yes."

Thank you for your consideration. I would be happy to try and answer any questions from committee members.

*Visual representations of the statistical data referenced in my testimony can be found on the following page.



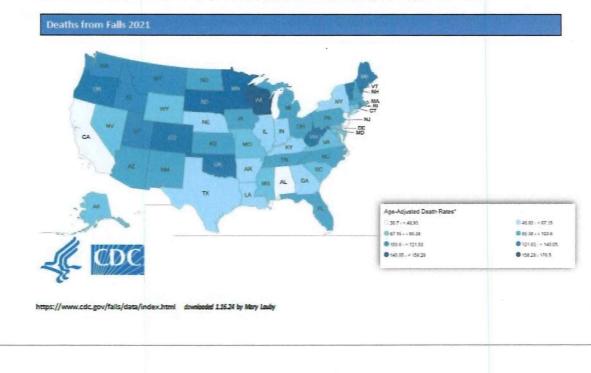
Centers for Disease Control and Prevention Injury Center Older Adult Falls

Deaths from OlderAdult Falls

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Falls are the leading cause of injury-related death among adults ages 65 and older, and the fall death rate is increasing. The age-adjusted fall death rate increased by 41% from 55.3 per 100,000 older adults in 2012 to 78.0 per 100,000 older adults in 2021.

The rising number of deaths from falls among older adults can be addressed by screening for fall risk and intervening to address risk factors such as use of medicines that may increase fall risk, or poor strength and balance.





Date: January 17, 2024

To: Chairperson Moses and members of the Assembly Committee on Health, Aging and Long-Term Care

From: Janet Zander, Advocacy & Public Policy Coordinator

Re: Support for AB 418 – Healthy Aging Grants

Thank you for this opportunity to share testimony on AB 418. My name is Janet Zander and I serve as the Advocacy and Public Policy Coordinator for the Greater Wisconsin Agency on Aging Resources, Inc. (GWAAR). I also provide policy and advocacy support to the Wisconsin Aging Advocacy Network (WAAN).

Over the next decade and a half, Wisconsin's population of adults aged 60 and older will continue to grow rapidly. The increase in the aging population is expected to produce a corresponding increase in the demand for health and long-term care services and supports. Evidence-based health promotion programs; however, demonstrate we can *improve* our health and well-being as we age and *reduce* our need for health and long-term care services. For this reason, **GWAAR and WAAN support AB 418**. This bill directing the state Department of Health Services to allocate \$378,000 in each fiscal year of the 2023-2025 biennium to a private, nonprofit entity, will expand the number of local health promotion program providers, sustain the infrastructure needed to support them, and ensure that programs are accessible to people throughout the state.

Falls remain the number one cause of injuries among older adults. In fact, Wisconsin has the highest rate of deadly falls among older adults in the nation.ⁱ Falls are a key driver of emergency department visits, hospitalizations, and nursing home admissions. Falls also represent an increasing percentage of 911 calls across the state, resulting in increased pressure on local emergency medical services and emergency department capacity. Additionally, nearly 95% of older adults have at least one chronic condition such as heart disease, diabetes, or arthritis; 80% have two or more.ⁱⁱ Chronic diseases are the leading causes of illness, disability, and death in the United States. Ninety percent (90%) of the nation's health care expenditures are for chronic conditions.ⁱⁱⁱ Interventions to prevent and manage these conditions have both health and economic benefits.

A state investment in Healthy Aging Grants will reduce falls in older adults and associated injury related costs, manage chronic conditions and increase physical activity to reduce costs, improve wellness, and reduce the burden on public safety. We appreciate the interest in and efforts of policy makers to **improve the health and well-being of Wisconsinites as we age.** We look forward to continuing to work with you on policies that improve the quality of life for older people in Wisconsin. Thank you for your consideration of these comments related to AB 418.

J. L. Zander – AB 418 Testimony – Assembly Committee on Health, Aging and Long-Term Care_1/17/24

The Greater Wisconsin Agency on Aging Resources, Inc. (GWAAR - https://gwaar.org/) is a nonprofit agency committed to supporting the successful delivery of aging programs and services in our service area consisting of 70 counties (all but Dane and Milwaukee) and 11 tribes in Wisconsin. GWAAR is one of three Area Agencies on Aging in Wisconsin. GWAAR provides lead aging agencies in our service area with training, technical assistance, and advocacy to ensure the availability and quality of programs and services to meet the changing needs of older people in Wisconsin. GWAAR is also a member of the Wisconsin Aging Advocacy Network (WAAN - https://gwaar.org/wisconsin-aging-advocacy-network) a collaboration of organizations and individuals working with and for Wisconsin's older adults to shape public policy and improve the quality of life for older people. WAAN advocates for all older adults by educating the community and policy makers on issues impacting older adults; mobilizing people on priority issues; and advocating for change.

Contact: Janet Zander Advocacy & Public Policy Coordinator, MPA, CSW Greater Wisconsin Agency on Aging Resources janet.zander@gwaar.org (608) 228-7253

ⁱⁱⁱ Health and Economic Costs of Chronic Conditions, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. Retrieved on 1-16-24 from https://www.cdc.gov/chronicdisease/about/costs/index.htm#print

ⁱ Kakara R, Bergen G, Burns E, Stevens M. Nonfatal and Fatal Falls Among Adults Aged ≥65 Years — United States, 2020–2021. MMWR Morb Mortal Wkly Rep 2023;72:938–943. DOI: <u>http://dx.doi.org/10.15585/mmwr.mm7235a1</u>

ⁱⁱ National Council on Aging. Chronic Inequities: Measuring Disease Cost Burden Among Older Adults in the U.S. A Health and Retirement Study Analysis. Page 5, Figure 2. April 2022. Found on the internet at https://ncoa.org/article/the-inequities-in-the-cost-of chronic-disease-why-it-matters-for-older-adults

Thank you for the opportunity to speak to you today in support of AB 418. I also want to acknowledge and thank Senators Feyen and Quinn and Representative Rozar for introducing this Healthy Aging Grants legislation. My name is Jill Renken, Executive Director of the Wisconsin Institute for Healthy Aging – a non-profit organization working to improve the health and well-being of people as they age in Wisconsin. While AB 418 would support much of our work, I want to focus today on falls prevention.

Wisconsin has the highest rate of deadly falls among older adults in the nation – 1,635 older people died due to a fall in 2021.

Each year, more than one in four older adults has a fall -- 20% result in an injury like a hip fracture or traumatic brain injury making falls the number one cause of injuries in older adults. More than 43,000 older people went to the emergency department due to a fall in 2021 at an average cost of \$1,788 per visit; over 10,000 were hospitalized at an average cost of \$20,615 per hospitalization.

Behind those numbers are real people. Somebody's mother or father. Somebody's grandparent. People who fell and were injured. People who fell and were unable to get up. People who now fear falling again - so much so that they stop doing things they love to do and become isolated. Community members become patients. Family members become caregivers. Just one fall can have a big impact on many.

Falls also have serious implications for public safety and their capacity to meet community needs. Wisconsin EMS providers responded to over 130,000 older adult falls making it the top injury response in 2022 – that's 25,000 more than in 2019. Nearly one in five ambulance runs were for older adult falls in 2022 the majority of which happened at home.

The good news is that while common, falls are not an inevitable part of aging. We know what factors induce a fall. With state investment in falls prevention, we can help people reduce their falls risk.

AB 418 would do two critical things to prevent falls: 1) provide funding to the Wisconsin Department of Health Services to maintain the Falls Free Wisconsin initiative – a statewide movement launched with one-year funding from the Administration for Community Living to raise awareness of and motivate older adults and their families to reduce their risk of a fall, and 2) provide backbone support to the multidisciplinary Falls Free WI Coalition. Specifically, state investment would:

- Fund community grants to provide resources for local falls prevention efforts. We gave 10 grants totaling \$70,000 this past year to fund these local efforts.
- 2) Raise awareness of falls risk and prevention strategies among older adults, their families and caregivers and provide resources to reduce their risk.
- 3) Expand access to programs such as Stepping On that are researched and proven to reduce falls.

4) Expand the Falls Free Wisconsin Coalition bringing professionals from aging, public safety and health care together to develop and spread best practices for falls prevention in communities throughout the state.

As I mentioned, initial funding to launch Falls Free Wisconsin came from a short-term grant from the federal Administration for Community Living. We see Healthy Aging Grants as a means to sustain the effort over the coming two years as we continue to work to secure more long-term funding from other sources. At the same time, we look forward to the opportunity to demonstrate our effectiveness as good stewards of these resources.

Today, one in four Wisconsinites is 60 or older; by 2040, it will be one in three. Now is the time to engage older adults, their families and caregivers to make knowledge of falls prevention strategies commonplace and resources available. I urge you to vote in favor of AB 418 to make that goal a reality.



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TO: Representative Moses, Chair, Assembly Committee on Health, Aging and Long-Term Care

FROM: Martha Cranley, State Director, AARP Wisconsin

Subject: Testimony in Favor of Assembly Bill 418- healthy aging grants and making an appropriation

January 17th, 2024

Thank you for the opportunity to submit testimony in support of Assembly Bill 418 (Senate Bill 407) which directs the Department of Health Services to allocate \$378,000 as a grant to a Wisconsin nonprofit like the Wisconsin Institute for Healthy Aging that coordinates a network of local providers including aging offices and ADRCs, health systems, senior centers, public health, physical activity centers and others leading actions related to healthy aging. AARP WI is excited to see actions that include implementing evidence-based health promotion programs to support healthy aging; a statewide clearinghouse on evidence-based falls injury, disease prevention, self-management, and health promotion programs; providing training and technical assistance to the staff of county departments, administering agencies, and other providers of services to aging populations; and collecting and disseminating information on falls injury, disease prevention, and health promotion in healthy aging populations.

According to the Centers for Disease Control and Prevention (CDC), every year, more than 25% of adults 65 and older fall, and falling once doubles a person's chances of falling again. Sometimes a fall causes a serious injury such as a broken bone. At least 300,000 older people are hospitalized due to hip fractures. Wisconsin has the highest rate of deadly falls in the country. One in four older adults has a fall every year. Wisconsin County-Level Falls Data. An estimated \$1 billion is spent annually in Wisconsin for Medicaid and out-of-pocket costs due to falls-related health care. Older adult falls have a significant impact on public safety (EMS, Fire, ED) and for instance, the Oshkosh Fire Department – 21.4% of calls were for older adult falls. Furthermore, the stats are clear: 95% of older adults have one chronic condition, 80% have two or more, 90% of the nation's healthcare costs are for chronic conditions. In Wisconsin, the direct costs to Medicaid are about \$1.15 billion annually.

AARP WI stands with our advocating partners for Wisconsin's aging population including the Greater Wisconsin Agency on Aging Resources, Inc. (GWAAR) in support of this bill authored by Representative Rozar and Senator Feyen. We appreciate their leadership and focus on our target population that many times experience the challenges of living healthy and free of injury from falls. Communities all over Wisconsin would have a chance to benefit from these grants that help support local efforts to minimize the negative impacts of the older adults in our communities prevented from true independence.

Thank you for the opportunity to provide input on this common-sense legislation and we at AARP look forward to working with more legislators to promote options that support our aging population.

We urge all members of this committee and the full Legislature to vote yes on AB 418.

Martha Cranley State Director AARP Wisconsin



Melissa M. Stiles, MD 414 Glenway Street Madison, WI 53711

Wednesday, January 17, 2024

To: Assembly Committee on Health, Aging and Long-Term Care

Re: Support for AB418

Dear Chairperson Moses and Members of the Committee

I am Melissa Stiles, MD, a recently retired UW Health physician writing in favor of AB418. I am currently co-chairing the UW Health Community Health Improvement Adult Falls Prevention Committee and am board certified in family medicine, geriatric medicine, and hospice and palliative medicine.

I practiced family medicine for over 25 years in Belleville, WI—a small town 18 miles south of Madison. I witnessed the devastating consequences of adult falls on a regular basis: injury, decreased mobility, the need for temporary or permanent skilled care, and even death. Having served on the planning task force for the Wisconsin Institute for Healthy Aging (WIHA) from 2009-2011, I have long advocated for evidence-based health aging initiatives. We know that fall prevention programs are one of the highest value interventions in geriatric medicine and that WIHA has been a leader in coordinating falls prevention community programs in Wisconsin. We also know that unfortunately, falls for older adults continues to be a significant health issue in Wisconsin and is only increasing. In 2002, EMS responded to 131,000 calls related to falls, up 24% from 2019. Moreover, Wisconsin leads the nation in the rate of fatal falls among older adults. These statistics coupled with an increasing geriatric population give reasons for funding coordinated falls prevention efforts.

The "ROI" of fall prevention programs is multi-tiered. Not only do individuals have decreased injuries, but they also have increased quality of life after participating in a fall prevention program. There is also a positive economic impact from decreased hospitalizations, office and emergency department visits.

I urge to you advance AB418 from committee with a vote of "yes."

Thank you for your consideration.

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Melissa M. Stiles, MD