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# PATRICK SNYDER

STATE REPRESENTATIVE • 85<sup>th</sup> ASSEMBLY DISTRICT

## Testimony in Support of Senate Bills 976, and 996

Senate Committee on Transportation and Local Government

February 19<sup>th</sup>, 2026

Chairman Tomczyk and Members of the Committee,

Thank you for taking the time to allow me to testify on these important bills.

Earlier this session, I had the honor to serve as the Chairman of the Speaker's Task Force on Elder Services. Along with my Vice-Chairman Representative Doyle and other Task Force members, we crafted a package of legislation to help aid senior citizens.

During the work of the Task Force, we learned that one of the biggest priorities for seniors in Wisconsin is aging in place. Understandably, people want to stay in their homes as long as they possibly can, this bill is one of several efforts to make aging in place more attainable for older Wisconsinites.

At the Wausau public hearing, the Task Force heard testimony on the incredible impact that community care paramedics have in Wisconsin. Community care paramedics offer proactive and non-emergency intervention in the community through home visits and working with populations to proactively address health concerns so that ambulance and the ER visits are less necessary.

The Centers for Disease Control (CDC) found that Community Paramedicine can "increase the use of preventive care, improve medication adherence, reduce hospital readmissions, and prevent the overuse of emergency resources. The improved outcomes can result in cost savings and better return on investment."

Senate Bill 976 builds on the important work of community paramedics in our state by creating a pilot program to expand community paramedic positions to 6 communities that currently lack such programs. The communities would be geographically disparate and include two urban, two suburban, and two rural communities. SB 996 would fund the pilot program and give community paramedics access to fall prevention grants to ensure that community paramedics have the resources they need to do their important work and save lives.

These bills are important efforts to expand the reach of community paramedicine in our state. This is a low-cost intervention that will show savings and help keep seniors in their homes.

I am happy to answer any questions you may have.



February 19<sup>th</sup>, 2026

Senator Tomczyk, Chair

Members of the Senate Committee on Transportation and Local Government

**Testimony on 2025 Senate Bills 976, 996, 977, and 997**

***Relating to: grants for community emergency medical services, grants for falls prevention awareness and initiatives, and making an appropriation, funding for grants for community emergency medical services and falls prevention initiatives and making an appropriation, grants for economic support specialists and making an appropriation, and funding for grants for economic support specialists and making an appropriation.***

Thank you, Chairman Tomczyk and members of the committee, for hearing my testimony on several bills that came out of the Speaker's Task Force on Elder Services. As the creation of this task force acknowledges, Wisconsin can be doing much more to protect and support our elderly population as they begin to decline.

In conversations with constituents, my personal life, and hearing from experts, I have learned more about the various challenges everyone faces as they enter this new stage of life. I believe these bills will truly make a difference in mitigating some aging-related difficulties, and continue to make Wisconsin a great place to retire and age gracefully.

**Senate Bill 976 and Senate Bill 996 – Community EMS and Fall Prevention**

Millions of older people fall every year. The CDC estimates that nationally, there are about 3 million ER visits a year and 1 million fall-related hospitalizations among older adults. These falls are often not minor events; in 2019, 83% of hip fracture deaths were caused by falls. Falling is also the most common cause for traumatic brain injuries.

SB 976 and SB 996 aim to help stop these falls before they occur and to strengthen community EMS programs. These bills provide grants to six EMS programs (two urban, two rural, two suburban) to provide community EMS services and hire a full-time community paramedic. They also provide a grant to the Wisconsin Institute for Healthy Aging to invest in falls prevention awareness. The fiscally responsible thing to do is prevent these falls in the first place, not just respond once they have happened.

**Senate Bill 977 and Senate Bill 997 – Economic Support Specialists**

Navigating government benefit programs, making decisions about your living situation, and understanding the healthcare maze is not easy for anyone. It is especially challenging as you age and all of these essential services feel less accessible than ever. This is where economic support specialists come in. As experts in these systems, they help elderly people navigate public and private healthcare, managed care organizations, and other long term care options. ADRCs in Wisconsin have already seen great success from integrating an economic support staffer into their facility.

STATE SENATOR

JESSE



JAMES

23<sup>RD</sup> DISTRICT

SB 977 and SB 997 would continue that progress by creating a pilot program to place economic support specialists in ten different counties across the state. Based in the county's ADRC, these specialists will be accessible and ready to help our elderly get the services they need quickly.

I want to extend my appreciation to Representatives Snyder and Novak for their leadership on these great pieces of legislation. The passage of these bills will make a significant improvement for our elderly population across the whole state. Thank you, and I welcome any questions.

Respectfully,

A handwritten signature in black ink, appearing to read "Jesse James".

Senator Jesse James

23<sup>rd</sup> Senate District

[Sen.James@legis.wisconsin.gov](mailto:Sen.James@legis.wisconsin.gov)



Wisconsin Institute  
for Healthy Aging

1414 MacArthur Road, Suite B  
Madison, WI 53714

February 19, 2026

## **Testimony in support of Senate Bill 976 and Senate Bill 996**

Thank you, Chair Tomczyk and committee members, for the opportunity to testify before you today in support of Senate Bill 976 (and Senate Bill 996).

I would also like to thank Senator James, along with Representative Snyder and members of the Elder Services Task Force, for their work and support in advancing falls prevention efforts here in Wisconsin.

My name is Jill Renken and I'm the Executive Director for the Wisconsin Institute for Healthy Aging, which provides statewide coordination and support to falls prevention programming throughout the state.

Investing in falls prevention helps us stay active, independent, and connected as we age. Falls are the #1 cause of injury in older adults – a key driver of nursing home admissions, 911 calls, emergency department visits, and hospitalizations. Even minor falls create increased risk for more falls in the future, ultimately leading to serious injury and death.

**While falls are common, they are NOT inevitable. Together, we can prevent a large percentage of them.**

Senate Bill 976 (and Senate Bill 996), would provide \$600,000 in one-time grant funding to support the creation of community paramedicine programs in six communities and \$200,000 to the Wisconsin Institute for Healthy Aging to continue statewide falls prevention work.

Community paramedicine and community-based falls prevention programming together form a well-rounded approach to reducing the burden of falls on our systems and families. They help move us from reacting to emergencies – to preventing them. Falls are one of the top reasons older adults call 911, and community paramedics are often the first to identify fall risks during home visits and lift assists. By connecting those individuals to proven, community-based falls prevention programs, we can prevent repeat falls, reduce emergency room visits and hospitalizations, lower healthcare costs, and help older adults stay safe and independent in their homes.

The evidence-based falls prevention programs we implement are specifically designed—and proven—to produce real behavior change.

Since the Wisconsin Institute for Healthy Aging was founded, we've built a strong statewide network to deliver proven, evidence-based health programs. These programs improve quality of life and reduce health care costs.

To date, we've partnered with hundreds of local organizations to offer more than 5,000 workshops, reaching **over 51,000 participants**. Based on the health outcomes from these programs, we've helped Wisconsin save an estimated **\$38 million in health care costs**—that's an average of about **\$2 million every year**.

These statistics also have **incredible stories** behind them, one of those stories being from my own mother. Shortly after retirement, my mom started falling in her home. I encouraged her to take the **Stepping On program, which is proven to reduce falls risk by 31%**. After taking Stepping On at her local Aging and Disability Resource Center in Stevens Point, I noticed she was applying what she learned. She was doing her strength and balance exercises, talking to her health care team about adjusting some medications, and making some important home safety modifications. I can happily report she has not had a fall since - and it's been over 2 years!

**As we age, we CAN maintain and even improve our quality of life.** We see so many lives improve with these programs and services and need them to be both sustained AND more readily available in our Wisconsin communities!

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Over the past decade, we've worked hard to diversify our funding, especially as grant dollars have decreased. We've made progress, but it's not enough to sustain this important work long-term. **State investment is critical** to maintain and grow these programs so that more communities can offer them and more older adults can benefit.

**The need keeps growing.** The Wisconsin Department of Health Services recently reported that emergency medical services responded to more than 140,000 falls in 2024. That's **21% of all 911 ambulance runs**—and it's **10,000 more** than the year before.

**Now is the time to invest in community paramedicine and falls prevention.** This legislation will help Wisconsin continue building the programs and services that keep us safe, independent, and thriving in our communities.

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I am happy to answer any questions you may have.

Jill Renken, MPH, CHES, Executive Director, Wisconsin Institute for Healthy Aging  
[Jill.renken@wihealthyaging.org](mailto:Jill.renken@wihealthyaging.org) 715-340-4866

Testimony: SB 976 and SB 996  
Chief Jeremy Kopp, Wausau Fire Department

### **Community Paramedicine**

I've seen this model fail when poorly designed and succeed when properly supported. I'm here to emphasize what makes this model successful and why this bill matters.

### **What Community Care Paramedicine Really Does**

- Community paramedicine expands the role of EMS beyond emergency response.
- It directly addresses **Social Determinants of Health**, including:
  - Access to primary care
  - Medication compliance and reconciliation
  - Home safety and fall risk
  - Chronic disease education
  - Connection to community and social services
- The goal is simple: **keep people safe, stable, and in their homes**—and out of 911 and emergency departments unless truly necessary.

### **The Critical Lesson: Funding Alone Is Not Enough**

- I cannot stress this enough: **funding without a model plan will fail.**
- I have personally participated in pilot programs that:
  - Had funding
  - Had good intentions
  - **But lacked structure, partnerships, and clear goals**
- Those programs did not last and did not deliver measurable outcomes.

### **What Makes a Community Paramedic Program Successful**

A successful program requires three pillars, a Proven Model Plan

- **Clear enrollment criteria**
- **Defined scope of practice**
- **Measurable outcomes**
- **Data tracking and accountability**
- **A long-term sustainability plan**

**Without this, programs become fragmented and ineffective.**

### **Collaboration With Community Partners**

Community paramedics **cannot do this work alone.**

Successful programs require partnerships with:

- **Institutes of Healthy Aging**
- **Stepping On and fall prevention programs**
- **Home care agencies**
- **Social service organizations**
- **Primary care providers**
- **Local hospitals**

These partnerships allow paramedics to:

- Address root causes—not just symptoms
- Navigate patients into the right services
- Prevent repeat crises

### **Resources to Do the Job**

- This role requires:
  - Time
  - Training
  - Access to community resources
  - Hospital and healthcare system buy-in
- Without these, paramedics are left identifying problems they cannot fix.

### **Why Hospital Partnerships Are Essential**

- Partnering with local hospitals is **not optional**—it's key to success.
- Hospitals benefit through:
  - Reduced emergency department congestion
  - Fewer repeat visits
  - Better patient outcomes
- EMS benefits through:
  - Better care coordination
  - Shared data
  - Stronger continuity of care

### **Real Results From Our Program**

In our Community Paramedic Program:

- **40 high-utilizing patients enrolled**
- Over **14 months**, we saw:
  - **66% reduction in 911 calls**
  - **194 fewer 911 calls** than prior to enrollment

This is not theoretical—it is measured, documented impact.

### **Impact on EMS System Capacity**

- Each EMS call averages **1 hour of ALS ambulance time**
  - From dispatch to clearing the hospital
- **194 calls = 194 hours saved**
  - That equals: **8.08 full days** of an ALS ambulance running nonstop

And that's conservative. This does **not** include:

- Restocking supplies
- Required EMS documentation
- Which typically adds **another hour per call**

### **What That Time Savings Means**

- Increased availability for true emergencies
- More time for:
  - Training
  - Skill development
- Reduced:
  - Employee fatigue
  - Burnout
  - Wear and tear on frontline ambulances

This directly supports **workforce retention and safety**.

### **Emergency Department Impact**

- In the **first 6 months** of the program:
  - Aspirus Hospital Emergency Department saw a **50% reduction in patient encounters** from enrolled patients
- Estimated ED visit cost:
  - **\$2,500 per visit**
  - This is a conservative estimate and does **not include**:
    - Diagnostics, Imaging, Labs, Consults, Medications or supplies

### **Estimated Cost Savings**

- Based on EMS utilization alone:
  - Estimated savings between **\$194,000 and \$271,600**
- These savings grow when you factor in:
  - Reduced ED visits
  - Reduced hospital admissions
  - Reduced downstream healthcare costs

### **Why This Bill Matters**

- Community Care Paramedicine works **when done correctly**.
- This bill must support:
  - A structured, evidence-based model
  - Collaboration with healthcare and community partners
  - Sustainable resources—not just short-term funding
- When done right, it:
  - Keeps people safely in their homes
  - Reduces unnecessary 911 calls
  - Protects EMS capacity
  - Saves healthcare dollars
  - Improves quality of life for our most vulnerable residents

**Jeremy Kopp, Fire Chief**  
**Wausau Fire Department**  
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**Date:** February 19, 2026

**To:** Chair Tomczyk and Members of the Senate Committee on Transportation and Local Government

**From:** Erin Fabrizius, Associate State Director—Advocacy (efabrizius@aarp.org)

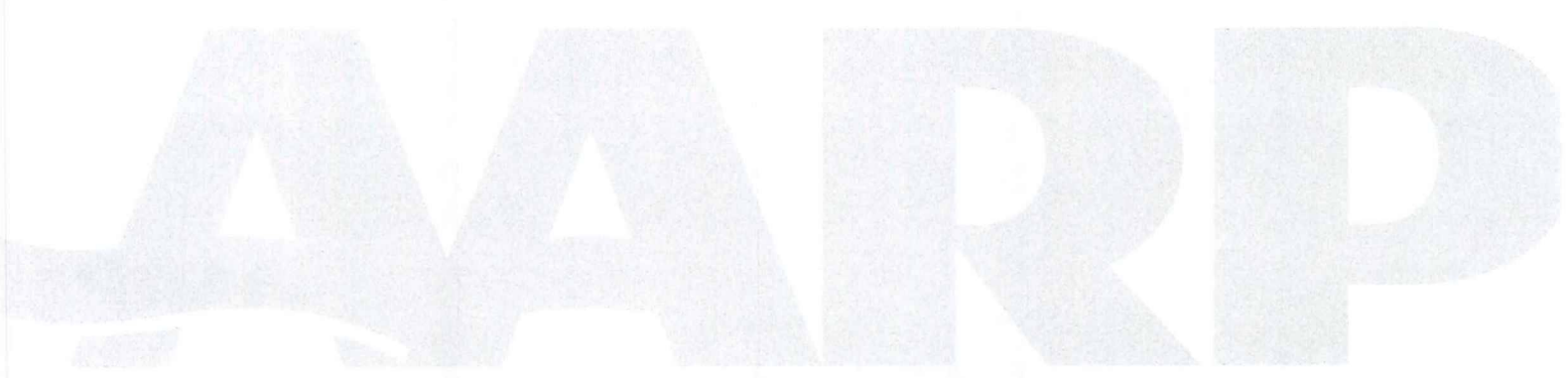
**Re:** Testimony in support of Senate Bill 976 and Senate Bill 996--grants for community emergency medical services, grants for falls prevention awareness and initiatives, and making an appropriation.

Thank you, Chair Tomczyk and committee members, for the chance to testify before you today in support of Senate Bill 976 and Senate 996.

My name is Erin Fabrizius and I'm the advocacy director for AARP Wisconsin, which represents nearly 800,000 Wisconsinites. Our mission is to help older adults choose how they live as they age.

AARP is in support of this legislation, which would provide \$600,000 in one-time grant funding to support the creation of community paramedicine programs in six communities and \$200,000 to the Wisconsin Institute for Healthy Aging to continue their falls prevention work.

While you may be wondering why both community paramedicine and falls prevention are included in this bill, it is because they are inextricably linked. Wisconsin currently leads the nation in fall-related deaths. Falls are also a key driver of nursing home admissions, emergency department visits, and hospitalizations, which create significant costs for Wisconsin families as well as our health care system. Even minor falls create increased risk for more falls in the future, ultimately leading to serious injury and death.



According to Department of Health Services data, emergency medical services (EMS) in Wisconsin responded to over 140,000 falls in 2024, representing a staggering 21% of all 911-related ambulance runs.

SB 976 and SB 996 have the potential to reduce fall-related injuries and deaths as well as increase access to health care services in our communities.

The funding provided to the Wisconsin Institute for Healthy Aging by the bill will support evidence-based falls prevention work, such as Stepping On, which is proven to reduce falls by 31%. This will in turn reduce fall-related 911 calls and help older adults maintain their independence.

The funding provided to expand community paramedicine programs across our state will further reduce unnecessary 911 calls, including fall-related calls, by connecting patients with the support they need before emergencies occur. The model is designed to identify individuals with frequent 911 calls and provide them with in-home community paramedicine services like chronic disease management, falls prevention, or access to transportation services. The idea is to address the root cause of emergency calls and deal with the underlying issue.

Please support SB 976 and SB 996.

I am happy to answer any questions you may have.



Greater Wisconsin  
Agency on Aging Resources, Inc.

Date: February 19, 2026  
To: Chair Tomczyk and members of the Senate Committee on Transportation and Local Government  
From: Janet Zander, Advocacy & Public Policy Coordinator  
Re: Support for SB 976 re: Grants for Community EMS and Grants for Falls Prevention Awareness and Initiatives & SB 996 re: Funding for Grants for Community EMS and Falls Prevention Initiatives and making an appropriation

Thank you for this opportunity to share testimony in support of SB 976 and SB 996. My name is Janet Zander. 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).

WAAN and GWAAR are dedicated to advancing policies that help older adults live safely and independently in their own homes. We are writing to express our strong support for SB 976, a critical initiative stemming from the Speaker's Task Force on Elder Services. This legislation is a vital step toward that goal by investing in two key areas:

**Expanding Proactive Care Through Community Paramedicine –**

Senate Bill 976 provides a **one-time grant of \$600,000 to support the creation of six community paramedicine programs**. Thanks to the work of the Speaker's Task Force on Elder Services, GWAAR learned of the exciting work taking place in a few, fortunate Wisconsin communities where community paramedics are improving access to primary care. Community paramedicine programs offer preventive services, chronic disease management, health screening, and mental health support, often connecting patients with needed community resources and services. Utilizing EMS personnel, these programs provide proactive, in-home care for underserved or high-system-utilizing populations. By offering to help community members stay living in their own homes, community paramedics and EMS practitioners earn the trust of community members and help them tackle whatever they may be struggling with (e.g. paying for prescriptions, need home adaptations, **frequent falls**, uncontrolled health conditions, access to healthy food, and transportation). By addressing these challenges, these programs are reducing EMS calls, emergency room visits, and hospital readmissions. They are also helping people to remain living in their own homes by connecting them with primary (vs. emergency) care and other community resources.

### Strengthening Falls Prevention Efforts –

One of the frequently utilized resources accessed by community paramedicine programs are falls screening and fall prevention classes. GWAAR strongly supports grants to expand community paramedicine programs **and the grants, included in this legislation, to provide \$200,000 in 2025-26 and again in 2026-27 to support the falls prevention work of the Wisconsin Institute for Healthy Aging.** Fear of falling or fall-related anxiety is highly prevalent among older adults. This fear often leads to reduced physical activity, social isolation, and increased, rather than decreased, fall risk. Falls are a common cause of injury and disability and are associated with a high volume of EMS calls, emergency department visits, hospitalizations and nursing home admissions. To continue the success of community paramedicine programs, valuable community resources to address falls prevention awareness and initiatives must also be available. Falls prevention requires shifting to proactive behaviors like regular exercise, removing home hazards, medication reviews, and consistent use of assistive devices. Effective behavioral changes for older adults often involve structured programs that build confidence, reduce fear of falling, and improve daily safety habits. To ensure the continued success of community paramedicine, we must also ensure that the resources they refer patients to—like evidence-based fall prevention classes—remain available and well-funded.

WAAN and GWAAR respectfully ask for your support of **SB 976 and SB 996** (the funding legislation for this initiative). By shifting from a reactive emergency model to a proactive, community-centered model, we can help Wisconsinites age with dignity in the homes they love.

Thank you for your time and leadership on this issue.

*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 policy solutions that ensure we can all thrive as we age.*

Contact:

Janet Zander

Advocacy & Public Policy Coordinator, MPA, CSW

Greater Wisconsin Agency on Aging Resources

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