March 30, 2020

The Honorable Rosa DeLauro  
Chairwoman  
House Appropriations Subcommittee on  
Labor, HHS, Education and Related Agencies  
Washington, DC 20515

The Honorable Roy Blunt  
Chairman  
Senate Appropriations Subcommittee on  
Labor, HHS, Education and Related Agencies  
Washington, DC 20515

The Honorable Tom Cole  
Ranking Member  
House Appropriations Subcommittee on  
Labor, HHS, Education and Related Agencies  
Washington, DC 20515

The Honorable Patty Murray  
Ranking Member  
Senate Appropriations Subcommittee on  
Labor, HHS, Education and Related Agencies  
Washington, DC 20515

Dear Chairwoman DeLauro, Chairman Blunt, Ranking Member Cole, and Ranking Member Murray:

The undersigned organizations are committed to protecting older Americans and urge you to fund the Administration for Community Living (ACL) engagement of the aging services network to implement and sustain evidence-based falls prevention programs at a minimum of $10 million, and the Centers for Disease Control and Prevention (CDC) National Center for Injury Prevention and Control programming and research to prevent older adult falls at a minimum of $4 million, for FY 2021.

Older adult falls are common, costly, and often preventable. They represent the leading cause of preventable death among adults 65 years of age and older. In the United States, about one in four adults (30%) age 65 and older, report falling each year. This results in about 30 million falls each year. While not all falls result in an injury, about 38% of those who fall reported an injury that required medical treatment or restricted their activity for at least one day, resulting in an estimated 7 million fall injuries. An older adult dies from a fall every 19 minutes.

The annual direct medical costs for falls injuries is over $50 billion, including $29 billion in Medicare spending and $9 billion in Medicaid spending. The cost of treating falls is projected to increase to over $101 billion by 2030. A state-by-state chart\(^1\) developed by CDC of the human costs associated with this preventable injury shows that in one year alone there is a range from a high rate in Arkansas of 38% of adults 65 years old and older to a low in Hawaii of 25%.

A report released last October by the Senate Special Committee on Aging (Falls Prevention: National, State, and Local Solutions to Better Support Seniors\(^2\)) stated: “The Committee recommends continued investment in the development of and expanded access to evidenced-based falls-prevention programs to ensure greater awareness of the risk of falls among older adults and promote preventive steps that can be taken to avoid a fall.”

The Administration for Community Living (ACL) provides training and program translation to improve access to evidence-based programs in local communities to prevent falls among older adults. These much-needed funds will expand access for seniors to attend evidence-based programs that leverage community networks linking clinical treatment and community services, reduce or eliminate risk factors, reduce health care costs associated with emergency room, physician, hospital and rehab visits. For example, the Tai Chi Moving for Better Balance program has produced a 55% reduction in falls, with a 509% return on investment.

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1. Available at: https://www.cdc.gov/homeandrecreationalsafety/falls/fallcost/falls-by-state.html
2. Available at: https://www.aging.senate.gov/imo/media/doc/307989%20Falls%20Book%20Final.pdf
The CDC houses the experience required to institute public health strategies to create a safety system for older adults. With the implementation of its Stopping Elderly Accidents, Deaths and Injuries (STEADI) toolkit, the CDC provides easy and effective resources for professionals who work with older adults daily, including physicians and pharmacists. They also evaluate fall prevention strategies to help communities identify the best, evidence based efforts to prevent falls and keep older adults safe and independent. The Senate Aging Committee also recommended in the aforementioned report strengthening screening and referral pathways and taking steps to ensure greater utilization of CDC’s STEADI resources.

This funding request is a relatively small investment when compared with the return it could provide to maintain the safety, health and productivity of our older Americans. We hope you will join with us in support for this funding.

Sincerely,

Alliance for Aging Research
Alliance for Retired Americans
Alzheimer's Foundation of America
AMDA: The Society for Post-Acute and Long-Term Care Medicine
American Association on Health and Disability
American Geriatrics Society
American Occupational Therapy Association
American Physical Therapy Association
America's Health Insurance Plans (AHIP)
Bipartisan Policy Center Action
Brain Injury Association of America
Community Catalyst
Easterseals
Green & Healthy Homes Initiative
Home Modification Occupational Therapy Alliance
Lakeshore Foundation
Meals on Wheels America
National Adult Day Services Association (NADSA)
National Association for Home Care and Hospice
National Association of Area Agencies on Aging
National Association of Nutrition and Aging Services Programs (NANASP)
National Association of RSVP Directors
National Association of State Head Injury Administrators
National Council on Aging
National Osteoporosis Foundation
National Safety Council
NFSI
PatientLink
Prevent Blindness
Prevention Institute
Safe States Alliance
ThinkFirst Foundation
Trust for America's Health
WISER