National Safety Council Statement
For the Senate Special Committee on Aging
Hearing on
October 16, 2019

The National Safety Council (NSC) is a nonprofit organization with a century-long mission of eliminating preventable deaths at work, in homes and on the road through leadership, research, education and advocacy. Our more than 15,000 member companies represent employees at more than 50,000 U.S. worksites.

According to National Safety Council Injury Facts® falls are currently the third leading cause of preventable death. In 2017, 31,190 older adults aged 65 and older died from preventable falls, and more than 3 million were treated in emergency departments.1 Over the past 10 years, the number of older adult fall deaths has increased 58%, while emergency department visits have increased 40%. Today, an older adult dies from a fall every 19 minutes. According to the Centers for Disease Control and Prevention (CDC), more than one in four older adults report a fall each year.ii

Fall injuries are among the 20 most expensive medical conditions, and government-funded programs, such as Medicare and Medicaid, finance about 75% of these costs. As the American population continues to age, and with 10,000 people in the United States turning 65 every day, we could expect to see 49 million falls, 12 million fall injuries and almost 100,000 fall-related deaths per year by 2030.iii

According to CDC, the financial cost to the nation is $31 billion annually in Medicare spending alone to treat these injuries. However, while falls represent the leading cause of preventable death among adults 65 years of age and older, they are not an inevitable part of aging in America and are on the whole, preventable.

In order to address fall prevention for older Americans, the National Safety Council has previously urged Congress to support $4 million to the CDC National Center for Injury Prevention and Control programming and research to prevent older adult falls and $10 million to the Administration for Community Living (ACL) engagement of the aging services network to implement and sustain evidence-based falls prevention programs, in conjunction with leading advocacy and support organizations nationwide. A copy of this letter is attached.

Older adult falls may be best addressed by providing evidence-based falls prevention programs in communities, and through identification of specific risk factors that older adults may face. More than 90% of older adults see a medical provider at least once a year, and many of these individuals see their pharmacists even more frequently. Clinicians and pharmacists can both serve as critical resources to help inform and empower older adults to address one or more specific fall risk factors.

The National Safety Council supports the CDC STEADI (Stopping Elderly Accidents Deaths and Injuries) programiv to help all healthcare providers make fall prevention a routine part of clinical care. STEADI includes a coordinated care plan that offers healthcare providers a 12-step framework to manage older patients’ fall risk.v
Given that certain medications can increase fall risk, CDC also created STEADI Rx to engage with community pharmacists and coordinate on falls prevention efforts. STEADI-Rx offers tools for pharmacists on how to screen, assess, and coordinate care to reduce older adult fall risk.\textsuperscript{vi}

There are other steps to take to reduce chances of a fall. A review of 54 randomized clinical trials\textsuperscript{vii} found that the combination of exercise and vision assessment and treatment likely has the strongest association with decreasing fall injuries among older adults. A 2015 CDC study assessing the cost-benefit analysis of three older adult fall-prevention programs identified a positive return on investment for all three programs. The three programs demonstrated that the cost of decreased direct medical costs was greater than the costs associated with implementing the program. Two programs focused either on Tai Chi or improving balance and administered to persons age 80 and older resulted in a greater than 100\% return on investment.\textsuperscript{viii} A similar 2015 study found that adults who consistently participate in exercise programs can reduce their risk of experiencing a medically treated fall by 20\% to 30\%.\textsuperscript{ix}

Preventing and reducing falls lowers healthcare spending, improves health and fosters independence. Congress should lead by providing necessary funding to the CDC and ACL and publicizing already available resources such as STEADI.

While we all are aging every day, falls do not have to be a part of that process. Understanding fall risks is the first step to keeping our loved ones and ourselves safe. Thank you for the opportunity to share this testimony, and for supporting a national conversation that will help older Americans lead their fullest lives.

\textsuperscript{1} https://injuryfacts.nsc.org/home-and-community/safety-topics/older-adult-falls/
\textsuperscript{2} https://www.cdc.gov/mmwr/volumes/65/wr/mm6537a2.htm
\textsuperscript{3} https://www.cdc.gov/mmwr/volumes/67/wr/mm6718a1.htm?s_cid=mm6718a1_w
\textsuperscript{4} https://www.cdc.gov/steadi/index.html
\textsuperscript{5} https://www.cdc.gov/steadi/steadi-Coordinated-Care-Final-4_24_19.pdf
\textsuperscript{6} https://www.cdc.gov/steadi/steadi-rx.html
\textsuperscript{7} https://www.ncbi.nlm.nih.gov/pubmed/29114830
\textsuperscript{8} https://www.ncbi.nlm.nih.gov/pubmed/25662884
\textsuperscript{9} https://www.cdc.gov/pcd/issues/2015/14_0574.htm
March 22, 2019

The Honorable Rosa DeLauro
United States House of Representatives
Committee on Appropriations
Labor, Health and Human Services, Education and Related Agencies
Washington, DC 20515

The Honorable Tom Cole
United States House of Representatives
Committee on Appropriations
Labor, Health and Human Services, Education and Related Agencies
Washington, DC 20515

The Honorable Roy Blunt
United States Senate
Committee on Appropriations
Labor, Health and Human Services, Education and Related Agencies
Washington, DC 20510

The Honorable Patty Murray
United States Senate
Committee on Appropriations
Labor, Health and Human Services, Education and Related Agencies
Washington, DC 20510

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

The undersigned organizations are committed to protecting our older Americans and urge you to fund 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, and 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, for FY 2020.

Falls are not an inevitable part of aging in America yet they represent the leading cause of preventable death among adults 65 years of age and older. It is an escalating health risk for this population, but with sound research and science, more can be done to prevent fall-related injuries. In 2014, there were 29 million falls among adults over the age of 65, which is one fall every second of every day, and of those who fell, 37.5% reported requiring medical treatment or restricted activity for at least 1 day. An older adult dies from a fall every 19 minutes. In 2015, total medical costs to treat older adult falls exceeded $50 billion. As the baby boomer generation continues to age, these injuries, deaths and associated costs are likely to increase substantially unless more is done.

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 are also evaluating fall prevention strategies to help communities identify the best, evidence based efforts to prevent falls and keep older adults safe and independent.

The Administration for Community Living (ACL) is leveraging the CDC investment in provider 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 programs that will identify and ameliorate risks and reduce health care costs associated with
emergency room, physician, hospital and rehab visits. Older adult falls costs Medicare $31 billion annually.

Attached is a state-by-state chart of the human costs associated with this preventable injury in one year alone. As you can see, in the U.S. it ranges from a high rate in Arkansas of 34% of adults 65 years old and older to a low in Hawaii of 20%. According to CDC, the financial cost to the nation is great as well with Medicare spending $31 billion annually to treat these injuries.

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

Sincerely,

American Physical Therapy Association
Association of State and Territorial Health Officials
Brain Injury Association of America
Easterseals
Fall Prevention Center of Excellence, Leonard Davis School of Gerontology
Lorain County Public Health
Meals on Wheels America
MobileHelp
National Alliance for Caregiving
National Asian Pacific Center on Aging (NAPCA)
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 Consumer Voice for Quality Long-Term Care
National Council on Aging
National Floor Safety Institute
National Safety Council
Prevention Institute
Safe States Alliance
Trust for America’s Health
Wisconsin Institute for Healthy Aging
WISER