April 2, 2014

The Honorable Barbara A. Mikulski  
Chairwoman, Committee on Appropriations  
United States Senate  
Washington, DC 20510

The Honorable Thad Cochran  
Ranking Member, Committee on Appropriations  
United States Senate  
Washington, DC 20510

The Honorable Tom Harkin  
Chairman, Appropriations Subcommittee on Labor,  
Health and Human Services, and Education  
United States Senate  
Washington, DC 20510

The Honorable Richard Shelby  
Ranking Member, Appropriations Subcommittee on  
Labor, Health and Human Services, and Education  
United States Senate  
Washington, DC 20510

Dear Chairwoman Mikulski, Ranking Member Cochran, Chairman Harkin and Ranking Member Shelby:

As you begin consideration of the fiscal year 2015 Labor, Health and Human Services, Education, and Related Agencies appropriations bill, we respectfully request that allocate $10 million from the Prevention and Public Health Fund to fund elder falls prevention, just as the Committee proposed for each of the last three years. We are grateful for the allocation provided for FY14 for a significant health problem whose cost is growing exponentially.

One of the greatest financial challenges facing our nation is the rising cost of health care services required by older Americans. Significant progress can be made in decreasing these health care costs if we can reduce falls among this population. Data indicates that elder falls are widespread, expensive and often preventable. Every year, one in three Americans aged 65 and over falls. Every 15 seconds, an older adult is treated in the Emergency Room for a falls-related injury.

The annual direct medical costs for treating these injuries in 2011 were over $36 billion. Medicare costs in the first year after a fall averaged between $12,150 and $18,009. This figure is projected to increase to nearly $62 billion in 2020, costing Medicare an estimated $48 billion.

Preventing falls will help people to stay independent and in their homes, avoiding costly hospitalizations and reducing hip fractures that frequently lead to nursing home placement. Several evidence-based falls interventions have proven to be effective, with randomized control trials demonstrating reductions in falls of 30% to 55%. These interventions have also shown a positive return on investment. The Tai Chi: Moving for Better Balance program, for example, saves $1.60 in direct medical cost for every $1.00 invested. A November 2013 CMS report found that the Matter of Balance (MOB) falls prevention program was associated with a $938 annual decrease in medical costs per participant.

Consistent with the Committee’s proposal for the past three years, and building on the allocation secured for FY14, we urge you to allocate $10 million for elder falls prevention from the Prevention and Public Health Fund, in addition to the current $1.9 million appropriation for the CDC. This funding is vital to addressing a thoughtful set of interventions, in part developed by a national fall prevention expert panel:

- Enhance efforts to implement evidence-based falls prevention programs through ACL’s network of community-based provider organizations;
- Test and disseminate fall prevention tools to support patient assessment and referral, and the use of evidence-based community programs;
- Better integrate health care and state/local health department activities in the delivery of fall prevention services in collaboration with the aging services network; and
- Develop and promote public education programs to raise awareness about falls and what individuals, families, health professionals, and organizations can do to reduce them.
Thank you in advance for your support on this critical issue, which will reduce health care costs and improve the quality of the lives of millions of older Americans and their families.

Sincerely,

Alliance for Aging Research
Alliance for Retired Americans
Alzheimer's Foundation of America
American Academy of Audiology
American Association on Health and Disability
American Bone Health
American Geriatrics Society
American Occupational Therapy Association
American Physical Therapy Association
American Podiatric Medical Association
American Society on Aging
Easter Seals
Gray Panthers
LeadingAge
National Association for Continence
National Association for Home Care & Hospice
National Association of Area Agencies on Aging
The National Association of Professional Geriatric Care Managers
National Association of Geriatric Education Centers
National Association of Nutrition and Aging Services Programs
National Association of RSVP Directors
National Association of States United for Aging and Disabilities
The National Consumer Voice for Quality Long Term Care
National Committee to Preserve Social Security and Medicare
National Council on Aging
National Senior Corps Association
OWL - The Voice of Midlife and Older Women
PHI - Quality Care through Quality Jobs
Prevent Blindness
Rebuilding Together
Safe States Alliance
Society for Advancement of Violence and Injury Research
YMCA of the USA