July 11, 2017

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 Rosa DeLauro
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 Cole, Ranking Member DeLauro, 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 $2 million for FY18.

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. As the baby boomer generation continues to age, these injuries are likely to increase 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.

Attached is a state-by-state chart of the human costs associated with this preventable injury. 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 Association of Orthopaedic Surgeons
American College of Surgeons

American Geriatrics Society
American Physical Therapy Association
Association of State and Territorial Health Officials
Brain Injury Association of America
Hawaii Department of Health - Emergency Medical Services and Injury Prevention System Branch
Hawaii Injury Prevention Advisory Committee
Hawaii State Fall Prevention Consortium
Injury Prevention Research Center at Emory
Kauai Fall Prevention Alliance
Maui Fall Prevention Coalition
Michael J. Klag, MD, MPH, Dean, Johns Hopkins Bloomberg School of Public Health
National Association of State EMS Officials
National Association of State Head Injury Administrators
National Association of Area Agencies on Aging
National Association of County and City Health Officials
National Association of RSVP Directors
National Consumer Voice for Quality Long-Term Care
National Council on Aging
National Recreation and Park Association
National Safety Council
PatientLink Enterprises, Inc.
Prevention Institute
Safe States Alliance
The University of Oklahoma College of Medicine, Department of Family and Preventive Medicine
ThinkFirst National Injury Prevention Foundation
Trust for America's Health
United States Brain Injury Alliance
Wisconsin Institute for Healthy Aging

cc: House and Senate Appropriations Labor-HHS Subcommittee Members

TABLE 2. Percentages and rates* of falls and fall injuries† in the preceding 12 months reported by adults aged ≥65 years (N = 147,319), by states ranked by percentage of older adults reporting ≥1 fall — Behavioral Risk Factor Surveillance System, United States, 2014

State	No. reporting a fall§	% (95% CI)	No. of falls reported (thousands)	Rate¶ (95% CI)	No. reporting a fall injury	% (95% CI)	No. of fall injuries reported (thousands)	Rate** (95% CI)
Overall	**43,958**	**28.7 (28.2–29.1)**	**29,000**	**672 (648–695)**	**16,083**	**10.7 (10.4–11.0)**	**7,000**	**164 (156–171)**
Arkansas	727	34.3 (31.6–37.0)††	377	868 (725–1011)††	275	11.5 (9.9–13.4)	79	183 (148–218)
Alaska	324	32.9 (29.0–37.0)††	65	940 (683–1197)††	114	11.9 (9.4–15.0)	12	178 (128–227)
Michigan	901	32.6 (30.5–34.8)††	1,216	810 (671–949)	323	11.4 (10.0–13.0)	265	177 (137–217)
Missouri	865	32.4 (29.9–35.0)††	741	823 (639–1008)	326	12.9 (11.2–14.9)††	187	208 (150–266)
Montana	908	32.2 (29.7–34.7)††	137	824 (670–977)	351	12.1 (10.5–13.9)	27	163 (139–187)
Kentucky	1,174	32.1 (29.7–34.6)††	473	770 (660–880)	445	11.9 (10.3–13.6)	108	176 (145–208)
Wyoming	836	32.1 (29.7–34.5)††	65	831 (668–994)	276	10.5 (9.1–12.2)	15	196 (122–270)
Indiana	1,272	31.8 (29.9–33.7) ††	685	762 (659–864)	441	11.0 (9.8–12.3)	156	174 (142–207)
Oregon	626	31.8 (29.4–34.4)††	495	822 (684–960)††	251	12.3 (10.6–14.2)	145	241 (125–357)
Vermont	561	31.7 (29.2–34.3)††	78	777 (646–909)	197	11.1 (9.5–12.9)	15	151 (126–177)
Iowa	887	31.5 (29.5–33.7) ††	322	686 (604–767)	289	9.9 (8.7–11.3)	70	149 (118–179)
Washington	1,120	31.2 (29.3–33.2)††	813	840 (652–1028)	406	10.5 (9.3–11.8)	150	155 (131–179)
Oklahoma	920	30.9 (28.9–32.9)††	488	891 (706–1075)††	322	11.1 (9.9–12.6)	120	219 (122–315)
California	613	30.7 (28.0–33.5)	3,134	801 (631–970)	225	12.4 (10.4–14.8)	807	207 (156–257)
Kansas	1,321	30.5 (28.9–32.0)††	292	735 (619–851)	455	10.4 (9.4–11.4)	76	191 (106–275)
Texas	1,504	30.2 (27.9–32.7)	1,906	654 (563–745)	551	11.4 (9.9–13.2)	476	164 (136–191)
Tennessee	600	30.1 (27.5–32.8)	685	737 (614–860)	213	11.4 (9.6–13.4)	166	179 (131–228)
Ohio	1,209	30.1 (28.0–32.3)	1,210	688 (610–767)	452	10.4 (9.1–11.9)	259	147 (124–171)
District of Columbia	427	30.1 (26.9–33.4)	51	687 (548–826)	155	11.7 (9.5–14.3)	13	175 (121–230)
Maine	1,014	29.9 (27.9–31.9)	195	836 (640–1032)	327	9.3 (8.1–10.5)§§	35	151 (116–185)
Idaho	586	29.9 (27.2–32.8)	154	697 (600–794)	201	10.6 (8.8–12.7)	37	170 (131–209)
Utah	1,049	29.6 (27.8–31.6)	192	668 (591–744)	383	10.5 (9.3–11.8)	43	149 (126–172)
Alabama	925	29.4 (27.3–31.6)	524	733 (630–836)	342	10.7 (9.4–12.3)	121	170 (134–206)
South Carolina	1,097	29.2 (27.4–31.1)	553	749 (623–874)	431	11.4 (10.2–12.8)	155	211 (140–281)
Massachusetts	1,591	28.6 (26.8–30.5)	588	611 (532–689)	613	10.6 (9.5–11.9)	146	152 (127–177)
Pennsylvania	1,083	28.6 (26.7–30.5)	1,208	588 (524–651)§§	380	9.9 (8.7–11.2)	271	132 (114–151)§§
Georgia	615	28.6 (26.2–31.1)	769	649 (560–738)	227	10.5 (8.9–12.2)	190	160 (124–196)
South Dakota	720	28.5 (25.6–31.6)	74	577 (473–681)	242	9.7 (8.0–11.8)	18	143 (103–183)
Nebraska	2,235	28.2 (26.8–29.6)	187	701 (614–789)	751	9.9 (9.0–10.9)	39	146 (120–172)
Delaware	441	28.1 (25.4–31.0)	97	660 (495–826)	160	10.0 (8.3–12.0)	21	143 (112–175)
Mississippi	457	28.1 (25.3–31.0)	282	674 (526–822)	163	8.9 (7.4–10.6)§§	55	133 (98–167)
North Carolina	642	28.0 (25.9–30.2)	868	616 (543–688)	234	10.0 (8.7–11.6)	237	168 (132–205)
New Hampshire	619	28.0 (25.5–30.6)	131	649 (530–768)	228	9.6 (8.2–11.3)	33	162 (108–217)
New Mexico	828	27.8 (25.5–30.2)	190	661 (567–755)	294	10.2 (8.7–11.9)	46	158 (125–192)
Wisconsin	505	27.8 (24.9–30.9)	496	690 (470–911)	192	10.1 (8.3–12.2)	104	145 (111–179)
New York	547	27.7 (25.2–30.3)	1,598	584 (507–661)§§	205	10.7 (9.1–12.6)	422	154 (126–183)
Arizona	1,722	27.5 (26.0–29.1)	676	707 (591–824)	677	10.4 (9.4–11.5)	142	148 (130–167)
Illinois	457	27.4 (24.7–30.3)	1,058	610 (485–736)	178	11.1 (9.3–13.2)	277	160 (125–195)
North Dakota	732	27.2 (24.8–29.7)	71	677 (539–815)	264	9.5 (8.1–11.2)	15	145 (101–188)
Colorado	1,107	27.1 (25.4–28.8)	374	601 (515–688)	395	9.4 (8.4–10.5)§§	85	137 (115–158)§§
Nevada	386	26.9 (23.6–30.5)	233	605 (475–735)	141	9.8 (7.8–12.2)	76	198 (124–272)
Rhode Island	550	26.8 (24.4–29.3)	90	566 (457–674)	219	10.2 (8.6–12.0)	24	150 (113–186)
West Virginia	536	26.6 (24.4–28.9)	208	642 (533–751)	206	9.9 (8.5–11.6)	48	149 (121–177)
Connecticut	661	26.5 (24.2–29.0)	263	496 (425–567)§§	266	10.3 (8.8–12.1)	79	149 (117–182)
Minnesota	1,185	26.1 (24.5–27.6)§§	448	591 (514–669)	415	9.0 (8.0–10.1)§§	105	139 (114–164)
Virginia	700	25.6 (23.5–27.8)§§	602	534 (468–600)§§	265	9.9 (8.5–11.4)	154	137 (112–162)§§
Florida	1,060	25.1 (23.4–26.9)§§	2,087	599 (513–686)	440	10.4 (9.3–11.7)	526	151 (129–174)
Maryland	1,179	25.1 (23.1–27.2)§§	405	506 (437–576)§§	418	8.1 (7.0–9.3)§§	93	116 (98–134)§§
Louisiana	530	24.9 (22.7–27.1)§§	365	591 (511–670)	193	8.6 (7.3–10.1)§§	92	150 (108–191)
New Jersey	937	23.6 (21.6–25.7)§§	653	525 (421–629)§§	397	10.2 (8.9–11.8)	187	151 (111–190)
Hawaii	467	20.8 (18.5–23.4)§§	85	399 (331–467)§§	169	7.0 (5.6–8.6)§§	18	83 (66–101)§§

Abbreviation: CI = confidence interval.

* Number of falls in the preceding 12 months.

† An injury caused by a fall in the preceding 12 months that caused respondents to limit their regular activities for ≥1 days or to go see a doctor.

§ Unweighted number of older adults reporting a fall. Because of varying question-specific nonresponse, sample sizes vary among questions.

¶ Number of falls per 1,000 adults aged ≥65 years.

** Number of fall injuries per 1,000 adults aged ≥65 years.

†† Significantly higher than the overall percentage or rate.

§§ Significantly lower than the overall percentage or rate.