

Healthy Aging Grants

Reducing falls. Managing chronic conditions. Reducing costs.

Today, one in four Wisconsinites is 60 or older; by 2040, it will be one in three. The demand for services, health care and long-term care is growing. But what if we could reduce that demand by improving the health and well-being of people as they age?

Healthy Aging Grants can do just that!

Research has demonstrated that people — at any age — can learn and carry out effective strategies to reduce their falls risk, better manage chronic health problems, increase physical activity and improve overall physical and mental wellness.

To that end, the Wisconsin Institute for Healthy Aging (WIHA) and its community partners support legislation to fund the researched and proven strategies that give older people, their families and caregivers the tools to protect their own health and wellness in these key areas:

Preventing Older Adult Falls

Falls are the number one cause of injuries in older adults and are a key driver of emergency department (ED) visits, hospitalizations and nursing home admissions. One in four older adults has a fall each year and, sadly, Wisconsin has the highest rate of deadly falls in the nation.¹ Yet, there is no state investment in falls prevention.

- \$1 billion is spent annually on falls-related health costs in Wisconsin which includes Medicare, Medicaid and out-of-pocket expenses.²
- Falls have a major impact on emergency medical service (EMS) and health care providers. EMS providers responded to over 140,000 falls across the state making falls the top injury response in 2024 with over 35,000 more than in 2019.³ Over one in five EMS responses were for older adult falls in 2024; the majority of these falls happened in the home.³
- More than 51,000 older people went to the emergency department due to a fall in 2023; over 11,000 were hospitalized.⁴

The good news is that while common, falls are not inevitable as we age. Many can be prevented with state investment in prevention efforts.



\$450,000/yr
in 2025-2027 annual
state investment for
2 years
in Healthy Aging
Grants to:

**Reduce falls in older
adults and associated
injury-related costs**

\$1B
spent annually on falls-
related health costs

**Manage chronic
conditions and increase
physical activity to
reduce costs and
improve wellness**

95%
of older adults have
at least one chronic
condition; 80% have
two or more.
(CDC)

Falls Free Wisconsin – Launched in 2023, the Falls Free Wisconsin initiative along with community partners statewide provides:

- Virtual falls-risk assessments and interactive tools and resources to reduce risk
- State and local public awareness campaigns to help consumers find and access falls prevention resources
- Support and funding for local falls prevention programs and initiatives
- Coordination of Wisconsin's statewide falls prevention coalition
- Support and resources for emergency service and health professionals
- Sustainability and expansion of Stepping On — an evidence based program shown to reduce falls by 31%.⁵ To date, over 21,000 people in Wisconsin have participated in the Stepping On program.

State investment in Healthy Aging Grants will support the long-term sustainability of the Falls Free Wisconsin effort and expand access to Stepping On and other programs to reach more people, reduce falls and save dollars.

Managing Chronic Conditions & Promoting Physical Activity

Nearly 95% of older adults have at least one chronic condition such as heart disease, diabetes, or arthritis; 80% have two or more.⁶

- 90% of the nation's health care expenditures are for chronic conditions⁷
- The direct costs to the Medicaid system are estimated at \$1.15 billion annually in Wisconsin⁸

WIHA offers physical activity and chronic disease self-management programs — taken by over 20,000 people in Wisconsin — that focus on behavior change and are evidence-based to reduce health care utilization, improve outcomes, and reduce the risk of moderate or severe functional limitations.

State investment in Healthy Aging Grants will sustain the infrastructure needed to support local program providers and ensure that programs are accessible to people throughout the state. Together, we can reduce falls, better manage chronic conditions, increase physical activity and preserve independence — all while reducing the burden and costs to health care and public safety.

About WIHA

The Wisconsin Institute for Healthy Aging — a 501(c)(3) non-profit organization — provides leadership to falls prevention efforts and offers evidence-based health promotion programs through a provider network that includes Aging & Disability Resource Centers, public health agencies, health care and community-based organizations.

To date, over 45,000 people have participated in WIHA programs statewide. But programs would not be available without WIHA engaging new providers, training new facilitators, providing technical assistance, collecting and managing data, and promoting available programs.

Healthy Aging Grants are key to the sustainability of these efforts.

1. CDC: <https://www.cdc.gov/falls/data/fall-deaths.html>

2. WI DHS, Office of Health Informatics, 2023 data

3. WI DHS, Wisconsin EMS and Falls Report (2024). <https://www.dhs.wisconsin.gov/publications/p03493-2024.pdf>

4. WI DHS WISH - Injury-related health outcomes, Unintentional fall-related injuries. <https://www.dhs.wisconsin.gov/wish/injury-ed/query.htm>

5. Clemson, Lindy, et al., "The Effectiveness of a Community-Based Program for Reducing the Incidence of Falls in the Elderly: A Randomized Trial," *Journal of American Geriatrics Society*, 52:1487-1494, 2004.

6. National Council on Aging. Chronic Inequities: Measuring Disease Cost Burden Among Older Adults in the U.S. A Health and Retirement Study Analysis. Page 5, Figure 2. April 2022. <https://ncoa.org/article/the-inequities-in-the-cost-of-chronic-disease-why-it-matters-for-older-adults>

7. CDC: <https://www.cdc.gov/chronicdisease/about/costs/index.htm>

8. National Health Interview Survey (NHIS); Centers for Disease Control and Prevention, National Center for Health Statistics (CDC/NCHS)



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