



Legislative Fiscal Bureau

One East Main, Suite 301 • Madison, WI 53703 • (608) 266-3847 • Fax: (608) 267-6873
Email: fiscal.bureau@legis.wisconsin.gov • Website: <http://legis.wisconsin.gov/lfb>

May, 2019

Joint Committee on Finance

Paper #395

Healthy Aging Grant (Health Services -- Public Health)

[LFB 2019-21 Budget Summary: Page 201, #8]

CURRENT LAW

The Department of Health Services (DHS) administers several programs that support services for elderly Wisconsin residents. However, DHS does not administer or provide grants for programs that support healthy aging. According to the U.S. Department of Health and Human Services (DHHS), "healthy aging" includes adopting healthy habits and behaviors, staying involved in community activities, using preventive services, managing health conditions, and understanding how medications can contribute to a productive and meaningful life.

2015 Wisconsin Act 55 provided one-time funding of \$200,000 GPR in each year of the 2015-17 biennium to support healthy aging programs. Since funding was not provided on an ongoing basis, the appropriation was time-limited and was repealed at the end of 2016-17, as directed by statute. DHS awarded this funding to the Wisconsin Institute on Healthy Aging (WIHA), which used it to develop and expand healthy aging programs across the state.

GOVERNOR

Provide \$250,000 GPR annually and require DHS to award a grant of \$250,000 GPR in each fiscal year to an entity that conducts programs in healthy aging. Create an appropriation in the Department's Division of Public Health for this purpose.

DISCUSSION POINTS

1. DHS estimates that between 2010 and 2040, the percentage of people in Wisconsin ages 65 and older will increase from 13.7% to 23.7% and the percentage of Wisconsin residents ages 85

and older will increase from 2.1% to 4.4% of the state's total population.

2. According to the federal Centers for Disease Control and Prevention, falls are the leading cause of fatal and nonfatal injuries among adults age 65 and older. CDC reports that nationwide, in 2017, approximately 31,400 adults over the age of 65 died as a result injuries from falls, and elderly individuals experienced 2,973,000 nonfatal injuries from falls. Injuries and deaths from falls are preventable. Health care providers can play a role in reducing injuries and deaths from falls by screening older adults for fall risks, reviewing and managing medications, and recommending vitamin D supplements to improve bone, muscle and nerve health. However, many elderly adults with access to primary care do not receive these services.

3. The Governor's budget would provide \$250,000 annually and require DHS to award a grant of \$250,000 in each fiscal year to an entity that conducts programs in healthy aging. The administration intends for the this funding to enable the selected entity to: maintain statewide program licenses; research, develop, and maintain the infrastructure for coordination of the state's healthy aging programs; provide data collection and analysis; and support county and tribal aging units, aging and disability resource centers, and other local partners in development and training leaders and recruiting participants.

4. In 2015, DHS was not required to solicit applications for a competitive process because WIHA was, and continues to be, the only organization in Wisconsin that serves as the statewide clearinghouse for healthy aging programs and maintains licensure for these programs. No other entity serves a similar purpose. DHS indicates that unless another organization becomes eligible to receive these funds, it is likely DHS will continue to pursue a sole source contract with WIHA.

5. WIHA is currently funded from a variety of sources including grants, registration fees for leader trainings; registration fees for the bi-annual Healthy Aging Summit; business sponsorships for the bi-annual Healthy Aging Summit; and sales of national Stepping On Falls Prevention licenses. In calendar years 2018 and 2019, approximately 70-75% of WIHA's budget is based on grant revenue, with approximately 60% of that grant revenue coming from the two federal grants, described below.

6. In 2017, WIHA was awarded two three-year federal grants from the DHHS Administration for Community Living to train program leaders and expand certain healthy aging programs. First, the chronic disease self-management expansion grant provided a total of \$845,850 FED to expand diabetes self-management programs. Second, WIHA was awarded a falls prevention grant, which provided a total of \$467,800 FED. As expansion grants, these projects contribute to long-term goals of bringing availability of the Healthy Living with Diabetes and Stepping On Falls Prevention programs to scale.

7. The Healthy Living with Diabetes program is intended to target individuals who have prediabetes or are at risk for developing type 2 diabetes. The program focuses on healthy eating, increasing physical activity, and weight loss. Participants attend 16 one-hour core classes during a six-month period and then another six one-hour post-core classes over the next six-month period.

8. The Stepping On program is an evidence-based falls prevention program targeting adults over age 60 who live in home and community based settings, and do not rely on a walker or wheelchair

while inside. The program is offered once a week in two hour sessions for seven weeks in small group settings in the community. The program focuses on strength and balance exercises, medication and vision review, and home modifications. After the seven weeks, follow-up is provided with a phone call or home visit as well as a booster session.

9. In 2016 and 2017, WIHA hosted 194 Healthy Living with Diabetes workshops in 46 counties and tribal communities, reaching 1,923 participants. During that same time, WIHA hosted 384 Stepping On workshops in 61 counties and tribal communities, reaching 4,384 participants. WIHA reports that Stepping On participants who completed the program had a 31% reduction in falls.

10. In addition, WIHA used approximately \$100,000 of the federal grant funding to support falls prevention mini-grants and another \$100,000 to fund chronic disease mini-grants. 40 organizations serving 36 different counties and two tribes received mini-grants during the three-year grant period. Grant recipients included: county aging units, Aging and Disability Resource Centers (ADRCs), county public health departments, YMCAs, federally qualified health centers, senior centers, independent living centers, and other community-based organizations.

11. However, the federal grants from the Administration for Community Living are program-specific, and therefore do not support the development of other health promotion program areas. Additionally, both grants are scheduled to end in July, 2020.

12. WIHA indicates that the funding provided in the Governor's budget would allow the agency to: continue expanding the Stepping On and Healthy Living with Diabetes programs; implement new programs focusing on physical activity for older sedentary adults, incontinence in older women, and pain self-management; expand culturally competent services and translate additional programs in to Spanish; and expand services to other underserved communities such as older adults with disabilities.

13. Additionally, WIHA would continue providing mini-grants to other organizations and also support a program through the YMCA Alliance of Wisconsin to develop and bring to scale a program called Tai Chi: Moving for Better Balance. This program is an evidence-based falls prevention program that aims to improve strength, balance, mobility and daily functioning, and prevent falls in older adults and individuals with balance disorders. The program is delivered in two one-hour sessions each week for 24 weeks. Each session consists of warm-up exercises; core practices, which include a mix of practice of forms, variations of forms, and mini-therapeutic movements; and brief cool-down exercises.

14. According to the administration, the \$250,000 annual grant amount included in the Governor's budget is based on funding that was provided in the 2015-17 biennium (\$200,000 per year), and increased to account for growth trends in the aging adult population.

15. If the Committee wishes to provide ongoing state support for healthy aging activities, it could approve the Governor's recommendation [Alternative 1]. Alternatively, if the Committee is convinced of the improved outcomes for participants in the WIHA healthy aging programs, it could choose to double the amount of funding in the bill, so that \$500,000 GPR would be budgeted annually for the program [Alternative 2].

16. On the other hand, the Committee could provide funding for the grant at the same level as provided in Act 55 (\$200,000 per year) by decreasing funding in the bill by \$50,000 GPR annually [Alternative 3]. Finally, the Committee may determine that, in light of other GPR funding priorities, the state should not commit GPR for the program, and delete the provision [Alternative 4].

ALTERNATIVES

1. Approve the Governor's recommendation.

ALT 1	Change to	
	Base	Bill
GPR	\$500,000	\$0

2. Increase funding in the bill by \$250,000 annually so that \$500,000 GPR would be budgeted annually for the program.

ALT 2	Change to	
	Base	Bill
GPR	\$1,000,000	\$500,000

3. Reduce funding in the bill by \$50,000 annually so that \$200,000 GPR would be budgeted annually for the program.

ALT 3	Change to	
	Base	Bill
GPR	\$400,000	- \$100,000

4. Take no action.

ALT 4	Change to	
	Base	Bill
GPR	\$0	- \$500,000

Prepared by: Alexandra Bentzen