

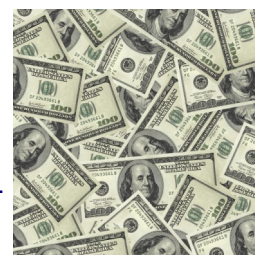
Calculating The Cost of Falls



There are many types of costs associated with falls some financial others human. The amount of human suffering associated with falling accidents is staggering and by 2020, medical costs from hip fractures alone—resulting from falling accidents—are expected to cost the healthcare system between 30 and 50 billion dollars annually.

Direct Financial Costs:

Direct costs include out-of-pocket expenses and charges paid by insurance companies for the treatment of fall-related injuries. These include costs and fees associated with hospital and nursing home care, physician and other professional services, rehabilitation, community-based services, the use of medical equipment, prescription drugs, local rehabilitation, home modifications, and insurance administration.



A recent study of people aged 72 and older found that the average health care cost of a fall injury was \$19,440 (including hospital, nursing home, emergency room, and home health care, but not physician services).



In 1999, there were more than 320,000 hospitalizations in the U.S. for fall related hip fractures. The total cost in medical bills and lost income resulting from fall related hip fractures alone is more than \$12.6 billion a year or an average of \$37,000 per hip fracture. Healthcare costs specifically associated with fall related hip fractures are drastically increasing. Due to the aging U.S. population, the number of hip fractures will reach about 650,000 by 2050.

Costs to Society:

The total cost of all fall injuries for people age 65 or older in 1999 was \$28.2 billion. By 2020, the cost of fall injuries is expected to reach \$32.4 billion (before adjusting for inflation). The estimated total cost for non-fatal traumatic brain injury-related hospitalizations for falls in individuals who are 65 years of age or older is more than \$3,250,000,000 annually. Two-thirds of these costs occurred among individual who were 75 years of age or older.



According to a Report to the United States Senate in 2003, the costs to the Medicare and Medicaid programs and society as a whole from falls by elderly persons continue to climb much faster than inflation and population growth. Direct costs alone will exceed \$32,000,000,000 in 2020.

Direct costs and costs to society do not account for the long-term consequences of these injuries, such as permanent disability, decreased productivity, or reduced quality of life or even premature death.

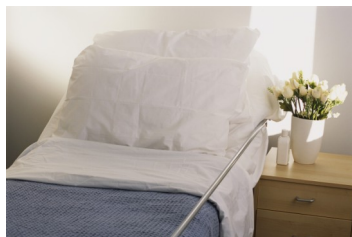
The Ultimate Costs To Seniors

Loss of Independence

Each year close to one third of senior citizens fall and of that number two-thirds will fall again within six months. It is those repeat falls that cause the greatest injury, health destabilization and loss of independence. For elderly people who live alone, becoming incapacitated and unable to get help is a common event, which usually marks the end of their ability to live independently.



Falls among seniors cause premature institutionalization. In a recent survey of Nursing Home Residents, 33% gained admission into the nursing home directly from home and 58% of nursing home admissions came from hospitals. Of the admissions from home 78% reported a recent fall as the reason for their decline and subsequent admission. **Of the 58% of nursing home admissions directly from hospitals 34% were treated at the hospital for a fall related hip fracture.**



According to the American Academy of Orthopedic Surgeons about 50% of older adults hospitalized with a hip fracture are unable to return home or live independently again. Loss of independence, the ability to live on their own as one wishes in the lifestyle that they are used leads to diminished health, increased depression and anxiety and increased likelihood of premature death.

After a Hip Fracture:

- 25% Make a full Recovery (only).**
- 40% will be admitted to a long-term care facility.**
- 50% will require assistance with mobility.**
- 25% will die within 1 year of the fall.**

ResponseLink offers information for general educational and informational purposes only. This information is not intended as a substitute for advice, treatment, or recommendation from health care professionals. The information is not exhaustive and does not cover all fall related ailments, physical conditions, or their treatment. It is important to follow the advice of your doctor and other health care professionals regarding your individual health care needs.

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