

# Key Issues for Wisconsin Aging Advocates

## 2025-2027 State Budget

The Wisconsin 2025-2027 Biennial Budget will significantly impact older adults and family caregivers. The Wisconsin Aging Advocacy Network (WAAN) advocates for the following key investments which support older adults to improve their health and well-being, live with maximum independence and dignity, and reduce health and long-term care costs.

### Our Requests:

**1. Aging & Disability Resource Centers (ADRCs) - Increase funding to ADRCs by \$19.9 million in the 2025-27 biennial state budget to address funding inequities between ADRCs and increasing service needs resulting from a growing aging population.**

Wisconsin's statewide network of ADRCs provides information about critical, cost-saving services and programs related to aging or living with a disability. A robust and well-funded ADRC network will help Wisconsin residents navigate their unique challenges with confidence and dignity. Increased funding will enable every ADRC to offer reliable and comprehensive support, allowing individuals to age in place, delay entry into long-term care and improve their overall quality of life.



ADRCs serve the fastest growing demographic of our state's population. Nearly one-quarter of Wisconsin's population is aged 60 or older. ADRCs have over 500,000 contacts each year with individuals, families, and professionals seeking guidance and support. A person interacts with an ADRC in Wisconsin every 60 seconds. By reducing hospital readmissions and emergency department visits, ADRCs save individuals, families and taxpayers \$3.88 for every \$1 invested in Wisconsin's ADRCs

**2. Direct Care Workforce Supports – To support the training, recruitment and retention of direct care professionals (DCP) – a) Increase the Medicaid Personal Care rate, b) Create and fund a state certification process for in-home caregiver training, c) Support higher Medicaid rates for home and community-based services (HCBS), and d) Create an earned income disregard program for DCPs applying for public benefits.**

Direct care professionals (DCPs) provide essential assistance – dressing, bathing, eating, meal preparation, housekeeping, basic medical tasks - to older people and people living with disabilities. Low wages, limited benefits, low insurance reimbursement rates, and the high-cost childcare, transportation, and housing are making it difficult for agencies to recruit and retain DCPs. Unfilled positions are causing agencies to turn away customers in need of service.

The direct care workforce shortage results in a lack of essential services, increased pressure on family caregivers, challenges for long-term care providers, and puts many older people and people with disabilities at risk of hospitalization and more expensive residential care.

## Key Issues for Wisconsin Aging Advocates

**3. Safeguard Meals on Wheels/Home-Delivered Meals – To meet the need across Wisconsin, an increase of \$12.6/million in each year of the budget is needed. Home-delivered meals (HDMs), often referred to as Meals on Wheels (MOWs), are an economical and proven way to support Wisconsinites as we age.**

Home-delivered meals (HDMs) are more than food, they are vital services that sustain lives and independence by providing nutritious foods, safety checks, socialization, and connections to services. HDMs address isolation, hunger, and malnutrition among older people. A 2023 survey revealed for nearly 70% of the 34,000 people served, this meal was their main source of food and nutrition each day.

Wisconsin's home-delivered meal programs are challenged by unprecedented levels of need, increased expenses driven by inflation and a lack of resources, federal funding cuts, and the expiration of COVID funding and flexibilities. One year of HDM and the services that accompany the meals roughly equate to the same cost of one day in the hospital or 10 days in a nursing home. This funding increase would enable Wisconsin's Older Americans Act (OAA) HDM programs to meet the need in their communities and avoid or eliminate the need to establish waiting lists for the program, restrict or limit services in part of their service area, or have areas without service at all.



**4. Reducing Falls Among Older Adults - To reduce the high rate of deadly fall among older adults, we request a \$450,000 annual state budget appropriation to support the Falls Free Wisconsin Center.**

Nationally, more than one in four older adults experience a fall each year, but Wisconsin has the nation's highest rate of deadly falls among older adults. From 2021-2023, there were 5,287 deaths due to falls among Wisconsin's 65+ population. 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. An estimated \$1 billion is spent annually on falls-related health costs in Wisconsin which includes Medicare, Medicaid, and out-of-pocket expenses. In 2022, emergency medical services (EMS) in Wisconsin responded to over 130,000 falls. Falls related calls have major implications for EMS availability, as it can decrease their availability to respond to more urgent needs and have financial consequences on communities.



Support for the Falls Free Wisconsin Center, a falls prevention center of excellence, would help to raise awareness of the incidence and cost of older adult falls; help older adults, their families and caregivers identify and reduce falls risk; reduce the burden of falls and provide resources to emergency services and healthy systems, and deliver evidence-based prevention education and interventions across the state.

# Invest in Aging and Disability Resource Centers

**Aging and Disability Resource Centers (ADRCs) are a cornerstone of Wisconsin's support system for older adults, adults living with a disability, and their caregivers**

Wisconsin's statewide network of ADRCs provide information about critical, cost-saving services and programs related to aging or living with a disability. They serve individuals, family members, friends and professionals working with related issues. The state's 54 ADRCs and 10 tribal Aging and Disability Resource Specialists (ADRSs) serve the fastest growing demographic of our state's population.<sup>1</sup>

A robust and well-funded ADRC network will help Wisconsin residents navigate their unique challenges with confidence and dignity.

According to the Wisconsin Department of Health Services, nearly one-quarter of the population of Wisconsin is aged 60 or older. As these numbers increase, the contributions of ADRCs to their communities will positively affect the quality of life for even more community members.

## **Increasing funding to ADRCs will deliver substantial benefits to constituents and taxpayers**

The current funding inequities lead to inconsistent service delivery and limit the ability of some ADRCs to provide essential, contractually required services.

An investment of \$19.9 million will enable every ADRC to offer reliable and comprehensive support, allowing individuals to age in place, delay entry to long-term care and improve their overall quality of life.

**Investing in ADRCs yields a remarkable return on investment. In 2023, for every dollar invested in ADRC services, taxpayers saved \$3.88, demonstrating a total return on investment of 388%.<sup>2,3,4</sup>**

To ensure that ADRCs can continue to provide high-quality, unbiased services, **we need support** for increased funding. Together, we can strengthen our commitment to the well-being of all Wisconsin citizens.

## **Impact of ADRCs**

In 2023, ADRCs facilitated over 536,627 contacts with individuals, families, and professionals seeking guidance and support.<sup>5</sup> Despite this significant reach, current funding levels are inadequate to sustain operations and meet the rising demand for services.

The existing funding formula does not adequately account for the changing demographics and increasing operational costs faced by ADRCs.<sup>6</sup>

**WAAN's position:** Increase funding for Aging and Disability Resource Centers (ADRCs) by \$19.9 million in the 2025-2027 biennial state budget to continue to address the funding inequities between ADRCs and begin to address the population growth in Wisconsin.

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*The mission of ADRCs and Tribal ADRSs is to provide older adults and people with physical and intellectual disabilities the resources needed to live with dignity and security and achieve maximum independence and quality of life.*

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## *Invest in Aging and Disability Resource Centers*

Over the past 12 years, the baseline funding for ADRC services has been increased only once—by \$5.1 million in the 2023-2025 biennial budget. While this increase provided some relief, it falls short of addressing the ongoing challenges posed by an underfunded system.

Providing the funding needed to support ADRCs is an investment that benefits all of Wisconsin, one community member at a time.

**Sources:**

**Recommended reading:**

1. The Impact of ADRC and Tribal Programs in Wisconsin Status Report, 2023

This report summarizes ADRC and Tribal program services and uses a variety of data and customer stories to outline the impact that ADRCs and Tribal ADRCs made in Wisconsin in 2023.

<https://www.dhs.wisconsin.gov/publications/p00251.pdf>

**2. Additional sources available online:**

<https://gwaar.org/api/cms/viewfile/id/2008440>





# In-Home Direct Care Workforce Support

## Support Aging in Place, Preserve Independence, and Save Money

As we age, it's no surprise that a growing number of us want to remain in our homes. The research supports this trend by demonstrating that aging in place can promote higher quality of life and self-esteem.<sup>1</sup> Direct care workers, also known as Direct Care Professionals (DCPs), are entry-level healthcare workers who provide essential support to older adults and people with disabilities. They assist with daily living tasks like dressing, bathing, and eating, and may also help with meal preparation, housekeeping, and errands. Some are trained to perform basic medical tasks under supervision.<sup>2</sup>

Wisconsin has over 100,000 DCPs, including an estimated 76,000+ home health and personal care aides and nearly 27,000 certified nurse aides.<sup>3</sup>

The direct care workforce shortage is a serious problem that negatively impacts adult adults and individuals with disabilities, as well as their families and the healthcare system. It leads to a lack of essential services, increased pressure on family caregivers, and challenges for long-term care providers.<sup>4</sup>

The number of people living at home who are older and/or disabled is increasing, yet many lack the services they need to do so safely.

Family members have been stepping up to fill the care gaps left by unfilled shifts and waiting lists for services, but caregiver exhaustion and a lack of family members and other supporters to fill all the gaps and meet all the care needs is putting many older adults and people with disabilities at risk of hospitalization and more expensive residential care.

The direct care workforce provides in-home care for thousands of older adults and people with disabilities, including daily support to nearly 57,000 Family Care<sup>5</sup> and nearly 27,000 IRIS (Include, Respect, I Self-direct) participants.<sup>6</sup> In 2025, the Wisconsin Personal Services Association (WPSA) surveyed personal care agencies in Wisconsin.

**Of the 70 responding agencies, 75% have at least one open caregiver position each week and over 25% have 5 or more open caregiver positions each week.** This lack of available workers is creating alarming access issues for older people and people living with disabilities. The WPSA survey indicates 87% of responding agencies turned away a client in the past year due to a lack of workers and 41% turn away 5 or more people in need of care each month.<sup>4</sup>

**WAAN's position:** To support the training, recruitment and retention of direct care professionals (DCPs):

1. Increase the Medicaid Personal Care (MAPC) rate (currently set at \$24.52/hour) to cover the actual cost of providing care (\$36.52/hour).
2. Create a state certification process for in-home caregiver training to better meet the needs of the variety of caregiving roles in the long-term care system and provide funding to support training of in-home care workers;
3. Support higher Medicaid rates for home and community-based services (HCBS) by providing continued funding to support the minimum fee schedule for adult HCBS services and increase the rates to provide a wage increase to \$17.25/hr.; and
4. Create an earned income disregard program to address the fiscal cliff for direct care professionals when applying for public benefits.

## ***In-Home Direct Care Workforce Support***

**DCPs are challenged by low wages; limited benefits; low insurance reimbursement rates; and the high cost of childcare, transportation, and housing.**

DCPs play a critical role in preventing initial and rehospitalizations, managing ongoing or recurring health conditions, and making it possible to promptly discharge people from the hospital to their home or rehabilitation setting.

In-home care provider agencies report their workers who rely on public benefits for healthcare, food and/or childcare may turn down extra work hours in order to comply with the strict income eligibility thresholds.<sup>4</sup>

**The wages earned for additional hours worked are often significantly less than the value of lost benefits;** leaving them unable to afford insurance, groceries, and childcare. Modifications should be made to programs like BadgerCare, FoodShare, and Wisconsin Shares to allow workers to phase off public benefits.

**Sources for this issue brief can be viewed at:** <https://gwaar.org/api/cms/viewfile/id/2008154>

**Find this and other WAAN issue briefs at:** <https://gwaar.org/issues-and-initiatives>



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*The lack of long-term care workers providing home and community-based services leaves older adults and people with disabilities stuck in hospitals and nursing homes long after they are ready to return home.*

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# Safeguard Meals on Wheels

## Older Wisconsinites need your help.

Wisconsin is home to over 1.5 million older adults (ages 60+).<sup>1</sup> This equates to one of every four Wisconsin residents! The Older Americans Act (OAA) home-delivered meal (HDM) program is a proven, effective way to support Wisconsinites as we age, as well as offer support to our family caregivers.

HDMs, often referred to as **Meals on Wheels**, are more than food – they are a vital service that sustains lives and independence by providing nutritious food, safety checks, socialization, and connections to services. A 2023 survey revealed for nearly 70% of the 34,000 people served, this meal was their main source of food and nutrition each day.<sup>3</sup>

The program is **challenged** by:

**Unprecedented Levels of Need:** HDM program participation increased by 11% from 2019-2024. While the number of meals served increased by 17% during this same time.<sup>5</sup>

**Expiration of Covid-19 Support (both funding and flexibilities):** Wisconsin's HDM program lost roughly \$10.5 million of Covid-19 relief, accounting for over 27% of total HDM expenditures in 2023.

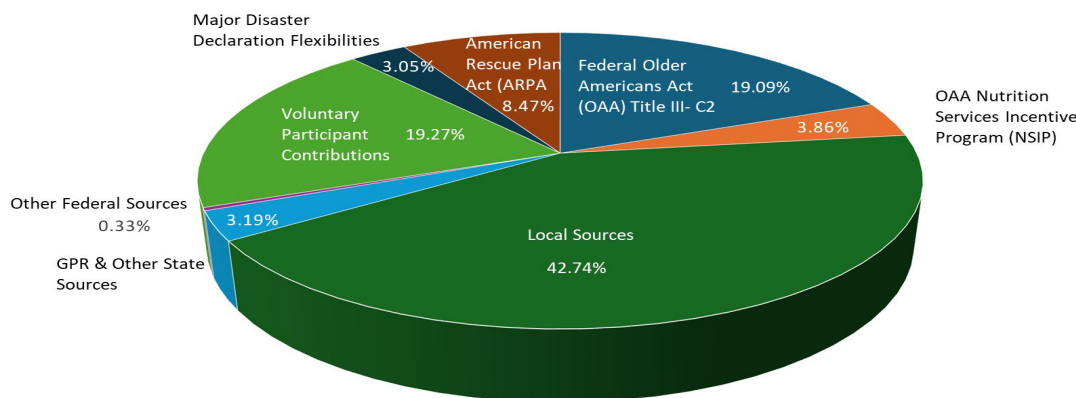
**Federal Funding Cuts:** The OAA Nutrition Program sustained **an overall federal cut of \$8 million in 2024**. Local funding (nearly 43% of the total funding in 2024) is also at risk.<sup>6</sup>

**WAAN's position:** Older Americans Act Home-Delivered Meals (HDM) are an economical and proven means to address isolation, hunger, and malnutrition among older people.

**An increase of \$12.6 million in each year of the budget** (from the current funding level of \$868,794<sup>2</sup> to \$13.5 million annually) **is needed to meet the need across the state.**

- ◊ More than 75% of participants are age 75 +,
- ◊ 1 of every 2 lives alone, increasing their risk of isolation and food insecurity,
- ◊ Over half face high nutritional risk, putting their health in jeopardy, and
- ◊ More than 1 in 4 struggles to make ends meet, living with incomes below the federal poverty level.<sup>4</sup>

FFY 2024 Home Delivered Meal Expenditures



# Safeguard Meals on Wheels

**Increased Expenses Driven by Inflation and a Lack of Resources:** The average cost to provide a meal statewide in 2023 is approximately \$12.88/meal, an 18% increase over 2018 costs.<sup>6</sup> For many counties demand for HDMs exceeds their capacity.

Most of us plan to remain living in our homes as we age. HDM services help to make our plans a reality. The services and resources received from the program play a crucial role in enabling people to live more nourished and independent lives in their homes as they age, avoiding costly long-term care (LTC) institutions or worsened health outcomes.

To ensure the most appropriate services are offered to each person, in 2024 some counties began implementing a meal prioritization process. This process is not limited to existing participants; new participants are being prioritized as well, since we don't have sufficient funding to bring on everyone who needs services. Nineteen counties indicated the meal prioritization process is necessary due to a lack of funding, insufficient numbers of volunteers or staff, and/or increased food and supply costs.

**Seven counties currently have a waitlist for meals, while several others anticipate needing to start a waitlist soon.<sup>8</sup>**

*One year of home-delivered meals and the services that accompany it roughly equate to the same cost of one day in the hospital or 10 days in the nursing home.<sup>7</sup>*

## Participant quotes:

*"This is the only meal I get daily since FoodShare only gives me \$13 a month."*

*"I can't cook anymore. Had a stroke and I get confused when cooking."*

*"The driver reminds me to eat & brightens my low days."*

*"The program helped me keep my husband out of the nursing home for all but one year of his life."*



The ability to access crucial HDM services in a timely and consistent manner is key to the program's successful intervention to support the health and independence of older adults. Yet, reaching all older Wisconsinites who need meals remains constrained by funding and capacity limitations.

**We urge you to prioritize funding and support for the OAA Home Delivered Meals Program. Join us in safeguarding the well-being and dignity of older Wisconsinites by ensuring they have continued access to this essential program!**

**HELP US END THE WAIT. FUND AND SUPPORT MEALS ON WHEELS.**

**Sources for this issue brief can be viewed at:** <https://gwaar.org/api/cms/viewFile/id/2008497>

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# Reducing Falls Among Older Adults in Wisconsin

## *Saving Lives, Preserving Independence, Reducing Costs*

### **The Scope and Cost of Older Adult Falls:**

Scope: Nationally, more than one in four older adults experiences a fall each year, but Wisconsin has the nation's highest rate of deadly falls among older adults.<sup>1</sup> Many assume Wisconsin's high death rate is due to the state's cold climate, but the majority of older adult falls occur in the home, and some states with similar climates have lower rates.<sup>1</sup> From 2021-2023, there were 5,287 deaths due to falls among the 65+ population in Wisconsin – nearly triple the number of people of all ages who died in motor vehicle accidents in the same period.<sup>2</sup> The age-adjusted falls death rate rose 19% over that time period, while the nationwide rate increased by 11%.<sup>2</sup> With the state's population aging, the problem is expected to grow.

**An estimated \$1 billion is spent annually on falls-related health costs in Wisconsin which includes Medicare, Medicaid, and out-of-pocket expenses.<sup>3</sup>**

**Health impact and cost:** Falls are a common cause of injury and disability. In 2019, 83% of hip fracture deaths and 88% of emergency department visits and hospitalizations for hip fractures in older adults – a common cause of both long-term nursing home admissions and rehabilitation stays – were caused by falls.<sup>1</sup> In Wisconsin, the median monthly cost for a semi-private room in a nursing home \$10,068.<sup>4</sup> Likewise, falls and their related injuries have a significant physical and financial impact on family caregivers. An AARP study revealed that family caregivers spend an average of \$7,242 annually on out-of-pocket costs related to caregiving.<sup>5</sup>

**Strain on emergency services and health care:** Fall-related calls have major implications for emergency medical services (EMS) availability as it can decrease the availability of EMS to respond to more urgent needs and have financial consequences to communities. In 2022, EMS in Wisconsin responded to over 130,000 falls, and the number of falls that EMS responds to are increasing by nearly 10,000 a year statewide. In the same year, falls made up 185 of 911-related ambulance runs.<sup>6</sup>

Many lift-assist calls are followed up by EMS responding to the same address for repeat lift-assists or emergencies. These repeat calls also strain EMS and healthcare resources and show that the individuals making the call don't have the adequate prevention resources.<sup>6</sup>

**WAAN's position:** To reduce the high rate of deadly falls among older adults in Wisconsin, **we request a \$450,000 annual state budget appropriation to support the Falls Free Wisconsin Center** – a falls prevention center of excellence that

1. raises awareness of the incidence and cost of older adult falls,
2. helps older adults, their families and caregivers identify and reduce falls risk due to the multiple causes of falls,
3. reduces the burden of falls and provides resources to emergency services and health systems, and
4. delivers evidence-based prevention education and interventions across the state.

# Reducing Falls Among Older Adults in Wisconsin

## Reducing Falls in Wisconsin:

The good news is we know how to reduce falls in Wisconsin. Wisconsin's Department of Health Services (DHS) in partnership with the non-profit Wisconsin Institute for Healthy Aging (WIHA) is poised to address the falls epidemic with the Falls Free® Wisconsin initiative – a statewide effort launched in 2023 to reduce falls in Wisconsin by creating a one-stop-shop for consumers, their families, and caregivers and the professionals who support them.

The initiative engages in the following:

- **Raising Awareness:** Quarterly public education campaigns to help older adults, their families, and caregivers better understand the risk of falls and how they can prevent them;
- Develop and maintain the **infrastructure to support implementation** of evidence-based falls-prevention programs and initiatives throughout the state;
- **Identifying people at high falls risk:** We work to encourage clinical and falls risk self-assessments and provide resources for both clinical and community-based interventions;
- Support local falls-prevention coalitions and initiatives;
- Develop and maintain an online hub of **falls-prevention information and resources** for consumers and community organizations (FallsFreeWI.org);
- **Share data:** We collect and analyze data to support partners and the public with accurate information about the scope and impact of falls and effective intervention strategies.
- **Increase Accessibility of Evidence-Based Falls Prevention interventions:** WIHA's evidence-based Stepping On program has been researched and proven to reduce falls by 31%.<sup>7</sup>
- We support Aging & Disability Resource Centers (ADRCs), county and tribal aging units, public health, and other local partners to develop and train program leaders and recruit participants.

In addition to Stepping On, WIHA is a clearinghouse for other evidence-based programs and practices related to chronic disease, pain, incontinence, diabetes, and other physical conditions that increase the risk of falls.

WIHA partners with Wisconsin's Aging and Disability Network, health care systems and the University of Wisconsin School of Medicine and Public Health to train local agencies statewide to reduce fall-related injuries and deaths. However, **WIHA's local partners cannot deliver proven cost-effective programs without statewide coordination and support.**

Although these proven falls prevention programs save lives and reduce long-term care costs, they are cost-prohibitive for individual county or tribal Aging & Disability Resource Centers (ADRCs), Aging Units, or health care systems to implement without financial support. Local coalitions are working across Wisconsin to pull together resources and strategies to reduce falls in their communities, but they cannot succeed with their work in isolation.

**Sources for this issue brief can be viewed at:** <https://gwaar.org/api/cms/viewfile/id/2008534>

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# Tips for Visiting Your Legislators

## What to do before the visit

- Look at the legislative folder(s) to verify the time and location of your legislative visits at the State Capitol.  
Time and location: \_\_\_\_\_
- Use the morning Assembly and Senate district meetings to introduce yourself to other advocates in your group and determine who will cover each portion of the legislative visit – introduction, WAAN positions/requests, personal story, additional information/follow-up (if needed), and thank you. (Note: some legislative visits may have only one advocate while others will have a large group of advocates involved).
- Identify and list the names of other advocates joining your meeting and which topic(s) you would like to discuss:

Name: _____	Topic(s) _____
_____	_____
_____	_____
_____	_____

\_\_\_\_\_ will bring the legislative leave-behind folder.

\_\_\_\_\_ will kick off the meeting and coordinate introductions.

No matter how much (or how little) time you have for your visit, remember to include the ***four essential components***:

1. **Who are you?**
2. **What is your issue?**
3. **Why is your issue important?**
4. **What do you want the elected official to do about it?**

# Tips for Visiting Your Legislators

## What to do during your visit

- Be on time and polite.
- Introduce yourself (identify yourself as a constituent).
- Thank the legislator and/or staff member for the meeting.
- Address your legislator with the proper title – Representative (Last name) or Senator (Last name).
- Stay focused.
- Present the WAAN legislative packet. Highlight the WAAN positions/requests.
- Share a personal story related to one of the WAAN priorities.
- Ask if there is any additional information or materials they require.
- Honor the time limit.

## What to do after your visit

- Complete WAAN's Legislative Feedback form and drop it in the box in the North Hearing Room.
- Notify WAAN of any immediate follow-up information requested during your meeting.
- Send a brief thank-you note as soon after your visit as possible. Remind your legislator of your concerns and mention that you look forward to seeing them act on the requests.
- Keep up the relationship! Keep track of your legislator's actions on your issues. When they sponsor a piece of legislation you agree with, send a thank you email. If you don't see them acting on the issues you discussed during your meeting, make a follow-up call or write a note reminding them of the importance.

## Action and follow-up items:

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# Keep the Momentum Going

## Keep sharing your story and advocacy activity

Your voice matters! The more people who participate advocacy activities, the more legislators will hear about the issues important to aging advocates and older adults.

Advocacy doesn't stop with a single conversation or event. Your ongoing engagement keeps these issues at the forefront for policymakers and the public.

Here are ways you can stay involved:

- **Connect with lawmakers:** Send an email, make a call, or tag them in a social media post to remind them why these issues matter.
- **Raise awareness:** Write a letter to the editor of your local newspaper, sharing your story and why funding and resources are critical. Submit an article to local newsletters.
- **Engage in advocacy events:** Attend meetings, rallies, or public forums to amplify our shared message. Many of our sponsors have additional events and advocacy opportunities.
- **Use social media platforms** to stay in touch and connect with other local advocates

## Follow us on social media and visit our website

**WAAN main page:** <https://gwaar.org/waan>

**WAAN issue briefs:** <https://gwaar.org/issues-and-initiatives>

**WAAN on Facebook:** <https://www.facebook.com/WAAN.ACTION>  
Find out what's happening with WAAN and other organizations.



# Keep the Momentum Going

## Help support future WAAN advocacy activities and events

The Wisconsin Aging Advocacy Network (WAAN) is a collaboration of organizations and individuals working with and for Wisconsin's older adults to shape public policy and improve the quality of life for older people. WAAN advocates for all older adults by educating the community and policy makers on issues impacting older adults; mobilizing people on priority issues; and advocating for change.

The Greater Wisconsin Agency on Aging Resources, Inc. (GWAAR) is the fiscal administrator for WAAN. GWAAR is a 501c3 non-profit, so any financial contributions to GWAAR on behalf of WAAN, are tax deductible. Financial donations are graciously accepted to support WAAN activities and events, such as Aging Advocacy Day, local and statewide training, and advocacy action alert distribution.

Donations made payable to GWAAR, to support WAAN, can be sent to:

GWAAR, Attn: Fiscal Staff  
1414 MacArthur Road, Suite A  
Madison, WI 53714

*\*Please put "WAAN" in the memo portion of your check.*



Learn more at  
[gwaar.org/waan](http://gwaar.org/waan)

