



How to prevent slips, trips and falls



6 steps you can take to lower your risk of falling

Don't trip up your chance for a healthier, more independent life



Have you ever taken a tumble? You're not alone. Every second of every day, somebody over the age of 65 falls to the ground.* Most of the time, they get back up, dust themselves off and keep going.

Sometimes, though, falls can lead to serious injury or even death. One of every five falls results in an injury, such as a broken bone or head injury. Each year, more than 300,000 older adults take a spill that ends with a broken hip.* Ouch!

"Falls can leave you feeling isolated from the friends and social activities you enjoy," says Elizabeth Phelan, MD, founding director of the Fall Prevention Clinic at Harborview Medical Center in Seattle. "A fall can rob you of your independence."

But falls don't have to happen. "There are a number of action steps you can take to avoid falls," says Dr. Phelan. Try these six tips to lower your risk of falling.

1

Talk to your doctor about your risks

Your chances of falling go way up if you've fallen in the past year, if you use a cane or if you often feel sad or depressed. Your doctor can share ways to lower these and other risks.

2

Get your eyes checked yearly

For older adults, poor vision doubles the risk of falling.* "Anything that interferes with your eyesight can be dangerous," says Dr. Phelan. "Even wearing the wrong eyeglass prescription."

Call your doctor if you notice vision changes. You may need cataract surgery or treatment for age-related macular degeneration.

* FOR ADULT FALL STATISTICS SOURCE: Centers for Disease Control and Prevention. [About older adult fall prevention](#). May 16, 2024. Accessed August 5, 2024.

* FOR POOR VISION FALL RISK SOURCE: Centers for Disease Control. [About vision impairment and falls among older adults](#). May 15, 2024. Accessed on August 5, 2024.



3 Assess your gait

Your doctor can do this during your annual wellness visit. “I watch patients walk to make sure their gait — the way they walk — is steady and strong,” says Sterling Ransone, MD, president-elect of the American Academy of Family Physicians.

If your doctor is concerned, they may send you to physical therapy. They might ask you to exercise more, especially by walking and lifting weights. Exercise helps strengthen muscles and bones. It also reduces the fear of falling — and fear can actually lead to more falls.

Aetna Dual-Eligible Special Needs Plans (D-SNPs) include fall-prevention benefits.

4

Check your blood pressure

If your blood pressure is too low, there may not be enough blood getting to your brain, says Kathryn Boling, MD, a family physician at Mercy Medical Center in Baltimore. “When you stand up from sitting in a chair or get out of bed, you might feel dizzy. Do it very slowly.” Medications and habits like drinking plenty of water can help keep your blood pressure normal.

5

Review your medications

“Any medication that affects your central nervous system can make you more likely to fall,” says Dr. Phelan. The nervous system is responsible for balance and movement.

Prescriptions for pain, sleeping, anxiety or depression can be risky. So can some over-the-counter medications. Some allergy medicines can make you sleepy or dizzy. Your doctor can help you adjust your meds and avoid their side effects.

6

Pay attention to your hearing

Good hearing can help you tune in to obstacles you might trip over, like pets or small children. It also helps you keep your balance.

“One study showed that when people with hearing loss got hearing aids, their balance improved,” says Dr. Phelan.* Hearing loss is treatable, so schedule a hearing test if you’re due.

* FOR IMPROVED HEARING AND BALANCE SOURCE: Washington University. [Hearing aids may improve balance](#). December 11, 2014. Accessed on December 7, 2023.

Reduce fall risks in your home

A slip on a bathroom floor. A tumble down the stairs. A trip on a sharp corner. Falls can happen fast and without warning.

The good news: Small changes can make a big difference in ensuring a safe living space. Use this safety guide to injury-proof every room in your home.

Bedroom

- Secure or hide cords that could present a tripping hazard.
- Place reachable lamps and light switches near seating areas.
- Secure or remove loose rugs.

Bathroom

- Use nonslip bathmats.
- Install railings and grab bars.
- Buy a raised, padded toilet seat with handles.

Living room

- Brighten up low-lit areas with night-lights or floor lamps.
- Ensure armrests are sturdy enough to handle your weight as you stand.

Kitchen

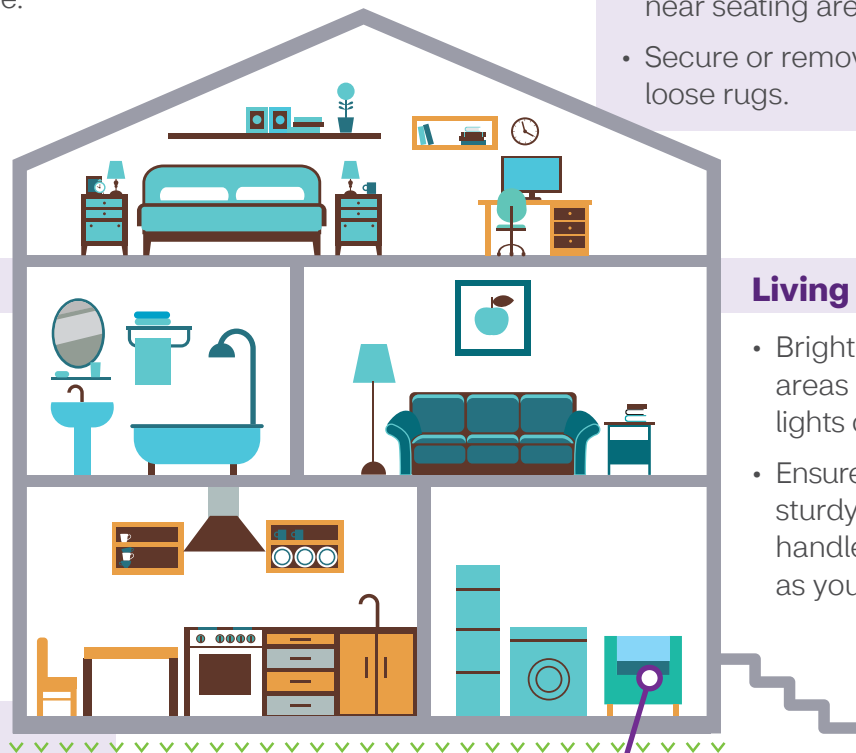
- Move the heaviest and most used kitchen items to the lowest shelves.
- Invest in a “grabber” device to extend your reach.
- If you use a stool, make sure it’s the heavy-duty kind with a strong center of gravity.
- Sit at a table to prep foods.

Brace yourself

Place “brace-able” objects, like a sturdy armchair, in all rooms. Dizziness upon standing is a leading cause of fainting.*

Outdoor walkways

- Put nonskid treads on steps.
- Install motion-sensitive lighting.
- Clear clutter from the ground and walkways.

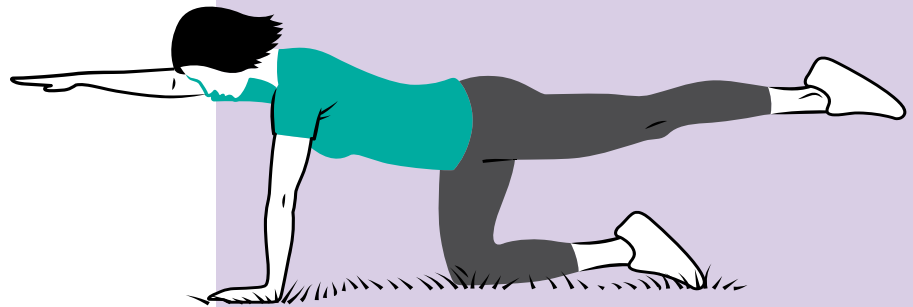


* FOR LEAD CAUSE OF FAINTING SOURCE:
Johns Hopkins Medicine. [Syncope \(fainting\)](#). Accessed December 7, 2023.

3 moves for better balance

“As we get older, our muscle density and elasticity diminish,” says Len Glassman, CPT, a master-level personal trainer in Garwood, New Jersey. That can affect balance and lead to a fall. But you can help prevent this by regularly performing exercises that can help you stay strong and nimble. To get started, try adding these moves to your routine.

1



Bird dog

Why it works: This exercise strengthens both your core and hip muscles. Those muscles are key for stability, says Ryan Glatt, MS, a certified personal trainer at the Pacific Neuroscience Institute in Santa Monica, California.

- 1.** Kneel on an exercise mat or carpet with your knees and feet hip-width apart and your hands on the floor. Your hands should be under your shoulders, fingers facing forward.
- 2.** Raise your right arm and left leg, keeping your shoulders and hips parallel to the floor. Tighten your stomach muscles so that your spine stays in a neutral position.
- 3.** Lower yourself back to your starting position, then repeat on the opposite side.

Get help paying for things to help you stay on your feet.

- Aetna D-SNP members get a fall prevention benefit amount (allowance) they can use to get items to help them move safely around their home.

- Aetna D-SNP members get an Extra Benefits Card with a monthly allowance they can use to help pay for certain everyday expenses like over-the-counter (OTC) products.

To learn more about Aetna D-SNPs, visit [AetnaMedicare.com/YourDSNP](https://www.aetna.com/YourDSNP)

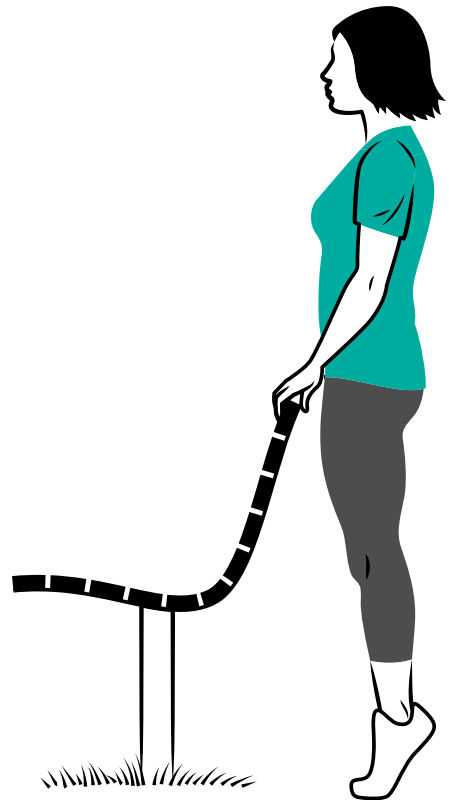


2 One-legged stand

Why it works: This move builds balance by strengthening your lower-body and core muscles.

1. Hold on to a kitchen counter or the back of a chair. If you can balance for 60 seconds on each leg, move on to the next step. If you can't, continue to practice until you can.
2. Stand on one leg and fold your arms across your chest for as long as you can. It's a good idea to start with 10 seconds, then add 10 seconds at a time until you reach 60 seconds.
3. Stand on one leg and hold your arms out to the sides. Work your way up to 60 seconds on each leg.
4. Stand on one leg and fold your arms across your chest with your eyes closed. Work up to 60 seconds.

3



Heel-to-toe raise

Why it works: You'll improve your dynamic balance, which is your balance while moving, with this exercise, says Glatt. It also strengthens your calf muscles, which help you stay upright. "It's a good idea to have a wall behind you in case you fall backwards," says Glatt.

1. Stand with your feet a few inches apart, your hands on a counter or chair in front of you.
2. Raise your heels off the floor, keeping your knees straight. Hold for about 6 seconds, then lower your heels back down to the floor. Repeat 8 to 12 times.



Power up your supper

There's no such thing as a "superfood." Everybody needs lots of different nutrients to stay healthy. But some foods are super important to keep your muscles and bones strong and help prevent falls. Try this simple, delicious recipe made with key ingredients to stay on your feet and on the go.

Easy dinner nachos

Tex-Mex just the way you like it — only better. Made with lean beef and refried beans, these nachos are a great source of leucine, which helps build and repair muscles. Bonus: They're topped with calcium-rich cheese. Calcium helps your bones stay healthy. The stronger your bones, the lower your risk of a break if you do fall.

SERVES: 8
PREP TIME: 20 minutes
TOTAL TIME: 55 minutes

- ½ onion, diced
- 1 lb. lean ground beef
- 1 clove garlic, minced
- 2 tsp. taco seasoning
- 2 (16 oz.) cans refried beans
- 1 (4.5 oz.) can chopped green chilies
- 1¼ cups shredded cheese, like a Mexican blend
- ¾ cup mild salsa
- 1 (13 oz.) bag tortilla chips

Heat oven to 350 degrees. In a medium skillet over medium heat, heat ⅓ cup water. Cook onion, stirring occasionally until it begins to soften, about 3 minutes. Add ground beef, garlic and taco seasoning, stirring to break up clumps of meat. Cook until meat is browned, about 5 minutes. Turn off heat and set aside.

Spread refried beans onto bottom of 9"x13" baking dish. Top with meat mixture. Sprinkle green chilies and cheese on top of meat mixture. Dot surface with salsa.

Bake until thoroughly warmed and cheese is melted, around 12 minutes. Serve family-style with chips and more salsa.

NUTRITION INFO PER SERVING:
462 calories, 21 g fat, 29 g protein,
40 g carbs, 783 mg sodium

If you qualify for both Medicare and Medicaid, you may be eligible for an Aetna® Dual Eligible Special Needs Plan (D-SNP).

If you're 65 or older and have diabetes or an eligible heart disease an eligible chronic condition, you may qualify for an Aetna® Chronic Condition Special Needs Plan (C-SNP). C-SNPs are currently available in select counties in IL and PA.

You may be eligible for an Institutional Special Needs Plan (I-SNP) if you've lived (or plan to live) in a participating facility for 90+ days or you have Medicare Part A (hospital insurance) and Part B (medical insurance).

Aetna Medicare is a HMO, PPO plan with a Medicare contract. Our DSNPs also have contracts with state Medicaid programs. Enrollment in our plans depends on contract renewal.

Plan features and availability may vary by service area.

Eligibility for the Model Benefit or Reward and Incentive (RI) Programs under the Value-Based Insurance Design (VBID) Model is not assured and will be determined by Aetna after enrollment, based on relevant criteria (e.g., clinical diagnoses, eligibility criteria, participation in a disease state management program).]

The benefits mentioned are part of special supplemental program for the chronically ill. Eligibility is determined by whether you have a chronic condition associated with this benefit. Standards may vary for each benefit. Conditions include Hypertension, Hyperlipidemia, Diabetes, Cardiovascular Disorders, Cancer. Other eligible conditions may apply. Contact us to confirm your eligibility for these benefits.

Participating health care providers are independent contractors and are neither agents nor employees of Aetna. The availability of any particular provider cannot be guaranteed, and provider network composition is subject to change.

For mail-order, you can get prescription drugs shipped to your home through the network mail-order delivery program. Typically, mail-order drugs arrive within 14 days. You can call the phone number on your member ID card if you do not receive your mail-order drugs within this timeframe. [Members may have the option to sign-up for automated mail-order delivery.]

To send a complaint to Aetna, call the plan or the number on your member ID card. To send a complaint to Medicare, call **1-800-MEDICARE** (TTY users should call **1-877-486-2048**), 24 hours a day/7 days a week. If your complaint involves a broker or agent, be sure to include the name of the person when filing your grievance.]

NONDISCRIMINATION NOTICE

Discrimination is against the law. *Aetna Medicare Preferred Plan (HMO D-SNP)* follows State and Federal civil rights laws. *Aetna Medicare Preferred Plan (HMO D-SNP)* does not unlawfully discriminate, exclude people, or treat them differently because of sex, race, color, religion, ancestry, national origin, ethnic group identification, age, mental disability, physical disability, medical condition, genetic information, marital status, gender, gender identity or sexual orientation.

Aetna Medicare Preferred Plan (HMO D-SNP) provides:

- Free aids and services to people with disabilities to help them communicate better, such as:
 - ✓ Qualified sign language interpreters
 - ✓ Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Free language services to people whose primary language is not English, such as:
 - ✓ Qualified interpreters
 - ✓ Information written in other languages

If you need these services, contact *Aetna Medicare Preferred Plan (HMO D-SNP)* between 8 AM and 8 PM 7 days a week by calling **1-866-409-1221**. If you cannot hear or speak well, please call **711**. Upon request, this document can be made available to you in braille, large print, audiocassette or electronic form. To obtain a copy in one of these alternative formats, please call or write to:

Aetna Medicare Preferred Plan (HMO D-SNP)
Aetna Medicare PO Box 7405 London, KY 40742
1-866-409-1221 [TTY/TDD 711 [California Relay 711]

HOW TO FILE A GRIEVANCE

If you believe that *Aetna Medicare Preferred Plan (HMO D-SNP)* has failed to provide these services or unlawfully discriminated in another way on the basis of sex, race, color, religion, ancestry, national origin, ethnic group identification, age, mental disability, physical disability, medical condition, genetic information, marital status, gender, gender identity or sexual orientation, you can file a grievance with *Aetna Medicare Grievances*. You can file a grievance by phone, in writing, in person, or electronically:

- By phone: Contact *Aetna Medicare Grievances* between 8 AM and 8 PM, 7 days a week, by calling 1-866-409-1221. Or, if you cannot hear or speak well, please call **[TTY/TDD 711]**.
- In writing: Fill out a complaint form or write a letter and send it to:
Aetna Medicare Grievances
PO Box 14834 Lexington, KY 40512
- In person: Visit your doctor's office or *Aetna Medicare Preferred Plan (HMO D-SNP)* and say you want to file a grievance.
- Electronically: Visit *Aetna Medicare Preferred Plan (HMO D-SNP)* website at AetnaMedicare.com

OFFICE OF CIVIL RIGHTS – CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES

You can also file a civil rights complaint with the California Department of Health Care Services, Office of Civil Rights by phone, in writing, or electronically:

- By phone: Call **916-440-7370**. If you cannot speak or hear well, please call **711** (Telecommunications Relay Service).
- In writing: Fill out a complaint form or send a letter to:
Deputy Director, Office of Civil Rights
Department of Health Care Services
Office of Civil Rights
P.O. Box 997413, MS 0009
Sacramento, CA 95899-7413

Complaint forms are available at http://www.dhcs.ca.gov/Pages/Language_Access.aspx.

- Electronically: Send an email to CivilRights@dhcs.ca.gov.

OFFICE OF CIVIL RIGHTS – U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

If you believe you have been discriminated against on the basis of race, color, national origin, age, disability or sex, you can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights by phone, in writing or electronically:

- By phone: Call **1-800-368-1019**.
If you cannot speak or hear well, please call **TTY/TDD 1-800-537-7697**.
- In writing: Fill out a complaint form or send a letter to:
U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

- Electronically: Visit the Office for Civil Rights Complaint Portal at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>.

If you speak a language other than English, free language assistance services are available. Visit our website or call the phone number listed in this document. (English)

Si habla un idioma que no sea inglés, se encuentran disponibles servicios gratuitos de asistencia de idiomas. Visite nuestro sitio web o llame al número de teléfono que figura en este documento. (Spanish)

如果您使用英文以外的語言，我們將提供免費的語言協助服務。請瀏覽我們的網站或撥打本文件中所列的電話號碼。(Traditional Chinese)

Nếu quý vị nói một ngôn ngữ khác với Tiếng Anh, chúng tôi có dịch vụ hỗ trợ ngôn ngữ miễn phí. Xin vào trang mạng của chúng tôi hoặc gọi số điện thoại ghi trong tài liệu này. (Vietnamese)

Kung hindi Ingles ang wikang inyong sinasalita, may maaari kayong kuning mga libreng serbisyo ng tulong sa wika. Bisitahin ang aming website o tawagan ang numero ng telepono na nakalista sa dokumentong ito. (Tagalog)

영어가 아닌 언어를 쓰시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 저희 웹사이트를 방문하시거나 본 문서에 기재된 전화번호로 연락해 주십시오. (Korean)

Եթե խոսում եք անգլերենից բացի մեկ այլ լեզվով, ապա Ձեզ համար հասանելի են լեզվակալան աջակցման անվճար ծառայություններ: Այցելեք մեր վեբ կայքը կամ զանգահարեք այս փաստաթղթում նշված հեռախոսահամարով: (Armenian)

اگر به زبان دیگری بجز انگلیسی گفتگو می کنید، کمک زبانی رایگان فراهم می باشد. به وبسایت ما مراجعه نمایید و یا به شماره تلفن که در سند ذیل لست شده، تماس بگیرید. (Farsi)

Если вы не владеете английским и говорите на другом языке, вам могут предоставить бесплатную языковую помощь. Посетите наш веб-сайт или позвоните по номеру, указанному в данном документе. (Russian)

英語をお話しにならない方は、無料の言語支援サービスを受けることができます。弊社のウェブサイトアクセスするか、または本書に記載の電話番号にお問い合わせください。(Japanese)

إذا كنت تتحدث لغة غير الإنجليزية، فإن خدمات المساعدة اللغوية المجانية متاحة. تفضل بزيارة موقعنا على الويب أو اتصل برقم الهاتف المدرج في هذا المستند. (Arabic)

ਜੇ ਤੁਸੀਂ ਅੰਗ੍ਰੇਜ਼ੀ ਤੋਂ ਇਲਾਵਾ ਕੋਈ ਹੋਰ ਭਾਸ਼ਾ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਮੁਫਤ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾਵਾਂ ਉਪਲਬਧ ਹਨ। ਸਾਡੀ ਵੈੱਬਸਾਈਟ 'ਤੇ ਜਾਓ ਜਾਂ ਇਸ ਦਸਤਾਵੇਜ਼ ਵਿਚ ਦਿੱਤੇ ਨੰਬਰ 'ਤੇ ਕਾਲ ਕਰੋ। (Punjabi)

បើលោកអ្នកនិយាយភាសាផ្សេងក្រៅពីភាសាអង់គ្លេស សេវាកម្មជំនួយផ្នែកភាសាមានផ្តល់ជូនដោយឥតគិតថ្លៃ។ សូមចូលមើលគេហទំព័ររបស់យើងខ្ញុំ ឬហៅទៅកាន់លេខទូរស័ព្ទដែលមានរាយនៅក្នុងឯកសារនេះ។ (Khmer)

Yog hais tias koj hais ib hom lus uas tsis yog lus Askiv, muaj cov kev pab cuam txhais lus dawb pub rau koj. Mus saib peb lub website los yog hu rau tus xov tooj sau teev tseg nyob rau hauv daim ntawv no. (Hmong)

अगर आप अंग्रेजी के अलावा कोई अन्य भाषा बोलते हैं, तो मुफ्त भाषा सहायता सेवाएं उपलब्ध हैं। हमारी वेबसाइट पर जाएं या इस दस्तावेज़ में दिए गए फोन नंबर पर कॉल करें। (Hindi)

หากคุณพูดภาษาอื่นนอกจากภาษาอังกฤษ สามารถขอรับบริการช่วยเหลือด้านภาษาได้ฟรี เข้าไปที่เว็บไซต์ของเรา หรือโทรติดต่อหมายเลขโทรศัพท์ที่แสดงไว้ในเอกสารนี้ (Thai)