



Age-Friendly Public Health Systems

National Center for Chronic Disease and Health Promotion Centers for Disease Control and Prevention (CDC) FY 2022 Labor HHS Appropriations Bill

	FY2022 TFAH Recommendation
Age-Friendly Public Health Program	\$50,000,000

Background: U.S. public health efforts are partly responsible for the dramatic increases in longevity over the twentieth century, including the remarkable achievement that someone reaching age 65 today can expect to live nearly 20 more years. Every day, 10,000 more Americans turn 65. Yet, historically, there have been limited collaborations across the public health and aging fields and little funding to ensure public health has the capacity and capability to address the unique public health needs of older adults. Public health can play an important role in helping our growing older adult population remain healthy and independent. The COVID-19 pandemic has illustrated the need for public health to increase its focus on the needs of older adults.

Eighty percent of Medicare beneficiaries have one chronic condition and nearly 70 percent have two or more (such as diabetes, hearing loss and heart disease).^{1,2} Chronic diseases are costly -- Medicare enrollees with chronic conditions account for 96 percent of Medicare spending.³ These factors have exacerbated risks for COVID-19. Isolation and loneliness, financial struggles, and limited access to transportation, healthy food, and affordable housing are challenges many older people face. Social isolation alone increases the risk of heart disease, infections, depression, cognitive decline and death among older people and accounts for \$6.7 billion in additional Medicare spending annually.⁴ A public health approach to healthy aging would complement individual-level services provided in the aging sector with population or community-wide solutions that promote healthier aging and reduce the years of unhealthy life. Disparities amongst

¹ Centers for Disease Control and Prevention. Healthy aging at a glance, 2011: Helping people to live long and productive lives and enjoy a good quality of life. Atlanta, GA: Centers for Disease Control and Prevention, US Dept of Health and Human Services, 2011. <http://stacks.cdc.gov/view/cdc/22022>.

² Centers for Medicare & Medicaid Services. Chronic Conditions Charts, 2017. Available from: https://www.cms.gov/Research-Statistics-Data-andSystems/Statistics-Trends-and-Reports/Chronic-Conditions/Chartbook_Charts.html.

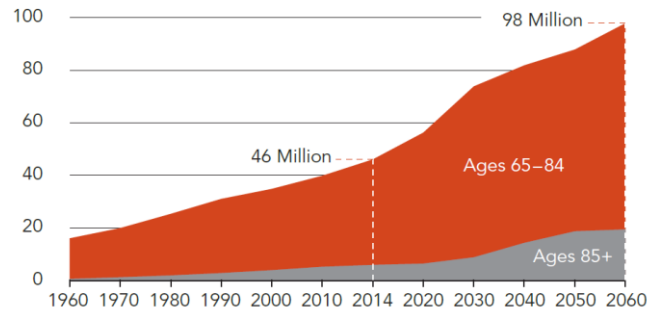
³ Ibid.

⁴ Flowers, Lynda, et al. Medicare Spends More on Socially Isolated Older Adults. AARP, 2017, Medicare Spends More on Socially Isolated Older Adults, www.aarp.org/content/dam/aarp/ppi/2017/10/medicare-spends-more-on-socially-isolated-older-adults.pdf.

older adults persist -- Black Americans and American Indian/Native populations have shorter life expectancies with numbers worsening during the COVID-19 pandemic.⁵

The Number of Americans Ages 65 and Older Will More Than Double by 2060.

U.S. Population Ages 65 and Older, 1960 to 2060 (Millions)



Source: PRB analysis of data from the U.S. Census Bureau.

Impact: Age-Friendly Public Health System interventions can optimize the health and well-being of adults 65 and over, prolong their independence, help reduce disparities and advance equity, and reduce their use of expensive healthcare services. Yet there is no program at the Centers for Disease Control and Prevention (CDC) that supports local and state public health departments to improve older adult health and well-being. A dedicated public health role is necessary to foster multi-sector collaboration and develop effective solutions to improve the lives of older Americans. TFAH recommends funding for a CDC Healthy Aging unit to promote the health and well-being of older adults, improve health equity and reduce healthcare costs by engaging state, local, territorial and tribal health departments.

Examples of Age-Friendly Public Health System interventions can include:

- Documenting and disseminating data related to the health status of older adults and health disparities in the older adult population;
- Partnering with health and non-health sectors to create conditions that lessen risk factors for chronic illness, social isolation, and other health care costs;
- Implementing evidence-based programs and policies that prevent illnesses and injuries and improve the health and well-being of older adults;
- Improving coordination of interventions to identify gaps and reduce duplication of efforts at federal, local, and state agencies and with other aging services organizations; and
- Collect and disaggregate data in order to identify and address disparities among the older adult population by race, ethnicity, and disability status

Recommendation: TFAH recommends \$50 million in FY 2022 to the Centers for Disease Control and Prevention (CDC) to expand its healthy aging work to include coordinating healthy aging efforts across CDC, funding applied research and translation for public health practice, and awarding cooperative agreements to build capacity in state, tribal, and territorial public health departments to promote the health of older adults within an age friendly public health system.

⁵ Arias, Elizabeth, et al. Provisional Life Expectancy Estimates for January through June, 2020. Atlanta, GA: Centers for Disease Control and Prevention, US Dept of Health and Human Services. 2021. <https://www.cdc.gov/nchs/data/vsrr/VSRR10-508.pdf>