

Actualizing Better Health and Health Care for Older Adults

The National Academy of Medicine convened the Vital Directions for Health and Health Care: Priorities for 2021 initiative which, following a 2016 initiative of the same name, aims to provide expert guidance to the new presidential administration and nation on several focus areas for U.S. health policy. The following highlights the Vitals Directions 2021 article on health and health care for older adults, published in Health Affairs in January 2021. Visit nam.edu/VitalDirections for more information.

Overarching Challenges in U.S. Health Care for Older Adults

Due to momentous advances in science and technology, the U.S. has the requisite knowledge and skills to provide excellent preventive and clinical care to older Americans. However, many obstacles persist within the U.S. health care system that must be addressed to meet the critical needs of this growing population:

Failure of care delivery to recognize diversity. The U.S. health care system is unprepared to care for a complex population of older adults, a problem that has been magnified by COVID-19.

Inadequate consideration of equity and the social determinants of health. Experts have expressed deep concerns regarding health care disparities, inequality, structural racism, and the resulting risk for adverse outcomes among those who are disadvantaged.

Lack of commitment to tackle longstanding barriers. The current fragmentation of care and disregard for prevention within the U.S. health care system must be met with a willingness to work across silos, prolong optimal health and independence, restructure financing, and support person-centered care.

Policy Priorities

1. Create an adequately prepared workforce for the health care of older persons.
2. Strengthen the role of public health.
3. Promote equity and address the social determinants of health.
4. Develop, evaluate, and implement new approaches to the delivery of health care for older adults that incorporate evidence-based telehealth and technology.
5. Allocate resources to support person-centered care including palliative and end-of-life care.
6. Redesign the structure and financing of long term services and supports, including nursing home and community care.

These steps by national policymakers, in partnership with state and local government entities, will help reform the current health-related systems and payment structures in the U.S. to create value, reduce waste, and better serve all older Americans.