

Health Trends

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Reinventing care for a generation

▲ **Sree Chaguturu**
 MD, Executive Vice President and Chief Medical Officer for CVS Health

Serving Americans over 65 will call for industry-wide innovation — and a sensitivity to how they want to receive their care.

Life after age 65 represents a new chapter for many. And for the past few decades, Americans have been reinventing this phase of life. They are more active and engaged in their health than any previous generation, and medical advances have helped them live longer. As a result, the country is facing a milestone demographic moment, in which one in five people will be of retirement age by 2030.¹ That, in itself, is a testament to modern health care.

An aging population calls for the health care system to perform at its very best. Despite their relative health, three out of five² people over 65 are managing two or more chronic conditions. They are more likely to spend time at hospitals and have more needs at the pharmacy counter. To serve older Americans means rethinking the tools we already have and innovating where new needs arise.

The Health Trends Report for spring 2023 examines how we can best serve people over 65:

- ▶ **What do the numbers tell us about this generation?**
- ▶ **What changes and new priorities will best serve this group?**
- ▶ **How can we support the mental health of older Americans?**
- ▶ **What role will pharmacy and retail care play in the industry’s transformation?**

We have been preparing for this moment and, with the touchpoints we have, are uniquely positioned to support older adults. By building on a foundation of trust — the non-negotiable first step in any patient care — we can partner with them on their wellness journeys in a way that is compassionate, convenient and effective.

This transformation in health care will take many shapes. MinuteClinic®, for instance, has been undergoing a steady transition to offer age-friendly care. We use an evidence-based framework that reviews and assesses current medications, mobility, mentation (mental health) and what matters (“the 4Ms”) to those over 65 in terms of health goals and a treatment plan. At thousands of locations, when they come in for any health issue, they will be screened for the “4Ms.”

Factors outside the clinic walls may be even more important to address. Social determinants of health are at the center of a national conversation and a primary concern for all practitioners. Our Health Zones project in Atlanta, for instance, helps seniors get access to transportation and medically-tailored meals.³ Since 1997, CVS Health® and Aetna®, a CVS Health company, have invested \$1.2 billion in another determinant, affordable housing, in part to help older Americans stabilize their home lives and mitigate the financial strain that can worsen health issues.

We will continue to find new ways to serve older Americans. Where they live in long-term care and assisted living facilities, we will find ways to make them safer, as we did when we delivered COVID-19 doses in long-term care facilities as part of a unique public health partnership. We will serve them at pharmacy counters in their neighborhoods and through new forms of virtual care, and we will find ways to help them age in place, receiving more care in their home environments.

With integrity and heart, we continue to be a partner to people over 65 and provide the latest in health care that meets their needs, while helping the country move forward to embrace this unique demographic moment.

¹ <https://www.census.gov/newsroom/press-releases/2018/cb18-41-population-projections.html#:~:text=By%202030%2C%20all%20baby%20boomers,residents%20will%20be%20retirement%20age.>

² <https://www.nia.nih.gov/health/supporting-older-patients-chronic-conditions>

³ <https://www.cvshealth.com/impact/healthy-community/health-zones/atlanta.html>

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How to adapt to the changing needs of those 65+

Older Americans know what they want from providers. It will be up to health care companies to address the demands of an aging population in a way that’s timely, cost-sensitive and convenient.

America is aging well, and that’s a good thing. Thanks to increasing life spans and falling birth rates, one in five Americans will be 65 years and older by 2030, according to projections from the U.S. Census Bureau.¹ But that demographic makeup is new for the country and will mean changes to the health care system.

The good news is that baby boomers — the generation born in the years after World War II, who make up most of this novel group — have benefited from better access to health care and major advances in treatment, including joint replacements, cancer cures and new ways to prevent dozens of illnesses. About three out of four older adults rate their health as good or excellent,² showing that the stereotype of frail old age no longer holds true for everyone. Exceptional longevity is also expected to grow, with the population of centenarians (people 100 or older) reaching six times its current size by 2060.³

But age does bring a more complicated health picture. Older Americans tend to have more chronic conditions,⁴ and the American Hospital Association estimates that by 2030 the system will be dealing with twice as many hospital admissions and physician visits for baby boomers.⁵ At least two out of three older adults also are expected to need long-term care services, for an average of about three years in their lives, according to the U.S. Department of Health and Human Services.⁶ Delivering that care will mean shifts in process and priorities.

How can health care institutions promote healthy aging?

New systems will need to keep pace not only with more care, but often care that’s more complex. “We have a serious challenge going

forward,” says Jamie Sharp, MD, a physician and Vice President and Medicare Chief Medical Officer for Aetna, a CVS Health company. “We need to develop evidence-based guidelines for the kinds of chronic care management a majority of our older adults require, and make sure the entire health care system follows them.”

Data and an assessment of current challenges will need to lead the way, Dr. Sharp says. A recent report from the National Academy of Medicine, for instance, has mined the research for six strategies to improve care for older adults. Some of these strategies suggest developing and supporting an adequate workforce; redesigning palliative and end-of-life care services, as well as long-term care; and strengthening the role of public health in all aspects of growing older. Many of them will require “dramatic changes,” the authors note.⁷

Listening to older adults, notes Dr. Sharp, will be the most critical starting point for health care organizations. “At CVS Health, we’re working to engage people early on, to better understand what they will need,” she explains. “Not just financially and medically, but also from within their communities. How do they plan to stay active and involved as they grow older?”

On the ground, that means rethinking the kinds of programs offered to older adults — including those that meet their social and mental health needs — and how to use routine care visits in an age-friendly way. It also means exploring new avenues for staying connected in between health care visits. On all fronts, CVS Health is aiming to lead the move forward. “We’re envisioning a new landscape for the delivery of health care,” Dr. Sharp says. “We’re focused on creating that continuum of touchpoints with those 65 and older to help support them in staying healthier for a longer period of time.”

Strategies for better support of older adults

In light of these forces, CVS Health has already started to serve older Americans in new ways. Some strategies to do so include:

Putting self-advocacy first. Some older adults are hesitant to call their doctor with questions or concerns because they don’t want to “be an inconvenience,” says Amanda Lewis Arts, RN, Executive Clinical Director of Medicare Medical Operations at CVS Health. Educating them about risks — and the power of their own voice — should be priority number one. In the Healthy Aging Support Program (HASP) from Aetna, which was launched a year ago, members participate in virtual group sessions to learn how to navigate a complex health care system and create habits for managing their chronic conditions.

But the real importance of HASP’s give-and-take format is that it encourages members to raise their hands when they need to. “It’s absolutely critical that we empower an aging population and their

caregivers to use their voice and speak up for themselves when managing their acute or chronic medical condition,” says Lewis Arts. “Our goal is to encourage proactive health engagement instead of reacting to sickness. Persistence in seeking answers, education and support can prevent or delay a decline in health and improve their quality of life.”

Improving home-based care. Older Americans are keen to receive health care at home. According to polling from the National Health Project, a collaboration between Harris Poll and CVS Health, four out of five people 65 and older say they would prefer to receive care in their own residence rather than a medical facility. Pandemic concerns about infection in hospitals and long-term care facilities have strengthened this desire. The good news is that avenues for this kind of care have grown significantly, and more Medicare Advantage plans are offering supplemental, in-home services.⁸




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Aetna, a CVS Health company

One innovative program from CVS Health is looking to expand home-based care for those discharged from an acute care setting. The post-acute care transition program, slated to launch in spring 2023, will assign a nurse caregiver to the home and will provide other necessary resources. That might mean aiding patients by reconciling medications with their primary care provider, ensuring that the home is age-friendly, offering home visits or even helping arrange food and transportation services, Dr. Sharp says. A recent study published in the *American Journal of Managed Care* showed patients discharged to home health services like these were 60% less likely to be readmitted to the hospital within 30 days.⁹

Leaning into virtual care. Far from shying away from technology, older Americans warmed up to virtual care during the pandemic. Nearly half of people 65 and older have now used it, according to a report from the health non-profits West Health and United States of Care.¹⁰ “We were certainly pushed into virtual care due to COVID-19, which accelerated a transition,” Dr. Sharp says. “Virtual care is poised to be one of the strongest tools in fighting any provider shortfall — and it will be especially helpful in reaching those with mobility problems,” she says.

CVS Health Virtual Primary Care could be one way to manage the special needs of those 65 and older. Members have access to virtual, on-demand care as well as chronic condition management and mental health services — with an option of being seen in-person at an in-network provider, including MinuteClinic locations.



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Amanda Lewis Arts
RN, Executive Clinical Director of Medicare
Medical Operations at CVS Health

And remote health monitoring — devices that keep track of a person’s health status 24/7 — will also play a bigger role, says Dr. Sharp. These devices can alert a provider about potential issues and document a patient’s health between visits — information that also can be sent to designated family caregivers, she adds.

Using prescriptions as an opportunity. Nearly nine in 10 adults 65 and older take a prescription, and half take four or more.¹¹ A visit with a pharmacist can be an opportunity to monitor and encourage health habits between visits, as well as answer patient questions. And research on what happens when prescriptions aren’t filled — because of the administrative challenges, mobility problems or

difficulty paying for medicines — has been a driver on how to deliver better care.

Increasing convenience. Receiving medications through the mail offers a different kind of touchpoint and opportunity — and it’s on the rise among older adults, says Frank Moffett, Senior Vice President of PBM Government Programs at CVS Health. “Home delivery is critically important, whether it’s through the PBM mail service or a retail pharmacy. It makes things easier for older adults, which absolutely helps with adherence,” he says. PBMs make managing prescriptions easier for providers, too, since monitoring medications is an important part of age-friendly care.

It will take a combination of strategies to serve the growing population of older adults. The key will be to meet them in the places and ways they’re most comfortable getting their care. “We encourage those 65 and older to seek care in ways that are most convenient for them, including our brick-and-mortar locations staffed with clinicians, pharmacists and advanced care practitioners,” says Dr. Sharp. “For those who can’t come to us, we go to them.”

¹ <https://www.census.gov/content/dam/Census/library/publications/2020/demo/p25-1144.pdf>

² <https://khn.org/news/why-so-many-older-americans-rate-their-health-as-good-or-even-excellent/>

³ <https://www.prb.org/resources/longevity-research-unraveling-the-determinants-of-healthy-aging-and-longer-life-spans/>, first table

⁴ https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Chronic-Conditions/Chartbook_Charts, 2018 link, second file, chart 5

⁵ <https://www.pharmacytimes.com/view/the-aging-population-the-increasing-effects-on-health-care>, figure 2 and <https://www.aha.org/system/files/content/00-10/070508-boomerreport.pdf>, tables pg 11

⁶ <https://www.grandviewresearch.com/industry-analysis/us-long-term-care-ltc-market>

⁷ <https://www.healthaffairs.org/doi/10.1377/hlthaff.2020.01470>, for abstract and quote in summary

⁸ <https://bettermedicarealliance.org/wp-content/uploads/2022/11/Milliman-Issue-Brief-CY-2023-MA-EPHR-Supplemental-Benefits-final.pdf>

⁹ <https://healthpayerintelligence.com/news/cms-home-healthcare-policy-reduced-hospital-readmissions>

¹⁰ <https://unitedstatesofcare.org/wp-content/uploads/2021/03/Playbook-Older-Adults-Experience-of-Virtual-Care.pdf>

¹¹ <https://www.kff.org/health-reform/issue-brief/data-note-prescription-drugs-and-older-adults/>



Retail health care's role in an aging America

In caring for older adults, neighborhood health destinations will be as important as virtual care and home health delivery.

If there's one lesson from the past decade, it's that older adults are absolutely willing to change how they receive care — if the benefits are worth the effort. Retail health clinics offer a prime example. This channel has always been popular with younger people, with more than a third of millennials using it as their preferred form of provider visit.¹ But patients over 65, who had been slow adopters, are now migrating to retail health care in record numbers and doubled their use in the years before the pandemic.²

Convenience is part of the reason. "It's challenging to get an appointment with a traditional primary care practice as it can sometimes take weeks or even months to get in to see a primary care provider," says David Fairchild, MD, MPH, Chief Medical Officer of Retail Health and Senior Vice President of CVS Health. "Retail health clinics provide the accessibility that older adults look for." In fact, in 2022, more than 650,000 patients aged 65 and older sought care at MinuteClinic.

Retail health care can also help with a larger, structural problem: About 13 million people in the United States live in primary care

provider "deserts." According to a 2021 report,³ one full-time primary care provider in these areas must serve more than 10,000 people — a caseload more than three times what's recommended. And more than a third of U.S. residents face other kinds of health care shortfalls in their area.


Retail and pharmacy providers can provide a lifeline and even flag health issues before they become critical. "Medical problems can worsen in a hurry, particularly in older adults, if people wait too long to engage with a practitioner," says Dr. Fairchild.

The future of retail health care for older adults

Getting retail sites ready for an aging America will mean changing both practices and mindset. A focus on value-based care, for example, is a key part of that care delivery strategy. "By working with providers and health systems to connect Medicare patients

to community MinuteClinics, we're aiming to close care gaps for vulnerable patient populations and promote health equity while bringing down costs," says Mohamed Diab, CEO of the CVS Accountable Care Organization.

In 2022, MinuteClinic also completed a three-year program to incorporate an evidence-based approach into visits with older patients. This care model is known as Age-Friendly Health Systems. It was implemented in close collaboration with The John A. Hartford Foundation, Case Western Reserve University Frances Payne Bolton School of Nursing and the Institute for Healthcare Improvement.



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MD, MPH, Chief Medical Officer of Retail Health
and Senior Vice President of CVS Health

Visits for patients over 65 include use of the Age-Friendly Health Systems' framework known as the "4Ms": what matters, mentation, mobility and medication. In practical terms, a provider using this framework aims to align care with a patient's health goals and care preferences (what matters), address mental health and cognitive skills, help them maintain function and mobility, and use only age-friendly medications that don't interfere with what matters, mentation or mobility. More than 465,000 MinuteClinic patients have received this kind of patient care — that's nearly half a million patient encounters in two and a half years.

“When retail health clinics can screen and identify age-related problems, such as cognitive decline, it provides a safety net,” says Anne Pohnert, DNP, Lead Director of Clinical Quality for MinuteClinic. “Our providers can alert the patient and their primary care physician of a potential risk that might not be detected until the patient's next visit, which could be months or up to a year away.”

The 4Ms framework also offers a chance to build trust with providers — and sometimes open doors to better care. One patient in Maine had not been to a health care provider in 30 years. Not wanting to

go to the hospital, the patient made an appointment at his local MinuteClinic and the provider immediately identified an advanced case of congestive heart failure. While the patient initially refused further treatment, a 4Ms discussion about his health priorities (What Matters) ultimately led him and his caregiver to pursue life-saving treatment at a nearby hospital.



Approximate percentage of MinuteClinic patients 65+ who have been engaged in the 4Ms framework.

Including caregivers during these appointments — and improving access to health records and appointment scheduling — is another area of innovation. More than a quarter of Americans now consider themselves caregivers, according to a recent CVS Health poll, and many report that it causes a financial and mental health strain. Retail health care providers can help on this front, becoming an ally on a range of age-related topics that might be difficult to address directly with a patient. “The wife of one patient returned to the MinuteClinic to thank the provider for bringing up her husband's memory issues, which he'd been ignoring,” recalls Pohnert. “Now he's getting the memory care he needs.”

The local pharmacy will also become more important as a place to check in with older patients and intervene if necessary: Nine out of 10 older adults are taking a prescription medication, with more than half taking four or more prescription drugs.⁴ Patients of all ages already look to pharmacists to answer medication questions and deliver key vaccines. There is movement in the industry to help pharmacists practice at the top of their licenses by exploring the impact of social determinants of health on their older patients — and referring them, when possible, to local resources for help with challenges such as food insecurity or transportation.

Convenience, accessibility, familiarity and trust are all elements that retail health clinics and pharmacies can build on in the decades ahead. “It's essential that we make older people feel welcome in retail health clinics and show them that they are interacting with a provider they can trust,” says Creagh Milford, DO, MPH, Senior Vice President of Retail Health, CVS Health.

¹ <https://www.fiercehealthcare.com/healthcare/5-millennial-driven-healthcare-trends>

² <https://www.nextavenue.org/retail-health-clinics-adapt-care-due-older-patients/>

³ [Mapping Healthcare Deserts: 80% of the Country Lacks Adequate Access to Healthcare - GoodRx](https://www.goodrx.com/news/mapping-healthcare-deserts-80-of-the-country-lacks-adequate-access-to-healthcare/)

⁴ <https://www.kff.org/health-reform/issue-brief/data-note-prescription-drugs-and-older-adults/>



Happier times: Mental health for the later years

Life's later chapters are generally happy ones. But challenges remain in mental health care for older adults, says Taft Parsons, Chief Psychiatric Officer, CVS Health.

Declining mental health and aging don't go hand in hand.

In fact, studies find that older Americans tend to be happier and more content than their younger peers.¹ But aging can bring special challenges, and according to the 2021 Health Care Insights Study by CVS Health, 39% of providers have a high level of concern about the mental health of their patients over 65.²

In fact, other research shows that about 20% of retirement-age Americans have been diagnosed with a mental health condition.³ Many more resist talking to their health care teams about such issues, missing the chance of spotting mental health conditions that might be treated.

Taft Parsons III, MD, Chief Psychiatric Officer for CVS Health, discusses strategies for detecting mental health problems in older adults and how to connect them to care in a timely way.

Are there differences in the mental health issues that older adults face?

Grief and loss can be a prominent part of their psychological experiences — they retire from the workplace and spouses and friends pass away. Dealing with chronic health conditions can also be psychologically challenging. Certain medications associated with aging — such as beta-blockers⁴ to treat hypertension or proton pump inhibitors⁵ for gastroesophageal reflux disease — may also lead to symptoms of depression.

There's also the isolation and loneliness that can come with age, which can have significant adverse effects on mental and physical health. That factor alone can increase the risk of dementia, heart disease, stroke, depression and anxiety.⁶

So people can carry lifelong mental illness into their later years, and new problems can also arise during this stage of life. We need to be on the lookout for both.

A recent CVS Health National Health Project poll showed that a surprising 94% of people 65 and older rated their own mental health as “well” or “very well.” This is far higher than younger generations report, and it’s at odds with much of the research about the prevalence of mental illness in this group. What’s going on there?

Part of it may be that the current generation of older adults didn’t grow up talking about mental stress. They either toughed it out or maybe talked to their religious leader about their problems. Certainly, they didn’t discuss it with their health care providers. That same poll finds that only 14% of adults from this group are willing to talk to a primary care provider about mental health concerns.⁷



Percentage of providers with a high level of concern about the mental health of their patients over 65.

Luckily, primary care providers are doing a much better job today of getting the real story and detecting anxiety, depression and stress. The latest draft recommendations from the U.S. Preventive Services Task Force advises screening in these settings for depression in older adults.⁸ At every touchpoint, including retail clinics, we’re making a special push to track and treat mental illness in this group. Our recent age-friendly screening guidelines include a mental health component and, in 48 states, MinuteClinic locations now offer depression screenings.

To help bridge the discomfort gap, we tell older patients — and all of our patients — that screening for depression is no different than screening for high blood pressure or high blood sugar. We do this to help them understand they’re being assessed for a medical problem, not a personal weakness.

You mentioned social isolation. Research from the National Academies suggests that one-fourth of older Americans are socially isolated.⁹ What tools does a provider have to address that?

We can encourage older adults to make connections and provide opportunities for them to do that. For instance, in some Medicare Advantage plans, our Aetna teams are offering services from Papa Inc. This benefit in seven states provides companionship to people at risk for isolation and loneliness. Non-clinicians will visit the member and engage in a number of ways, including playing board games, sharing a meal, helping with technology or taking a walk.

You can also address social isolation in a broader way by looking at the social needs that drive isolation or make it worse. Aetna Resources For Living[®] program, for instance, connects members with a broad range of community resources, which can include transportation, food programs and caregiver support.

Just 43% of people who are 65 or older have tried to access mental health care, as opposed to 75% of people under 65.¹⁰ A big growth in virtual mental health care has helped with accessibility issues in the wider population. Will that solution work for this group?

One of the big questions has been whether older adults would engage in technology-based care. It’s important that we work toward this because our research shows that, with virtual care, many people speak more freely and personally about mental health issues.

Some older adults still prefer face-to-face, but it turns out that older Americans have been more than adept at getting their care virtually. Today, 40% of our Medicare enrollees who are receiving mental health outpatient care do so online. And all Medicare Advantage plans from Aetna now cover telehealth visits for mental health services.



“Our research shows that, with virtual care, many people speak more freely and personally about mental health issues.”

Taft Parsons III
MD, Chief Psychiatric Officer for CVS Health

For people who aren’t comfortable with digital visits, we’re trying to fill the gap in other ways. MinuteClinic locations in 14 states, for instance, currently offer in-person and virtual mental health counseling services, an important distinction that vastly improves access and reduces potential stigma people may feel coming into an actual counseling site.

One further challenge: There aren’t enough mental health practitioners to go around. Can that problem be solved?

We continue to advocate for policies that strengthen the behavioral health workplace to meet the needs of the Medicare population. We were pleased to see that, starting this year, Medicare will open its doors to a wider range of behavioral health practitioners — including trained marriage and family therapists, addiction counselors and licensed professional counselors. They will be able to provide counseling and cognitive behavioral therapy to patients without a doctor or nurse practitioner physically on-site.¹¹ That means more clinicians who can provide mental health care to older adults.

The health care industry is also focused on digital mental health services delivered via mobile phone apps or online as ways to get older people the care they need in a timely way. Studies show, for example, that cognitive behavioral therapy delivered over the internet is as effective as in-person therapy for depression and anxiety.¹²

We need to work diligently for the mental wellness of older Americans. The tools and strategies for doing that are growing, and we need to roll them out across the health care landscape.

¹ https://www.aarp.org/content/dam/aarp/research/surveys_statistics/life-leisure/2022/second-half-life-desires-concerns-report.doi.10.26419-2Fres.00538.001.pdf [see esp. page 6]

² <https://www.cvshealth.com/news/research-reports/health-care-insights-study/health-care-insights-study-2021.html>

³ <https://www.commonwealthfund.org/publications/issue-briefs/2022/jan/comparing-older-adults-mental-health-needs-and-access-treatment>

⁴ <https://www.psychiatrist.com/jcp/psychopharmacology/beta-blockers-and-the-risk-of-new-onset-depression/>

⁵ <https://pubmed.ncbi.nlm.nih.gov/28899441/>

⁶ <https://www.cdc.gov/aging/publications/features/lonely-older-adults.html>

⁷ [CVSH_HarrisPoll_Month 11 Report_Jan2023.pdf](#)

⁸ <https://www.uspreventiveservicestaskforce.org/uspstf/draft-recommendation/screening-depression-suicide-risk-adults#fullrecommendationstart>

⁹ <https://nap.nationalacademies.org/catalog/25663/social-isolation-and-loneliness-in-older-adults-opportunities-for-the>

¹⁰ Harris Poll Dec 2022

¹¹ [Strengthening Behavioral Health Care for People with Medicare | CMS](#)

¹² <https://pubmed.ncbi.nlm.nih.gov/29215315/>



“Primary care providers are doing a much better job today of getting the real story and detecting anxiety, depression and stress.”

Taft Parsons III
MD, Chief Psychiatric Officer for CVS Health





With America's aging population, health care follows the data

A growing 65-and-older population will change health care. How big is the shift, and what services will seniors need to stay healthy?

As people live longer — and the last of the baby boom generation (born 1946-1964¹) hits retirement age — the average American will be older than ever. By 2034, one in five people in the United States will be 65 or older, roughly matching the size of the population under 18 for the first time in history. This older generation will reinvent definitions of aging, bringing new needs and attitudes toward health care and healthy living.

Providers will need to pay close attention in order to support older adults. The coming decades will bring the management of more chronic conditions and evolving forms of care delivery. In creating this next era, inventive approaches to medical and supportive services can break new ground — and allow Americans to age with dignity.

¹ <https://www.pewresearch.org/social-trends/2008/06/25/baby-boomers-the-gloomiest-generation/>



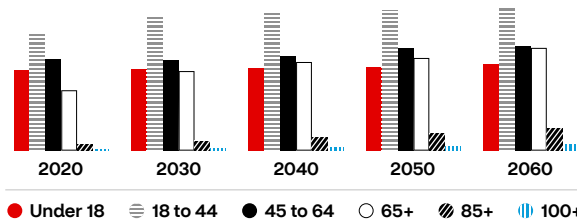
Health care and the older American

Today, **56 million people are 65+** — and another **65 million are between 50 and 64**. What will they need from providers in the years to come?

More people than ever are in the 65+ age group.



Population by age group: Projections 2020 to 2060

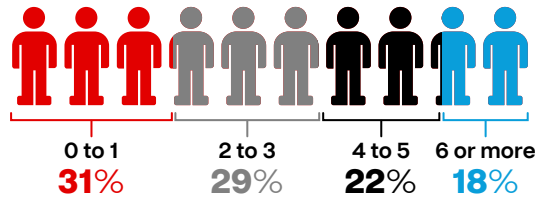


By 2030, more than **1 in 5 people** will be over 65.
By 2060, the population **over 85 will almost triple**.
In the next 40 years, **500,000+ people will turn 100**.¹

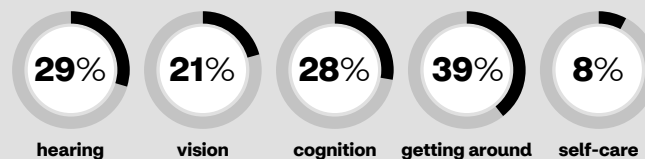
So what does this mean for health care?

Many people in this group are **managing chronic conditions** ...²

Number of chronic conditions that people 65+ are living with



... and people **65+ may require help with their physical limitations**, including:³

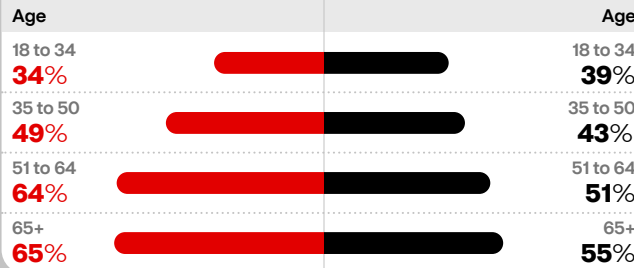


When they seek health care, older Americans have more confidence in their providers than other groups.⁴



Percent who trust their primary care provider

Percent who trust their pharmacist



And on average, they see their providers more.



Currently, about

1 in 4 doctor visits are with people over 65.⁵

Hospital stays by people 65+ are **twice as likely** compared to people 45 to 64.⁶



But older Americans aim to stay healthy.

A high percentage are taking action to maintain ...⁷



... a healthy heart



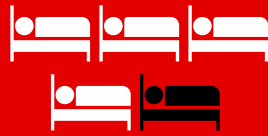
... a healthy weight



... and physical stamina



And they want to stay at home — even when they need care.



4 in 5

would prefer to get **treatments at home** instead of a health care facility.⁸

About half

say they would be healthier with **more care at home.**⁹



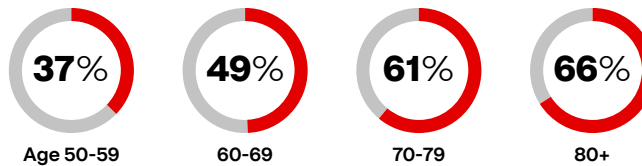
The need for home health aides **will grow 25%** between 2021 and 2031.¹⁰

But while there is work to be done, there is much to celebrate about an aging America — and about growing older.

People who think aging lets them focus on what makes them happy¹¹



People who think they have a high quality of life¹²



For more information, read our Health Trends Report: CVSHealth.com/HealthTrends/HealthyAging

Sources

- ¹ [United States Census Bureau](#)
- ² [Centers for Medicare & Medicaid Services](#)
- ³ [Administration for Community Living](#)
- ⁴ [CVS Health Care Insights Study 2021](#)
- ⁵ [Peterson-KFF Health System Tracker](#)
- ⁶ [UpToDate Hospital management of older adults](#)
- ⁷ [AARP, The New Aging Survey](#)
- ⁸ Harris Poll, National Health Project for CVS Health
- ⁹ Harris Poll, National Health Project for CVS Health
- ¹⁰ [U.S. Bureau of Labor Statistics, Occupational Outlook Handbook](#)
- ¹¹ Harris Poll, National Health Project for CVS Health
- ¹² [AARP, The New Aging Survey](#)