



THE ALLIANCE
**SIGNATURE
SERIES**

SERIES REPORT:

THE FUTURE OF AGING POLICY IN AMERICA

allhealthpolicy.org



ALLIANCE
FOR HEALTH POLICY

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PREMIER



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II. NAVIGATING THE AGING LANDSCAPE IN AMERICA

Aging is a complex and growing area of focus in health policy, with significant implications for individuals, families, and care systems. As the population of older adults expands, so does the importance of understanding and improving the structures that support aging with dignity, independence, and quality of life. Programs such as Medicare, Medicaid, and the Older Americans Act (OAA) serve as foundational components of that support. They help to ensure access to essential health care and long-term services. Financial security at this phase of life makes policies affecting finances, like Social Security and those governing private retirement investments, fundamental. These programs also highlight the ongoing challenge of balancing fiscal sustainability with increasing demand at the systems level, and, at the individual level, the desire for personal autonomy and societal impact.

Beyond core financial and health coverage policies, the aging policy landscape is as complex as the needs of aging Americans. It encompasses dozens of issues with various areas of jurisdiction, including efforts to improve care coordination, expand access to mental health services, and support family caregivers, who often provide unpaid and essential care. Challenges such as geographic barriers, social isolation, and

disparities in access to care continue to affect older adults, particularly those in rural areas or historically underserved communities. These issues underscore the importance of inclusive and equitable strategies that reflect the varied experiences of aging populations.

As policymakers and stakeholders consider how to respond to these evolving needs, education and open-mindedness remain essential. Experts are united in their conviction that older adults enrich our society by contributing to the workforce, society, and culture in meaningful ways, in addition to their use of key programs. When envisioning aging, thought leaders recognize that health care should play a supportive, behind-the-scenes role without becoming the central focus of daily life. Ongoing discussions can build on this vision to tell a more accurate picture of aging in America, clarifying how systems function, identifying areas of strain or opportunity, and fostering shared understanding. This can help inform thoughtful, evidence-based responses. The goal is to ensure that as the population ages, the systems in place are prepared to serve all individuals effectively, fairly, and with a sustained focus on quality of life.

About the Alliance for Health Policy and its Signature Series

The Alliance for Health Policy is a nonpartisan, nonprofit organization dedicated to helping policymakers and the public better understand health policy, the roots of the nation's health care issues, and the trade-offs posed by various proposals for change.

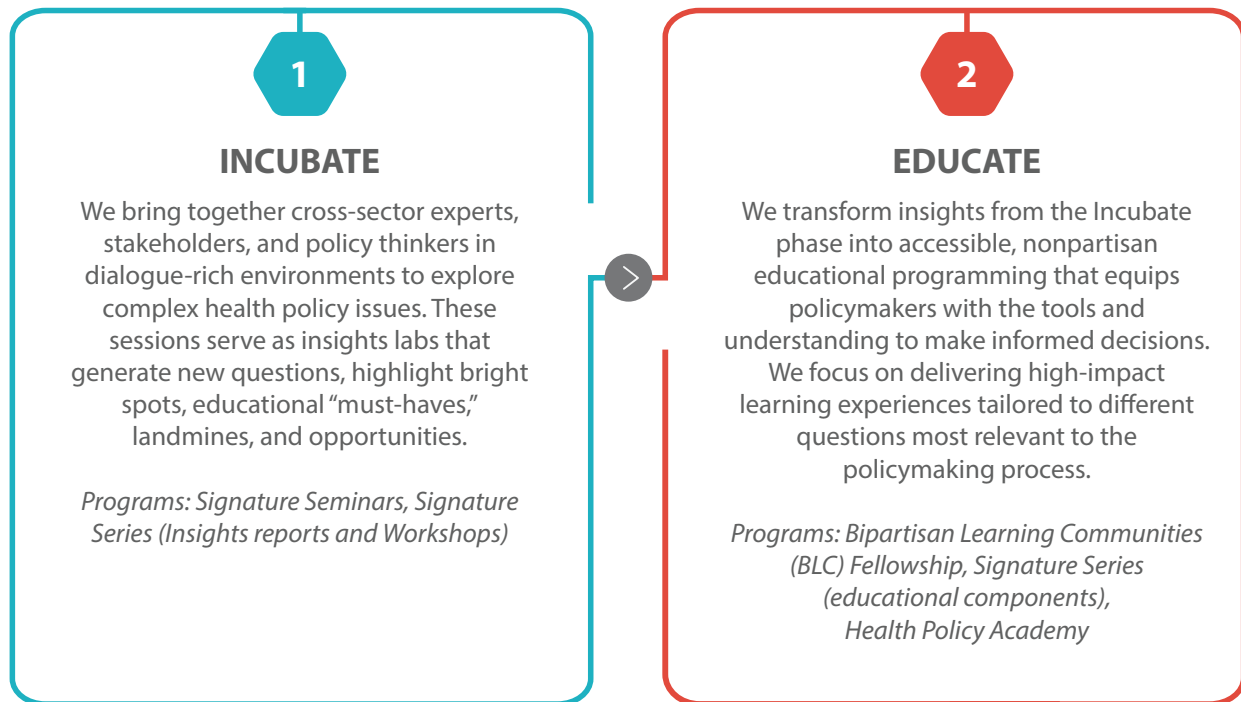
For the past decade, the Alliance has held its flagship annual program, the Signature Series, which brings together voices from across the health policy community to focus on a single, pressing issue. Each year, the Series uncovers key insights and translates them into accessible, nonpartisan education for policymakers and the public.

In 2025, the Alliance selected Aging in America as its Signature Series theme because demographic shifts and the growing needs of older adults are not fully reflected in current policy frameworks. As part of the Series, the Alliance invited health policy and aging policy experts and stakeholders—government officials, health care providers, payors, caregivers, aging advocates, philanthropists, researchers, and community leaders included—for a deep, policy-focused dialogue examining how our system measures up to the needs of an aging population, and how we can best prepare policymakers to take on the challenge.

To gather key insights, the Alliance created a collaborative environment that fostered active listening and mutual understanding, allowing participants to explore the complexities of aging through multiple lenses. By facilitating foundational conversations in a non-competitive space, the Alliance helped surface differing perspectives and shared goals. As the population ages, such multi-stakeholder engagement is essential to developing policies that support more equitable, coordinated, and person-centered systems of care.

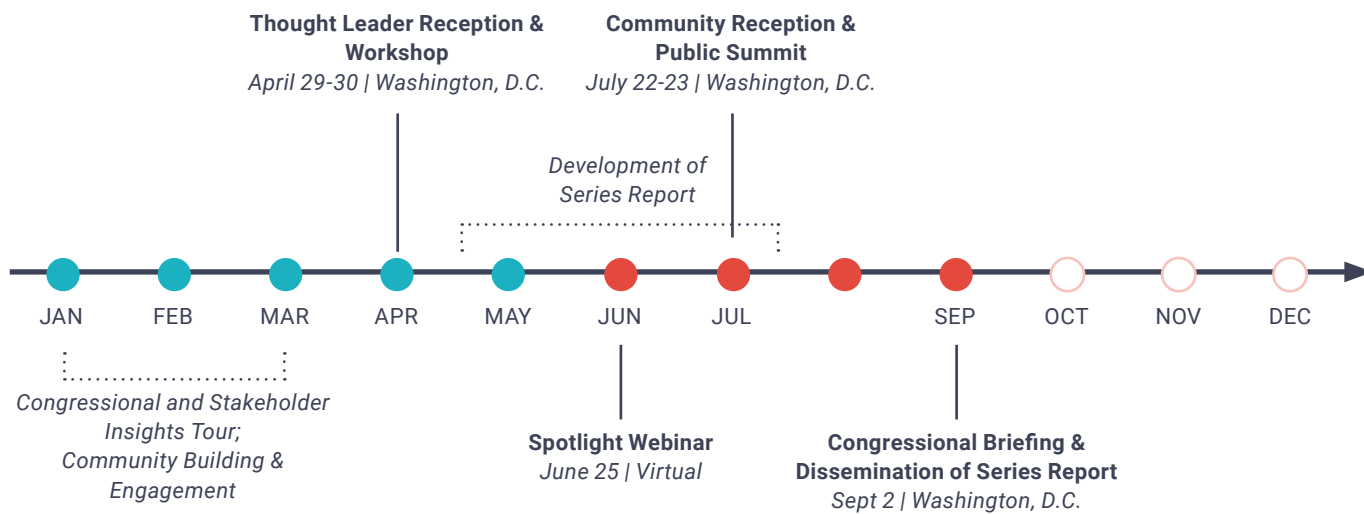
The Alliance's Incubate to Educate Model

The structure of the annual Signature Series incorporates both phases of the Alliance's "Incubate to Educate" model. The Alliance first listens and learns from our extensive network of policy leaders and expert practitioners. Then, those insights fuel the development of trusted, timely educational programming that prepares legislative staff and the broader policy community to address emerging issues in health policy.



To ground our understanding of current issues in aging policy, the Series began with insight development, designed to gain valuable, informed, and diverse perspectives from the Alliance community. These learnings became the basis upon which the Alliance created the Aging in America Thought Leader Workshop and subsequent programming, including the Spotlight Webinar, Public Summit, and Congressional Briefing.

Series Overview



Insight development by listening to our community

April 30 Thought Leader Workshop

A convening of more than 50 health policy and aging policy experts and stakeholders, representing a diverse range of perspectives, for an all-day discussion about critical issues surrounding aging policy in relation to health care. The dialogue was guided by Collective Next, an expert external facilitator.

June 25 Spotlight Webinar

A public webinar focused on “core” aging policies identified in the Thought Leader Workshop, along with the best ways to keep up-to-date on the policies as they evolve.

July 23 Public Summit

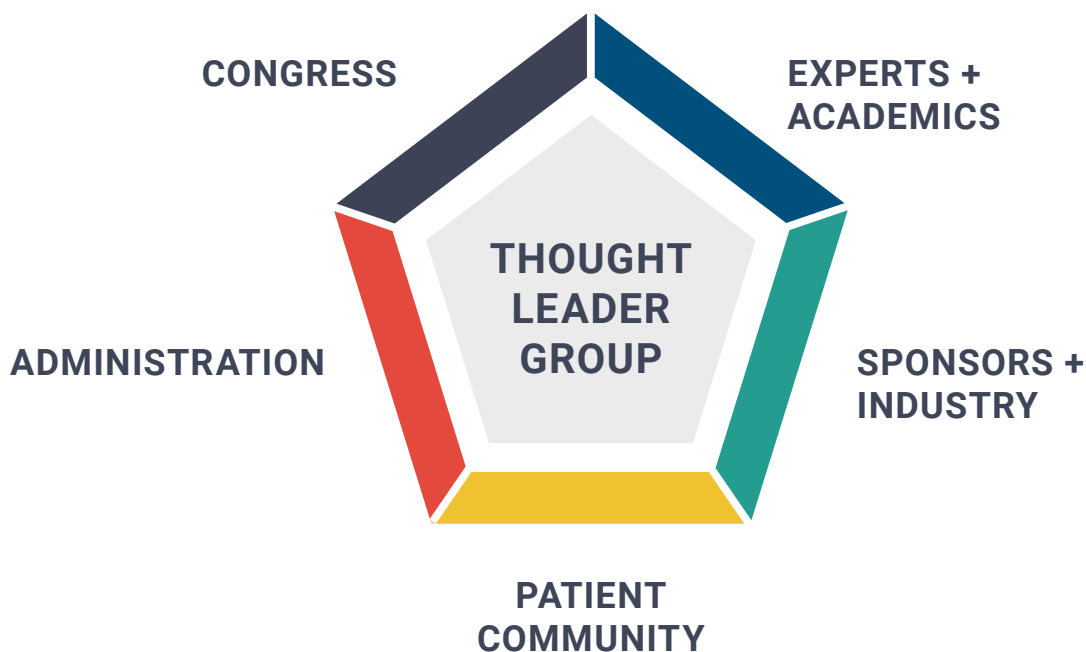
A daylong, expert-led event held in Washington, D.C., with more than 170 attendees that explored what it will take to meet the needs of an aging nation, and incorporated many of the themes and opportunities that emerged from the Thought Leader Workshop.

September 2 Congressional Briefing

A public briefing on Capitol Hill that provided a foundational conversation on aging policy for congressional staff and federal policymakers, informed by themes that emerged from the Public Summit.

III. INSIGHTS-GATHERING LISTENING SESSIONS

The first step in the Signature Series is gathering insights from the Alliance community to help inform future Series programming by highlighting areas of interest, evolution, and opportunities in aging policy, and guiding the Thought Leader Workshop design by identifying relevant potential participants and discussion topics.



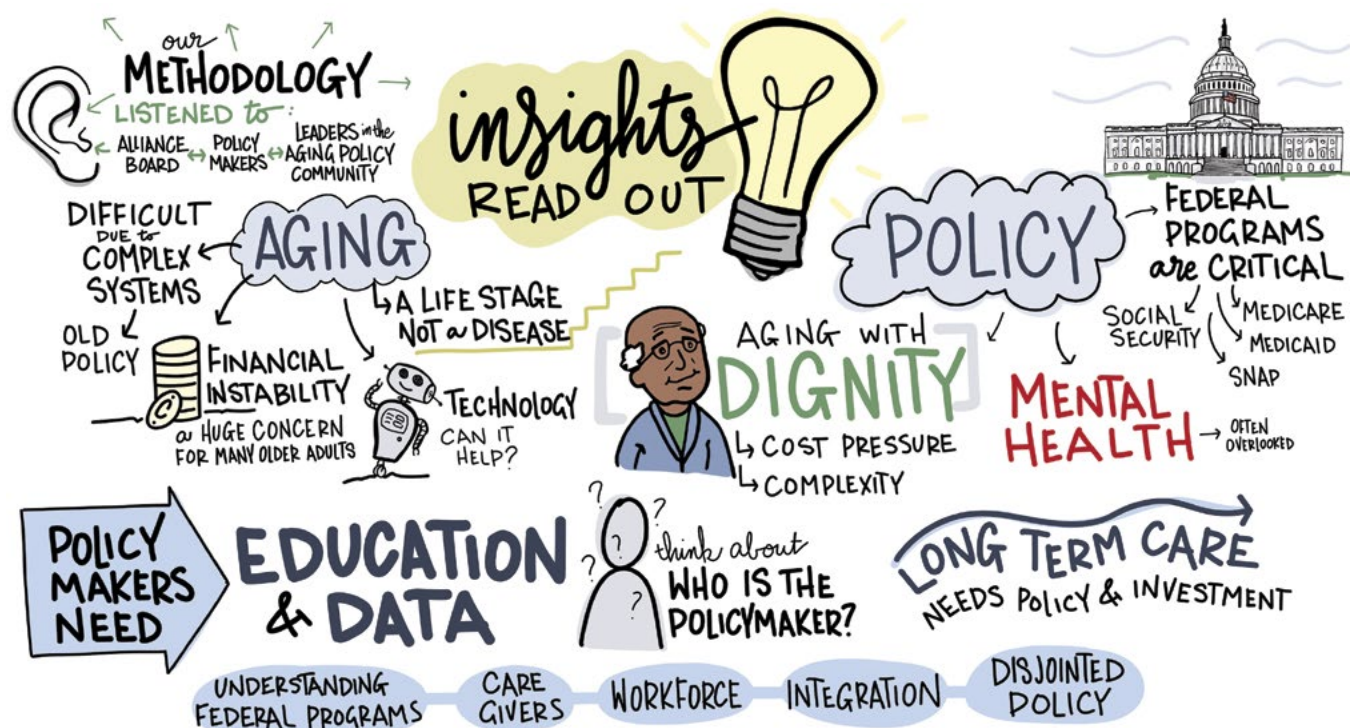
The Alliance carried out a series of listening sessions with community experts to understand the ongoing challenges and opportunities in advancing aging policy. Interviewees represented multiple points of view, including Alliance Board members, patients, policymakers, providers, and payors, as well as those in other related industries and other nonprofit organizations.

The Alliance published a report highlighting the topline themes from these listening sessions. The full report, including detailed examples and unattributed quotes, is available on the Alliance website. To view it, visit the site, click [here](#), or scan the QR code.



Scan using your mobile
device to read the full report.

Topline Themes from Insights Development



The Alliance's listening sessions with community experts highlighted ongoing challenges and opportunities in advancing aging policy.

These include the following:

Challenges

Sustainability of federal programs: Medicare, Medicaid, Social Security, and the OAA are considered essential lifelines for older adults, particularly those who are living on low incomes or are medically underserved. However, concerns about long-term funding and solvency remain as demand rises. People who are dually eligible for Medicare and Medicaid face significant difficulty navigating two separate and often uncoordinated systems, which can result in gaps in care and administrative burdens.

Cost and affordability of aging: Rising costs associated with aging—including prescription drugs, long-term care, and essential services—create substantial financial strain. Medicare's lack of coverage for dental, vision, and hearing affects quality of life. While some older adults choose Medicare Advantage for additional benefits, others find it unaffordable or ill-suited to their complex needs.

Addressing disparities: Marginalized populations, including older adults of color, women, LGBTQ+ individuals, and those in rural areas, experience disproportionate barriers to care. Limited infrastructure, cultural bias, and digital exclusion contribute to inequitable outcomes, particularly in regions where resources are scarce or systems are difficult to navigate.

Mental health and social isolation: Older adults frequently experience depression, loneliness, and isolation. Yet, existing systems often overlook or dismiss these issues as a normal part of aging. Stigma and limited access to appropriate mental health services remain significant obstacles. Chronic pain and other health conditions can compound these challenges, especially in long-term care settings.

Fragmentation of services and caregiver burden: Aging-related services are often fragmented, leaving older adults and their families to navigate a confusing array of programs and providers. This lack of integration results in inefficiencies and missed opportunities for care coordination. Caregivers frequently provide substantial support without adequate recognition, compensation, or systemic assistance.

Opportunities

Strengthening federal aging infrastructure: Ample opportunities exist to improve Medicare, Medicaid, and the OAA to better serve older adults. Improvements in coordination, benefits coverage, and funding would enable more individuals to age in place with dignity.

Improving policy education and data use: Policymakers often lack a clear understanding of how key aging programs function. Education efforts that combine clear data with personal stories can help illustrate the real-world effects of policy choices and identify where resources are most urgently needed.

Advancing health fairness: Designing inclusive policies and programs that address the unique needs of diverse populations is essential. This includes prioritizing access for rural communities, improving language and cultural responsiveness, and closing digital literacy gaps among older adults.

Expanding mental health integration: Community-based mental health services tailored for older adults can help address depression and chronic isolation. Integrated models that combine physical and mental health care are seen as key to improving outcomes and quality of life.

Building a cohesive, person-centered system: Aligning and simplifying services across sectors, such as housing, health care, and transportation, can reduce barriers. Supporting caregivers with financial relief, respite services, and training is vital to sustain the broader care ecosystem.

IV. WORKSHOP OVERVIEW

On April 30, 2025, the Alliance brought together more than 50 policymakers, aging experts, and stakeholders from across the health care and aging policy communities to explore critical issues shaping the future of aging in America. Participants engaged in a full day of structured dialogue designed to equip them with the knowledge needed to make well-informed decisions. The sessions, which were professionally facilitated by consultancy firm Collective Next, incorporated human-centered design principles and inclusive learning strategies that ensured participants shared a common language, all voices were heard, and outcomes reflected the complexities of aging and aging policy.

Given the participants' diverse backgrounds, the day began with a reflective "You at 80" exercise. Participants envisioned their ideal lives in older age and considered living arrangements, daily routines, health priorities, and support systems. This grounding activity helped center the day in personal reflection and emphasized the individuality and complexity of aging experiences.

To deepen this exploration and consider diverse perspectives, participants then read detailed personas representing different aging experiences. By analyzing how current systems serve—or fail to serve—these personas, participants surfaced challenges such as affordability cliffs, geographic disparities, and administrative barriers. They also reflected on shared values, points of empathy, and connections between lived experience and policy implications. The session highlighted limitations of today's patchwork approach and underscored the need for more inclusive, coordinated, and person-centered systems.

In the afternoon, participants translated their insights into action. Half co-wrote a congressional curriculum on aging policy by outlining its structure, learning goals, and key resources to better equip policymakers. The other half focused on designing an ideal Summit on Aging event by identifying fresh topics, inspiring speakers, and overlooked conversations that such an event should revisit. Together, these outputs aim to elevate the national dialogue on aging policy and shape future Alliance programming with intention and impact.



“You at 80” Exercise

As part of the workshop’s opening, participants engaged in a self-reflective exercise to envision their lives at age 80. This activity served as a personal entry point into broader discussions about aging and grounded the conversation in the attendees’ personal experiences and aspirations. Participants were invited to consider where they would live, how they would remain engaged in their communities, and what types of support they might need. This helped foster a deeper connection to the themes explored throughout the day.

Participants’ reflections revealed common patterns. Many envisioned a future in which they continued to live independently, though often without fully considering the systems or supports that they might need to remain independent. For others, the exercise revealed a lack of familiarity with existing aging services or how to navigate them. Some noted the discomfort that can surround conversations about aging, which could cause unwanted delays and a further limiting set of planning options.

Several participants recognized that their assumptions about the aging experience were shaped by personal circumstances such as having family nearby or access to financial resources. These conditions are not guaranteed for everyone. Even among those with means, participants acknowledged that navigating existing systems could be difficult and especially in the absence of coordinated support.

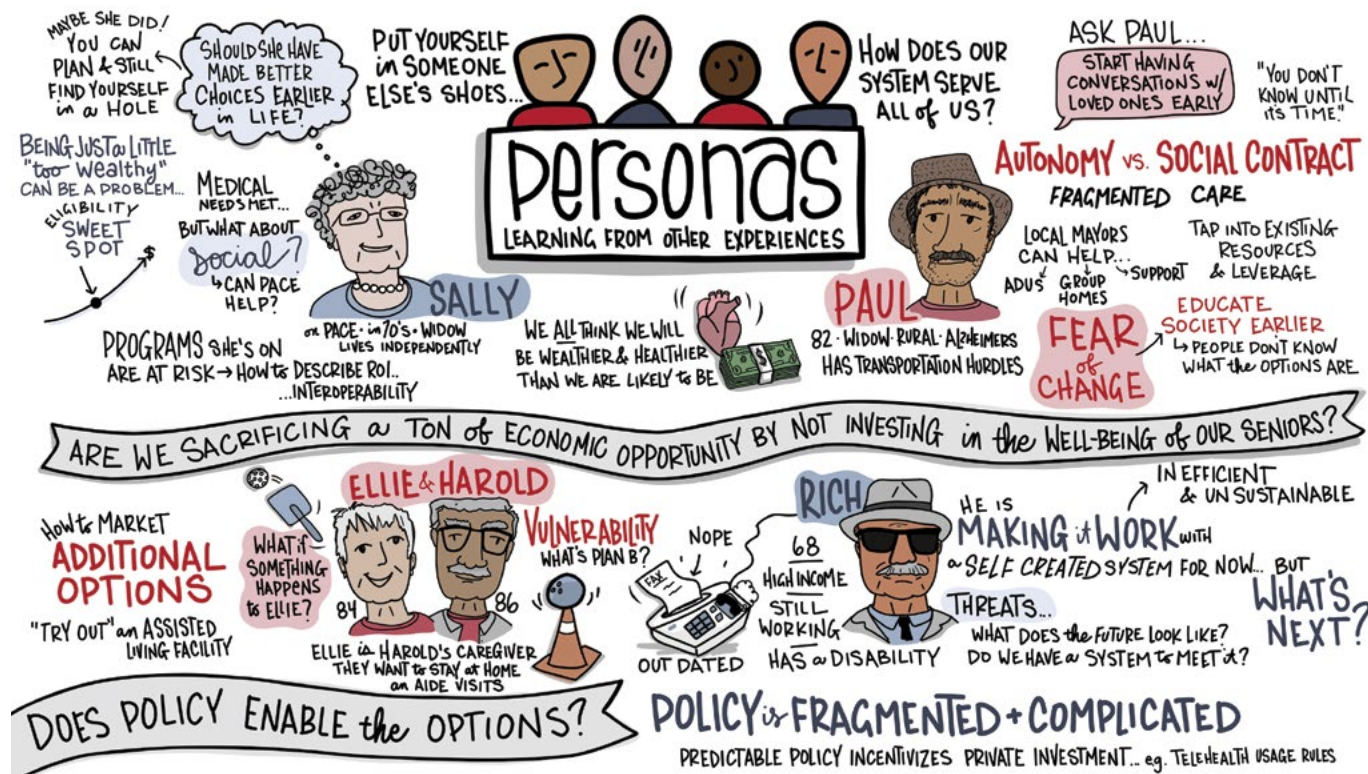
The “You at 80” exercise surfaced several important insights for aging policy:

- **Encouraging earlier planning:** Participants emphasized the value of tools and approaches that help individuals and families plan for aging before a crisis arises. Integrating planning resources into familiar touchpoints, such as health care visits or retirement planning, could make this process more approachable.
- **Simplifying navigation:** Many participants lacked knowledge about available services and found the systems difficult to understand. Designing programs that are more transparent and easier to navigate could empower older adults to make more informed decisions.
- **Reframing the role of health care:** Rather than imagining health care as a person’s focal point at 80, participants described a desire for it to function in the background—reliable and supportive, but not intrusive. This perspective emphasizes the importance of designing care models that enable autonomy and engagement, and that support individuals in living the lives they choose.

Persona Exploration: Put Yourself In Someone Else's Shoes

As part of the Alliance's Thought Leader Workshop on aging, the personas exercise invited participants to engage with fictional but representative profiles of older adults. The Alliance worked with its community of experts to design personas that invited productive comparisons between participants' experiences and those of others navigating aging in America today. The Alliance also designed these personas to help participants adopt other points of view and examine how policy affects others' lives.

The exercise aimed to surface stakeholder assumptions and identify system gaps that limit access to people's desired quality of care. Through these narratives, participants considered how personal hopes for autonomy and stability in aging may not align with the fragmented, often inadequate supports available today. The exercise encouraged empathy, sparked debate, and opened space to reimagine what more dignified and responsive aging policy could look like.



Persona Overviews

- **Sally is a 76-year-old widow who lives independently.** She has a low income and is dually eligible for Medicare and Medicaid. Sally lives alone but receives support from the Program of All-Inclusive Care for the Elderly (PACE) program and her family. She is determined to age in place while maintaining dignity and continuity with her care team.
- **Rich is a 68-year-old professional with disabilities who is still working.** He has a high income and relies on Medicare and specialized transportation services. Despite his financial resources, Rich faces significant challenges with care coordination and maintaining independence while managing his health needs.
- **Harold and Ellie are an older couple with an array of support needs.** Harold is 86 and requires ongoing care, while Ellie, 84, is his wife and primary caregiver. They are middle-class and covered by Medicare. Together, they navigate the demands of caregiving, value social engagement, such as playing board games with friends, and hope to remain in their home for as long as possible.
- **Paul is an 82-year-old man with Alzheimer's disease living in rural America.** He has a modest income and depends primarily on Social Security and Medicare. Living in a sparsely populated area, Paul faces limited access to specialized care, inadequate medical infrastructure, and increasing isolation as his cognitive decline progresses.

Key Findings

- **Debates ensued on wealth, autonomy, and mental health:** Some participants saw Rich as successful, while others thought he was underserved. Sally's persona sparked conversations about equity and access, with many participants noting that her experience felt "lucky" rather than replicable. Mental health and social connection emerged as essential but inconsistent across profiles.
- **PACE identified as a gold standard, but not fully realized for all communities:** Participants viewed Sally's access to the PACE program as a best-case scenario. However, they questioned the feasibility of scaling such comprehensive care for more people. The discussion raised a critical policy dilemma: should systems aim to offer everyone a Cadillac-type solution, or simply ensure every older adult gets a reliable and supportive Hyundai?
- **Systems should allow for risk in aging:** A consistent theme across discussions was the importance of preserving dignity, even when it involves risk. Many participants emphasized that autonomy includes the right to take risks, such as living independently or making unconventional care decisions. A key quote from one participant summed it up: "Everyone deserves the right to fall." This idea invited a lengthy conversation about how much risk was the right amount, as well as about the costs and societal impacts associated with a system that permits such risk.

Themes Across the Personas

- **Fragmentation of support systems:** All personas highlighted a lack of coordination in aging services. Even well-resourced individuals like Rich struggled to navigate care providers. Many participants identified a need for care navigators, better-managed systems, and stronger support structures.
- **Lack of policy for emotionally and socially rich aging:** Beyond medical support, participants noted a lack of attention to emotional well-being and social connection. Some personas depicted individuals with limited opportunities for meaningful engagement and mental health support, underscoring the need for more holistic policy approaches.
- **Call for care navigators and human-centric design:** There was widespread agreement that aging systems must be easier to use. Suggestions included managed care models with built-in coordination, community-based resources, and design practices centered on dignity, autonomy, and agency.

V. CO-CREATING A CONGRESSIONAL CURRICULUM

Congressional staffers and other policymakers widely agreed that more education on aging policy was needed. The breadth of programs, issues, and stakeholders involved in aging policy tends to make the idea of systemic reform overwhelming. Because the topic spans health care, housing, caregiving, and economic policy—and affects nearly every American—policymakers frequently expressed uncertainty about where to begin or how to evaluate the many available resources.

A curriculum informed by a broad cross-section of stakeholders can help close this knowledge gap and enable more informed policymaking. It can also illuminate the real-life experiences of older adults, clarify federal and state program structures, and help staffers anticipate the long-term policy implications of a rapidly aging population. This initiative aligns closely with the Alliance's mission to inform and educate policymakers on key health and social policy issues in a clear, nonpartisan way.



Three working groups, three approaches to educating Congress

Working Group 1

Focused on building aging literacy by examining demographic shifts, the intersection of clinical and social health, and where health and aging take place. They emphasized the importance of defining the population of interest and provided an overview of the issue, including key programs and the financial impact of aging. The group highlighted the importance of integrating economic, social, and health data, and suggested using accessible resources to support learning.

Working Group 2

Focused on fostering aging awareness by using personas and case studies to highlight the lived experiences of older adults. They examined how we age, how it is socially perceived, and aimed to identify what is working—and what is not—in the current landscape. The group discussed fragmentation in the health care system and emphasized the need for better integration and human-centered design. Their approach centered on clarifying how different components of aging policy interact and encouraged the use of stakeholder maps, infographics, and glossaries to make the information more accessible and actionable.

Working Group 3

Focused on contextualizing aging policy through a historical and future-oriented lens. They explored where aging policy has been, where it currently stands, and the challenges and opportunities ahead. The group emphasized the complexity and interconnectedness of the aging system and highlighted the need for strategic leadership and proactive planning. They also discussed the importance of level-setting, shared definitions, and identifying key stakeholders in the field. Their recommendations included using case studies and personas to illustrate successes and barriers, and promoting asynchronous learning tools to enhance accessibility and engagement.

	GROUP 1	GROUP 2	GROUP 3
Curriculum Chapter Headings	<ul style="list-style-type: none"> • Demographics – understanding the aging population • Economy of an aging population • Caregiving structure + supports 	<ul style="list-style-type: none"> • Overview / Landscape (how we age/aging in America) • Inventory of relevant federal programs, history – how did we get here? • Projections – what's coming? • Considerations for Congress (policy concerns) 	<ul style="list-style-type: none"> • Where we've been, where we are, where we're going • Aging Expansion Pack – not just health care • Challenges & opportunities / Future of aging/aging policy
Learning Goals	<ul style="list-style-type: none"> • Health is clinical + social • Health happens in all areas • Understanding what aging is (intergenerational aging) • Tackles ageism & stigmas 	<ul style="list-style-type: none"> • Aging awareness → personas • What is working? • What are the challenges? • Financing • Access • Care gaps • Incentives & misalignments • People are living longer 	<ul style="list-style-type: none"> • Creating an environment where senior leaders model accountable learning • Grounding in basics to be able to ask deeper questions (e.g., why?) • Understanding diversity & contemporary realities • Understanding the broader relationship of government to aging • Bring the experience of older people to the discussion • Debrief to map aging to health
Learning Outcomes	<ul style="list-style-type: none"> • Aging literacy → staffers have a core understanding 	<ul style="list-style-type: none"> • Fragmented health care system → integration • Necessity of programs • The needs of older adults are multidimensional • Aging is all of us → universal 	<ul style="list-style-type: none"> • Understand the complexity and interrelated issues • Have practical tools to navigate connections as they relate to policy • Understand complexity • Gaps/roadblocks/opportunities • Cross-sector mapping

101	<ul style="list-style-type: none"> • Overview of the issue • Defining populations (case studies) • Why you need to care • Aging policy (Social Security Act, Older Americans Act, etc.) • Role of public policy in supporting aging 	<ul style="list-style-type: none"> • You at 80 • Case studies of constituents • Discussion of federal programs 	<ul style="list-style-type: none"> • Level setting • Definitions • Who's who • Reframe: What aging means, the value of aging • History of policy
201/301	<ul style="list-style-type: none"> • Breaking down programs • Financial impact of aging • Monthly/ongoing health care committees on the Hill • Inflation Reduction Act 	<ul style="list-style-type: none"> • Modules • Demographics • Incentives misaligned • Committee jurisdiction (301) • Financial security • Role-specific learning 	<ul style="list-style-type: none"> • Future: upcoming challenges + opportunities • Case studies • What worked? • What were the unintended consequences, if any?
Resources	<ul style="list-style-type: none"> • Data • Economy of aging • Well-supported aging support systems • Stakeholder map • Embodied Life (experience it) 	<ul style="list-style-type: none"> • Stakeholder map • Glossary • Infographics • Podcasts 	<ul style="list-style-type: none"> • Case studies • Utilize personas (successes? with challenges) • Meeting people where they are (e.g., podcasts) • Board games? / gamify – Game of Life – Expansion Pack • Tabletop • Conversation cards • Future casting
Curriculum Development & Communication	<ul style="list-style-type: none"> • Podcasts • Gamifying 	<ul style="list-style-type: none"> • Podcasts • Webinars • Workshops • Short videos 	<ul style="list-style-type: none"> • Accessible bits of asynchronous learning • Gamifying • Mindful of aging – members' ageism • Intern-centered outreach

VI. CO-CREATING A SUMMIT

The 2025 Summit on *Aging in America*, the anchor event of this year's Signature Series, took place on July 23, 2025, in Washington, D.C. In preparation for the Summit, participants at the Thought Leader Workshop collaborated in breakout groups to co-create their ideal summit experience. Their ideas helped shape the event's structure, tone, and content. This collaborative process reflects the Alliance's commitment to delivering clear, nonpartisan educational programming that informs policymakers, engages the public, and fosters dialogue on the evolving needs and opportunities in health and aging policy.

Working Group 1

Emphasized the need to reframe public understanding of aging by making personal experiences more accessible through tools like virtual reality and gamification. They recommended engaging younger audiences to build empathy and awareness, and suggested centering events around the idea that aging affects everyone. The group also underscored the importance of addressing systemic challenges and warned that without a comprehensive approach, efforts to improve aging policy would remain ineffective.

Working Group 2

Focused on bringing a global perspective to aging, emphasizing the value of learning from international models and culturally grounded approaches. They recommended integrating policy discussions with personal storytelling and exploring care systems beyond traditional settings. The group highlighted the importance of understanding the role of young people in shaping future aging experiences and suggested drawing inspiration from academic institutions and underrepresented communities to inform event content.

Working Group 3

Proposed showcasing innovation by featuring cutting-edge tools, demos, and industry case studies. They emphasized pairing stakeholders with lived experience alongside experts to ground discussions in real-world impact. The group encouraged moving beyond problem identification to envision bold, forward-looking solutions and formats. They also suggested using creative session formats to sustain engagement and spark new ways of thinking about aging policy.



	GROUP 1	GROUP 2	GROUP 3
What is exciting?	<ul style="list-style-type: none"> • Virtual Reality / Gamification • Younger people understand aging issues • Passionate, diverse perspectives • Learning from each other • Hearing from those impacted • Caregiver / care coordinators / case manager perspective • Paper vs. reality 	<ul style="list-style-type: none"> • International focus • Policy + storytelling • Caregiver space • Active at 80 • Whole-life spectrum • We are all aging • Innovative approaches • Reframing aging • Culture + longevity • Personal stories 	<ul style="list-style-type: none"> • Showcasing what's new (demos, industry) • Actionable information from insiders • Talking about barriers we can break down • Helping people connect dots between aging + reality • Explaining the planning that goes into preparing for life post-60 • Respectful perspective debates • Making people get out of hypotheticals → you are aging right now!
Who Should Speak? Who has Star Power? Subject Matter Expertise?	<ul style="list-style-type: none"> • Internal Medicine Practitioners • Geriatrics • Nursing Homes 	<ul style="list-style-type: none"> • Ask 25–33-year-olds: “What do you want life at 80 to be like?” • Youth voices • “AHA” Moment • Minority leaders • Experts in aging, community, services, and youth • Momentum speakers • Someone unexpected • People are already doing the work in their community 	<ul style="list-style-type: none"> • Star power = real people • Lived experience is the expertise • Expertise outside of health policy (aging beyond just med. care) • People who worked on major state plans (New York, California) • Caregivers play a huge role as experts + speakers • Bipartisan conversations • Older adults, homebound • Modern-day caretakers • Cost analysis, scoring aging policy

What is cutting edge?	<ul style="list-style-type: none"> • Virtual Reality / Gamification • Making lived experience accessible to the audience • Case studies / Personas • State Breakouts: What's happening in different states • Multi-generational perspectives • Caregiver perspective • Marginalized communities perspectives 	<ul style="list-style-type: none"> • Never seen a show about a nurse home • Hospital / ER encouraged as a career • Technology → Bed sensors • Biometric wearables • Someone outside D.C. • Dementia experience • A day in the life of a person and their caregiver 	<ul style="list-style-type: none"> • Exciting case studies • Stakeholders paired with/ case studies • The “incidentals” → what is good for the aging population that helps everyone? • Connecting Make America Health Again (MAHA) to the aging economy • Dynamic Congressional Briefing Office scoring
What is the new conversation?	<ul style="list-style-type: none"> • “Who ages?” Everybody ages, and policies impact everybody • Long Term Services and Support (Non-Medical) • Income thresholds and the economic reality of program eligibility • Day with/ access to services vs. no services (Interactive) • Aging in Rural vs Urban America 	<ul style="list-style-type: none"> • Youth inclusion • Visit to the University of Northern Iowa • Academic structure • Innovative centers • Managing risk factors • Celebrate birthday 	<ul style="list-style-type: none"> • Bigger than issues + gaps → envisioning NEW way of aging • Lived experience storytelling • Long-term services are separated out • Meta → how do we talk about aging?
What was missing? What haven't you seen in DC?	<ul style="list-style-type: none"> • Not addressing aging = filling a bucket with a hole in the bottom • Call to action • Solutions-oriented problem solving 	<ul style="list-style-type: none"> • Youth-focused – tie into journey • Never seen running home & “boy to stew” • Never going to get old • Interracial or mixed demographic “how work across” 	<ul style="list-style-type: none"> • Missing panel: what are the dream “carte blanche” scenarios for aging? • Lived experience of middle / lower class • Scaling up PACE • Holistic Aging • Social contracts & nation of responsibility around the aging population • How do we pay for long-term care? • Humor & stillness are missing • “The forgotten middle” • Conversation about “low-hanging fruits”

VII. SPOTLIGHT WEBINAR



THE ALLIANCE SIGNATURE SERIES

WEBINAR: Top 5 Things to Know About AGING IN AMERICA

Rob Lott, M.S.
Senior Deputy Editor, Health Affairs
Moderator

Abby Cox, M.A., MSW
Senior Director of Aging Policy, ADvancing States

Darin Gordon, B.S.
Founding Partner, Speire Healthcare Strategies

Tricia Neuman, Sc.D.
Senior Vice President, Executive Director for Program on Medicare Policy, KFF

Rebecca Vallas, J.D.
CEO, National Academy of Social Insurance

Wednesday, June 25, 2025 | 1:00 - 2:30 p.m. ET | Virtual

ALLIANCE FOR HEALTH POLICY

Speakers:

Rob Lott, M.S.

Senior Deputy Editor, Health Affairs (Moderator)

Abby Cox, M.A., MSW

Senior Director of Aging Policy, ADvancing States

Darin Gordon

Founding Partner, Speire Healthcare Strategies

Tricia Neuman, Sc.D.

Senior Vice President, Executive Director for Program on Medicare Policy, and Senior Advisor to the President, KFF

Rebecca Vallas, J.D.

CEO, National Academy of Social Insurance

At the Alliance's Thought Leader Workshop in April, participants identified four policies and programs that were core to older adults' ability to afford and access care. They included:

- Medicare
- Medicaid
- Older Americans Act (OAA)
- Social Security Act (SSA)

These four policies became the foundation for the Alliance's first educational event in the series. On June 25, 2025, the Alliance hosted a spotlight webinar titled "Top Five Things to Know About Aging in America: Insights for the Health Policy Community" to dive deeper into the "must-know" elements of each policy, identifying key trends, policy developments, and innovations shaping the future of aging in America.

A recording of the full webinar is available on the Alliance website. To view it, visit the site, click [here](#), or scan the QR code.



Scan using your mobile device to find the video of the full conversation

Key Quotes:

On Medicare:

"Medicare is a lifeline. Medicare, along with Social Security, provides health and financial security to nearly 70 million people... Medicare today enjoys very broad public support. It is popular among the general public and among seniors."

- Tricia Neuman, Sc.D, KFF

On Medicaid:

"[Together, Medicaid and Medicare] programs are not just cornerstones of our health system. They are lifelines for millions of adults and people with disabilities... People want to go home and live in their communities. They want to stay connected, maintain control over their lives, live in familiar environments. But most of all, we need to help them with their daily activities... Medicare doesn't cover those long-term services. Medicaid does."

- Darin Gordon, Speire Healthcare Strategies

On the Older Americans Act:

"The Older Americans Act offers a broad range of community-based programs intended to keep people in their homes and in their communities... It offers many critical programs so that people can have the ability to live independently, from nutrition programs to caregiver support and senior centers."

- Abby Cox, M.A., MSW, ADvancing States

On Social Security:

"Social Security has really been the foundation of our social insurance system. It provides a suite of insurance that protects nearly all American workers and families in the event of retirement, disability, or death of a breadwinner... Without Social Security, about four in ten Americans in their older years would be poor. In today's world, it's about one in ten."

- Rebecca Vallas, J.D., National Academy of Social Insurance

VIII. SUMMIT ON AGING IN AMERICA

The 2025 Signature Series Summit on Aging in America, held on July 23, 2025, convened a diverse group of leaders, including policymakers, researchers, practitioners, advocates, and individuals with lived experience, to examine the shifting realities of aging across the United States. The program explored changing demographics, the diversity of aging experiences, and the growing complexity of delivering effective support for older adults and their families.

Panel discussions addressed key challenges, including financial security, access to care, workforce participation, and the integration of health and social services. Speakers emphasized the importance of coordinated approaches across sectors and levels of government, along with continued innovation and cultural change to meet the needs of a rapidly aging society.

Speakers shared real-world examples, emerging best practices, and personal stories, drawing on both evidence and lived experience to inform future action.

The sessions included:

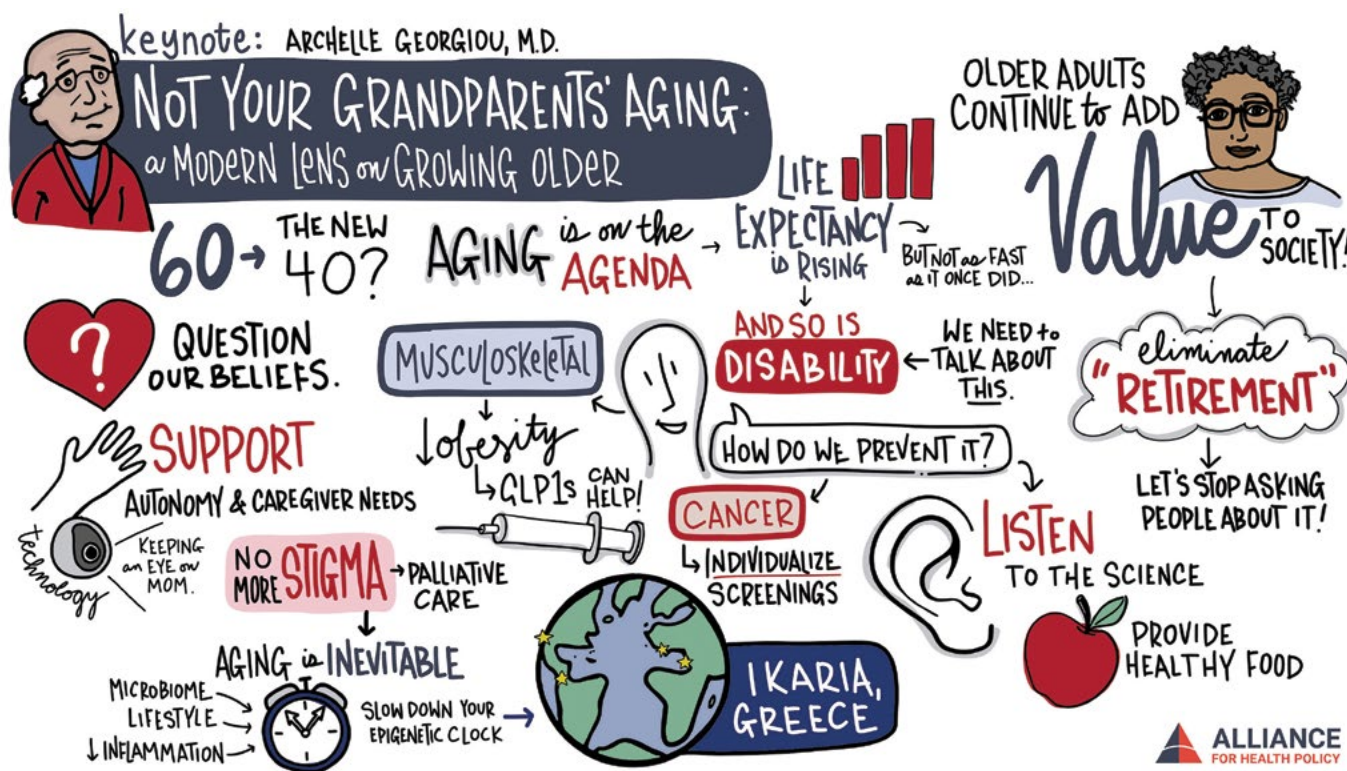


Keynote: Not Your Grandparents' Aging: A Modern Lens on Growing Older

Dr. Archelle Georgiou, M.D., Strategic Advisor and Health Journalist, Georgiou Consulting

Dr. Georgiou discussed changing patterns of aging in America, highlighting longer lifespans alongside more years lived with disability. She noted challenges related to preventive care, chronic conditions, and questions around current approaches to cancer screening and end-of-life care. She also described the potential of supportive technologies, including remote monitoring, to help maintain autonomy and reduce caregiver needs.

A recording of the full keynote is available on the Alliance website. To view it, visit the site, click [here](#), or scan the QR code.



Scan using your mobile device to find the video of the full conversation

Panel 1: Aging Today: Who Are We Creating Policy For?

Panelists:

Jeannie Fuglesten Biniek, Ph.D., M.A.

Associate Director, Program on Medicare Policy, KFF (Moderator)

Natalie Kean, J.D.

Director, Federal Health Advocacy, Justice in Aging

Alana D. Knudson, Ph.D., Ed.M.

Director, NORC's Walsh Center for Rural Health Analysis

"Sandra", M.S.

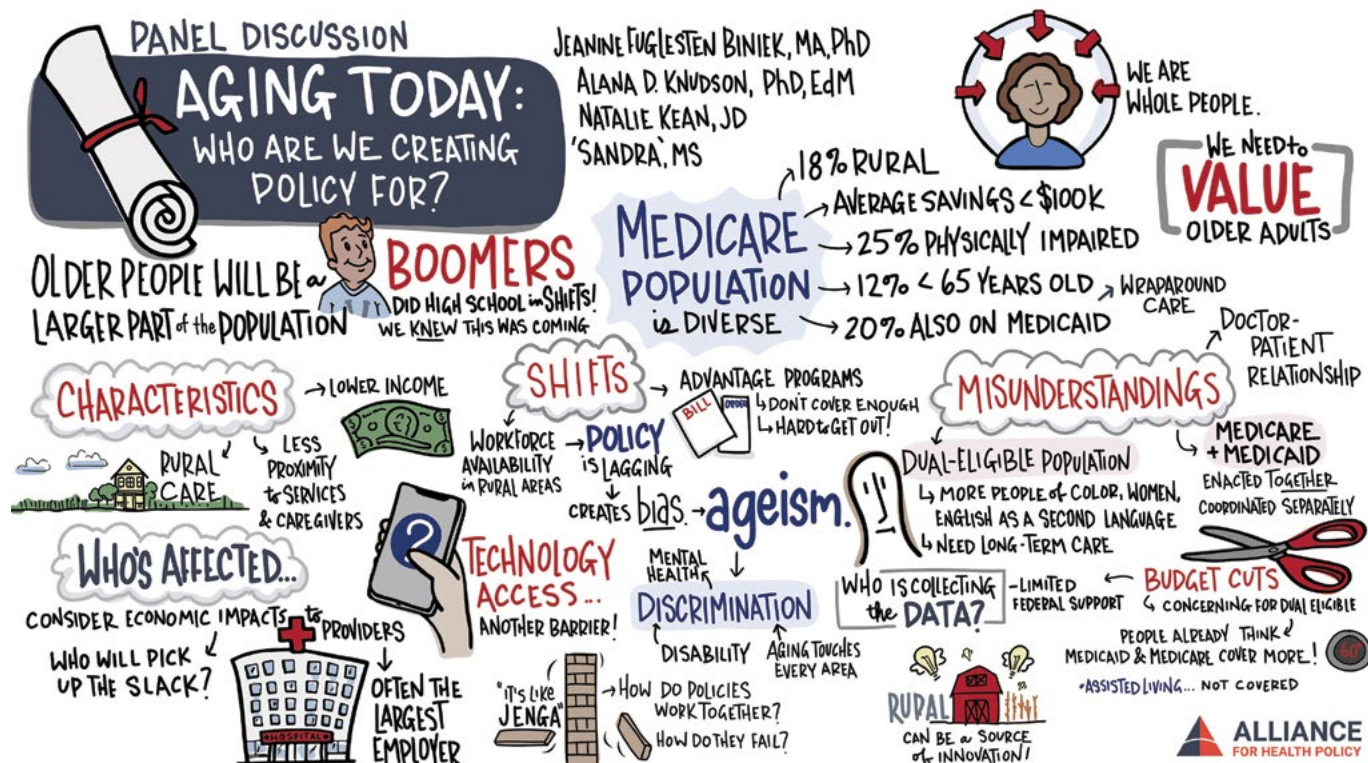
Research Participant, The People Say

Panelists discussed demographic changes, health and financial disparities, and barriers to accessing services, particularly in rural areas. The conversation also addressed home- and community-based supports, caregiver needs, and the broader social and economic factors shaping the experience of aging.

A recording of the full panel is available on the Alliance website. To view it, visit the site, click [here](#), or scan the QR code.

"Half of the Medicare population has savings of less than \$104,000, yet the average annual cost of a nursing home stay exceeds \$100,000, highlighting significant gaps in coverage and affordability."

– Jeannie Fuglesten Biniek, Ph.D, M.A., KFF



Scan using your mobile device to find the video of the full conversation

Panel 2: Executive Insights: Shaping Aging Policy for Innovation and Impact

Panelists:

Claire Sheahan, M.Sc.

President and CEO, Alliance for Health Policy
(Moderator)

Vincent Andrews, J.D.

Senior Vice President, General Counsel and Chief
Compliance Officer, Corporate Affairs, Eisai Inc.

Laura Cohen, J.D.

Vice President, Eli Lilly and Company

Tim Lash, MBA

President, Gary and Mary West Foundation, West
Health Institute, West Health Policy Center

Krischa Winright, MBA

President, Medicare Advantage, Blue Cross Blue Shield
of Michigan

Speakers emphasized prevention, early intervention, and timely access to care as central to better outcomes. They highlighted innovation in therapies, delivery, and payment, along with the rise of accelerated aging, and advances in data and technology for earlier detection. The discussion also pointed to value-based models and AI as opportunities to improve efficiency and support future-focused care for aging Americans.

A recording of the full panel is available on the Alliance website. To view it, visit the site, click [here](#), or scan the QR code.

"Policy needs to adapt to be more real time so that we're spending more time in the here and now to be able to get to the anticipatory, and the burden of always looking back because the batch processing mode of yesterday hasn't caught up to where we can be today."

– Krischa Winright, MBA, Blue Cross Blue Shield of Michigan



Scan using your mobile
device to find the video of
the full conversation

Panel 3: Autonomy and Aging Policy: Leveraging Behavioral Economics to Empower Early Decisions

Panelists:

David Grabowski, Ph.D.

Professor, Harvard Medical School (Moderator)

Joseph Antos, Ph.D., M.A.

Senior Fellow and Wilson H. Taylor Scholar in Health Care and Retirement Policy, American Enterprise Institute

Aparna Mathur, Ph.D.

Senior Manager, Economic Policy, Amazon

Sara Zeff Geber, Ph.D., M.A.

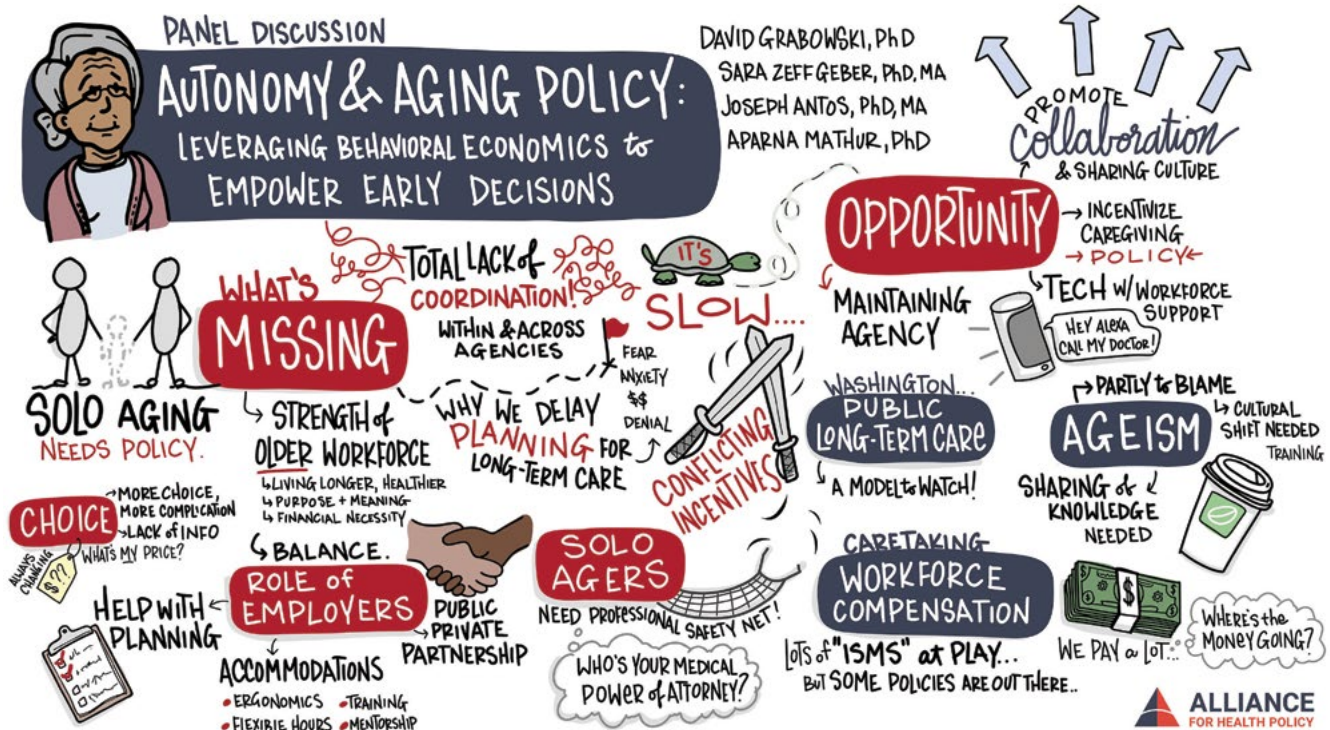
Certified Retirement Coach, Speaker, Author, and Consultant, LifeEncore

The panel focused on solo aging, workforce participation, and long-term care planning. Panelists discussed the needs of older adults without family support, the importance of early planning, and examples like Washington's long-term care insurance program. They also noted the role of technology, undervaluation of caregiving, and the impact of ageism on policy and workforce priorities.

A recording of the full panel is available on the Alliance website. To view it, visit the site, click [here](#), or scan the QR code.

"There's a role for both federal policy and technology...in letting older generations remain autonomous... especially as family structures and caregiving needs change."

- Aparna Mathur, Ph.D, Amazon



Scan using your mobile device to find the video of the full conversation

Panel 4: The Future of Aging: Bright Spots in Policy and Practice

Panelists:

Robert Espinoza, MPA

Distinguished Fellow & Senior Adviser, National Academy of Social Insurance (Moderator)

Arielle Galinsky

Chief Executive Officer and Co-Founder, The Legacy Project, Inc.

Jason Resendez

President & CEO, National Alliance for Caregiving

Diane Ty, MBA, M.A.

Managing Director, Future of Aging, Milken Institute

Panelists discussed progress and challenges in aging policy, focusing on caregiving, financial security, and social connection. Examples included Washington's Carina platform to link caregivers with older adults, the Centers for Medicare and Medicaid Services' Guiding an Improved Dementia Experience (GUIDE) model for dementia care, and caregiver training

codes. Retirement income innovations under the Setting Every Community Up for Retirement Enhancement Act (SECURE Act), intergenerational housing, and community programs were also highlighted as ways to strengthen support, reduce isolation, and improve financial stability.

A recording of the full panel is available on the Alliance website. To view it, visit the site, click [here](#), or scan the QR code.

Pull Quote: "There is both a need to better study and collect better data to evidence and understand a wide range of phenomena that are affecting older adults and all of us as we age. And there's also a significant amount of evidence that says we actually do know what works. There are good practices out there that if we were able to really resource and scale, we could have a significant impact on the lives of older adults and frankly all of us as we age."

- Robert Espinoza, MPA, NASI



Scan using your mobile device to find the video of the full conversation

IX. CONGRESSIONAL BRIEFING ON CAPITOL HILL



The banner features a teal background with a white geometric logo on the left. The text 'THE ALLIANCE SIGNATURE SERIES' is in white. The main title 'CONGRESSIONAL BRIEFING: AGING IN AMERICA' is in large white letters, with the subtitle 'Understanding Long-Term Services and Supports (LTSS)' below it. Five speaker portraits are shown in white boxes with their names and titles. The event details 'Tuesday, September 2, 2025 12:00-1:30 PM ET' and 'Rayburn House Office Building' are on the left. The 'ALLIANCE FOR HEALTH POLICY' logo is on the right.

THE ALLIANCE SIGNATURE SERIES

CONGRESSIONAL BRIEFING:
AGING IN AMERICA
Understanding Long-Term Services and Supports (LTSS)

Mike Park, J.D., MPH
Partner, Alston & Bird
Moderator

Alison Barkoff, J.D.
Hirsh Health Law and Policy Associate Professor and Program Director, GW Milken Institute School of Public Health

Kirsten Colello, MPP
Specialist in Health and Aging Policy, Congressional Research Service

Robert Espinoza, MPA
Distinguished Fellow & Senior Advisor, National Academy of Social Insurance

Anne Tumlinson, M.M.
Founder & CEO, ATI Advisory

Tuesday, September 2, 2025
12:00-1:30 PM ET

Rayburn House Office Building
45 Independence Ave SW, Rayburn Banquet Room
(2043-2045), Washington, DC

ALLIANCE FOR HEALTH POLICY

Through listening with expert stakeholders throughout this year's series, long-term services and supports (LTSS) emerged as a high-impact area for policymakers seeking to shape the future of aging policy. As America's population ages, demand for long-term services and supports (LTSS) is growing, impacting every state and congressional district. On September 2, 2025, the Alliance hosted a nonpartisan Congressional briefing to explore what LTSS includes, how it's financed, and how budget pressures are shaping policies that affect aging, caregiving, and independence. Participants gained insights into financing models, innovative state approaches, and what policymakers need to know about the evolving direct care workforce.

SPEAKERS:

Mike Park, J.D., MPH

Partner, Alston & Bird (Moderator)

Alison Barkoff, J.D.

Hirsh Health Law and Policy Associate Professor and Program Director, George Washington University Milken Institute School of Public Health

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