In 1965, 3 pieces of legislation were passed by Congress that would fundamentally change the way America served adults later in life. **Medicare provided health care services, Medicaid provided coverage for long term care and the Older Americans Act provided funding to states to provide community-based, non-clinical long term services and supports.**

President Johnson went on to proclaim in 1965, “**No longer will Older Americans be denied the healing miracle of modern medicine. No longer will illness crush and destroy the savings that they have so carefully put away over a lifetime so that they might enjoy dignity in their later years. No longer will young families see their own incomes, and their own hopes, eaten away simply because they are carrying out their deep moral obligations to their parents, and to their uncles, and their aunts. And no longer will this Nation refuse the hand of justice to those who have given a lifetime of service and wisdom and labor to the progress of this progressive country.**”

Fifty years later, to say that these programs have made an impact on an older adult’s health and independence would be an understatement. What was not known in 1965 was how important collaborations and cross referrals among these systems are. **Research now attributes as much as 40% of health outcomes to social and economic factors** (University of Wisconsin Population Health Institute). For example, food insecurity and diabetes related admissions, living conditions and asthma, and physical activity and obesity.

We know that older adults are largest consumers of health care with the 65+ population spending two times more than those ages 45-64 and three to five times more than all adults under 65. The past 50 years have brought medical care that is driven by doctors, hospitals, drug companies and skilled nursing facilities. Although social supports such as community and family assistance, good nutrition, exercise, transportation, prevention programs, safe housing, and volunteering have been less of a priority, they are a key component to achieving positive health outcomes in this population.