



Advancing Health in America

Fall 2025 Age-Friendly Health Systems Action Community: An Invitation to Join Us

Age-Friendly 
Health Systems

This content was created especially for:

An initiative of The John A. Hartford Foundation
and the Institute for Healthcare Improvement (IHI)
in partnership with the American Hospital
Association (AHA) and the Catholic Health
Association of the United States (CHA).

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What Is an Age-Friendly Health System?

Three factors that impact the care of older adults in the United States today are occurring simultaneously, and together the factors make a compelling case for health systems to better support the needs of older adults and caregivers:

- *Demography*: The number of adults over the age of 65 is projected to double over the next 25 years.ⁱ
- *Complexity*: Approximately 80 percent of older adults have at least one chronic disease, and 77 percent have at least two.ⁱⁱ Many of our health systems are ill-equipped to deal with the social complexity many older adults face.ⁱⁱⁱ
- *Disproportionate Harm*: Older adults have higher rates of health care utilization as compared to other age groups and experience higher rates of health care-related harm, delay, and discoordination. One consequence of this is a rate of ED utilization that is four times that of younger populations.^{iv}

Health systems frequently are not prepared for this complexity, and older adults suffer a disproportionate amount of harm while in the care of the health system. To address these challenges, in 2017, The John A. Hartford Foundation and the Institute for Healthcare Improvement (IHI), in partnership with the American Hospital Association (AHA) and the Catholic Health Association of the United States (CHA), set a bold vision to build a social movement so that all care with older adults is age-friendly care, which:

- Follows an essential set of evidence-based practices (known as the 4Ms);
- Causes no harm; and
- Aligns with What Matters to the older adult and their family caregivers.

The 4Ms — What Matters, Medication, Mentation, and Mobility — make care of older adults that can be complex, more manageable. The 4Ms identify the core issues that should drive all care and decision making with the care of older adults. They organize care and focus on the older adult's wellness and strengths rather than solely on disease. The 4Ms are relevant regardless of an older adult's individual disease(s). They apply regardless of the number of functional problems an older adult may have, or that person's cultural, ethnic, or religious background.¹ The 4Ms are a framework, not a program, to guide all care of older adults wherever and whenever they touch your health system's care and services. The intention is to incorporate the 4Ms into existing care, rather than layering them on top, to organize the efficient delivery of effective care.

In 2020, the COVID-19 pandemic has put an increased burden on older adults, families, and staff in health systems. Perhaps especially during this challenging time, we have found that the 4Ms can reduce burden on care teams by providing an organizing framework to focus on the most critical care for older adults.

Age-Friendly Health Systems practice the 4Ms in every interaction with older adults. IHI recognizes care locations, such as hospitals, practices, retail-clinics, nursing homes, and coming in 2025, **home health care organizations**, as Age-Friendly when they share a description of how they assess, document, and act on each of the 4Ms. This will be the first opportunity for home health organizations (as part of free standing or independent agencies or health systems) to join a national Action Community to adopt the 4Ms framework. If you have any questions regarding participation, please email ahactioncommunity@aha.org.

What Is an Age-Friendly Health Systems Action Community and How Can We Join?

An Action Community is a seven-month virtual learning opportunity to accelerate the adoption of the 4Ms with a network of teams from across different health systems. Guided by expert faculty and an “all teach all learn model,” teams participate on monthly webinars, attend a convening, and test specific changes to improve care for older adults. The Action Community is designed as an on-ramp for hospital-based teams (e.g., emergency departments, intensive care units, general wards, medical-surgical units), ambulatory care teams (e.g., primary care, specialty care), nursing home teams (e.g., post-acute and long-term care), home health organizations, and convenient care clinic teams to test and adopt age-friendly care.

If you are ready to enroll in the 2025 AHA Action Community, please complete the registration form [using this link](#).

Learn More About the Action Community!	
Please join us in one of these informational calls for a high-level overview of the Age-Friendly Health Systems movement and engaging in the Action Community.	
June Informational Webinar	June 12, 2025 11 am CT 12 pm ET Register Here
AHA Podcast	July 1, 2025 Listen Here (Link TBD)
August Informational Webinar	August 7, 2025 11 am CT 12 pm ET Registration (Link TBD)

What Happens During an Action Community?

Call Series	Details
Monthly Team Webinars	<ul style="list-style-type: none"> Team Webinars are 60-minute webinars focused on understanding the steps for testing and implementing Age-Friendly care in your setting and illustrating 4Ms care in action. Purpose: Teams learn to describe how the 4Ms will be adapted and implemented in their setting and work towards reliable delivery to all older adults.
Peer Coaching Webinars	<ul style="list-style-type: none"> Peer Coaching Webinars provide an opportunity for participants to learn from one another and share ideas, successes, and challenges related to a specific topic or setting (e.g., optimizing the EHR, developing measurement systems). Purpose: Through peer sharing, teams identify specific ideas they can test and ways to address challenges.
Ongoing Testing of Age-Friendly Interventions	<ul style="list-style-type: none"> Informed by the Monthly Team Webinars and the Guide to Using the 4Ms in the Care of Older Adults in Hospitals and Ambulatory Practices/Guide to Care of Older Adults in Nursing Homes participants will test and begin to implement specific key actions in their setting.
Recognition as an Age-Friendly Health System	<ul style="list-style-type: none"> Action Community participants work towards two levels of recognition as an Age-Friendly Health System. <ol style="list-style-type: none"> Recognition as an Age-Friendly Health System - Participant: determine how you will practice the 4Ms in your clinical care setting and submit a 4Ms Care Description. You will receive feedback from IHI on whether the description meets the minimum definition of an Age-Friendly Health System. The 4Ms Care Description for your setting type is available on IHI's website. Recognition as an Age-Friendly Health System - Committed to Care Excellence: Once your description is approved by IHI, count the number of older adults that receive 4Ms care in your setting according to your description. You will be recognized at this level after submitting three months of counts.

What Are the Benefits of Participating?

- **Act on both the 4Ms and the CMS Age Friendly Hospital Measure.** The new CMS measure advances the movement's vision to ensure that all older adults receive Age-Friendly care that is evidence-based and aligns with what matters most to the older adult. View this [resource](#) to prepare your hospital to attest to the CMS measure.
- **Improved care for older adults through the organization and delivery of evidence-based care.** At the end of the seven-month Action Community, participating organizations will have implemented specific changes of the Age-Friendly Health Systems 4Ms Framework in their hospital, ambulatory practice, nursing home, and/or home health care setting.
- **Recognition by IHI and The John A. Hartford Foundation as Age-Friendly Health Systems.** By submitting a description of how you are operationalizing the 4Ms in your setting, as well as monthly counts of the older adults reached by 4Ms care in your setting, you will be recognized and celebrated on [IHI's website](#), in press releases, and in other venues as being an Age-Friendly Health System, Committed to Care Excellence.
- **"All teach all learn" model.** By participating in the Action Community, you will have the opportunity to build relationships and learn from expert faculty, as well as peers around the country that have found innovative solutions to similar challenges and obstacles that you may face. In addition, you will have opportunities to share your organization's learning and celebrate its progress with the movement.

What Is the Cost to Participate?

There is no fee to participate in the Age-Friendly Health Systems Action Community. A health system, hospital, or practice in the US can enroll as many sites/teams as it would like to participate in testing the 4Ms. Many organizations that have participated in previous Action Communities will join and focus on spreading the 4Ms to additional care locations in their health system.

The cost of participation includes the time your team will allocate to engage in Action Community activities such as participating on monthly webinars, attending the virtual meeting, testing specific changes in their daily work, and asking questions and sharing progress in between program activities. To be recognized as an Age-Friendly Health System, your hospital and practice must submit a brief description of how they are operationalizing the 4Ms.

The Age-Friendly Health Systems 4Ms is a framework for the delivery of improved, evidence-based care and it is not a program or model to be layered on top of existing care. Given that, the 4Ms guides how existing resources are used and does not necessarily require new resources. IHI developed [The Business Case for Becoming an Age-Friendly Health System](#) to help organizations understand the potential financial benefits of becoming an Age-Friendly Health System.

What Data Submission Is Required to Participate?

To participate in the Action Community and be recognized as an Age-Friendly Health System, you will share with IHI how you plan to put the 4Ms into practice. Completion of this initial step will result in you being recognized as an Age-Friendly Health System-Participant. The 4Ms Care Description for your setting type is available on [IHI's website](#). Once your description of putting the 4Ms into practice is reviewed by IHI for alignment with an Age-Friendly Health System, you will be invited by IHI to share a count of older adults whose care includes the 4Ms each month, for three months. Completion of this step will result in you being recognized as an Age-Friendly Health System-Committed to Care Excellence.

During the Action Community, you will learn how to set up a measurement dashboard to study the impact of adopting the 4Ms in your setting. This is an important step in putting the 4Ms into practice and is critical for sustaining and spreading your Age-Friendly efforts. **However, your team will not be required to report this data to IHI.**

Partners

Age-Friendly Health Systems is an initiative of The John A. Hartford Foundation and the Institute for Healthcare Improvement (IHI) in partnership with the American Hospital Association (AHA) and the Catholic Health Association of the United States (CHA).

Questions?

If you are ready to enroll in the 2025 AHA Action Community, please complete the registration form [using this link](#).

Please do not hesitate to contact the AHA Age-Friendly Health Systems team by emailing ahaactioncommunity@aha.org. We look forward working together to ensure that every older adult always receives Age-Friendly care.

References

[i] *The State of Aging and Health in America 2013*. Atlanta: Centers for Disease Control and Prevention, US Department of Health and Human Services; 2013.

<https://www.cdc.gov/aging/pdf/State-Aging-Health-in-America-2013.pdf>

[ii] “Fact Sheet: Healthy Aging.” National Council on Aging; 2016.

<https://www.ncoa.org/resources/fact-sheet-healthy-aging/>

[iii] Abrams M, Milstein A. NAM Workshop Series on High-Need Patients. National Academy of Medicine; October 2016. <https://nam.edu/wp-content/uploads/2016/12/Taxonomy-and-care-model-presentation-FINAL.pdf>

[iv] Institute of Medicine Committee on the Future Health Care Workforce for Older Americans. *Retooling for an Aging America: Building the Health Care Workforce*.

Washington, DC: National Academies Press; 2008. 2, Health Status and Health Care Service Utilization. <https://www.ncbi.nlm.nih.gov/books/NBK215400/>