



Strategic Action Planning Group on Aging

November 29, 2016

Report to the Colorado General Assembly
and Office of the Governor

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Executive Summary

As Coloradans age, they will affect every facet of daily life for millions of residents, including the state's economy, state and local programs, and the everyday lives of countless families. Indeed, Colorado stands at the end of a demographic shift that will define it for generations.

This trend will create opportunities and challenges alike. This plan, developed by Colorado's Strategic Action Planning Group on Aging as the first of several it will issue through 2020, lays out a vision of Colorado in 2030 where all Coloradans can thrive:

- **Goal 1:** Colorado seniors are able to live and fully participate in their **communities** of choice for as long as possible.
- **Goal 2:** Older adults are able to **stay engaged** in the labor force and volunteer sector as long as they want or need.
- **Goal 3:** Colorado seniors and their families are more **financially secure** and prepared to meet the challenges of aging.
- **Goal 4:** Coloradans are prepared for the challenges of **caring for aging loved-ones** and are able to do so without endangering their own health or well-being or the health and well-being of the recipient of care.
- **Goal 5:** There are enough skilled, educated and trained **workers**, paid commensurate to their abilities and training, to meet the needs of employers and industries serving Colorado's growing senior population.
- **Goal 6:** Older Coloradans stay healthier longer through access to quality and affordable **person-centered care** that aligns with their preferences and values.
- **Goal 7:** All levels of **government** meet their commitments to support older Coloradans and their families.
- **Goal 8:** Colorado empowers and **protects** seniors from abuse, neglect, and exploitation.

SAPGA's work also settled on a series of recommendations — based upon statewide perspectives, vigorous debate, and thoughtful research — the Colorado General Assembly and the Governor should swiftly consider and implement in the 2017 legislative session, including:

- Creating of a permanent, high-level office or position within the executive branch to be accountable to and oversee the state government's work on aging issues.
- Developing a comprehensive state budget on aging to identify all state expenditures related to aging issues as a tool to help policymakers plan and prioritize at the state level.
- Committing, through existing state programs and resources, to protect older Coloradans from abuse, fraud, and neglect — and ensure all can age with dignity in the Centennial State.
- Empowering and supporting caregivers as they work to help aging parents, family, friends, and neighbors.
- Bolstering Coloradans abilities to save for retirement and support themselves after stepping back from the workforce or full-time employment.
- Implementing strategies to ensure Colorado has a workforce to support the comprehensive needs of aging Coloradans; and,
- Supporting local communities' efforts to adapt to aging Coloradans needs, including transportation networks and building design.

Strategic Action Planning Group on Aging Members

James L. Riesberg (chairman) of Greeley, to serve as a consumer

Kylie Ann Agnew of Denver, to serve as a representative of private, public and community-based health care and long-term care, service or support provider for older adults, appointed

Claire E. Anderson of Colorado Springs, to serve as a representative of nonprofit organizations representing or advocating for older adult populations

Rob Andresen-Tenace of Parker, to serve as the designee of the Executive Director of the Colorado Department of Transportation

Donna L. Baros of Denver, to serve as a representative with extensive knowledge of, or experience with, state and local budgets and fiscal policy, or who is a representative from nonprofit organizations that have experience with fiscal and statewide policy issues

John R. Barry, MBA, MSW of Littleton, to serve as the designee of the Executive Director of the Colorado Department of Health Care Policy and Finance, appointed

Karen M. Brown of Arvada, to serve as a consumer

Wade B. Buchanan of Denver, to serve as a representative with extensive knowledge of, or experience with, state and local budgets and fiscal policy, or who is a representative from nonprofit organizations that have experience with fiscal and statewide policy issues

Honorable Steve Frazier Child of Snowmass, to serve as a county commissioner

Gregory Peter Coopman of Monument, to serve as a representative of private, public and community-based health care and long-term care, service or support provider for older adults

Harry Dale Elliott, Sr of Commerce City, to serve as a representative of private, public and community-based health care and long-term care, service or support provider for older adults

Edwin Douglas Farmer of Highlands Ranch, to serve as a representative of private, public and community-based health care and long-term care, service or support provider for older adults

Key Provisions of House Bill 15-1033 Legislative Charge

There is established a Strategic Action Planning Group on Aging for the purpose of studying and producing a comprehensive Strategic Action Plan on Aging in Colorado through the year 2030. The Planning Group shall examine the impacts, both positive and negative, of the aging demographic shift through the year 2030 on:

- (I) The economy, workforce, and businesses and market-based products and services;
- (II) State and local revenue budgets and fiscal policies;
- (III) Medicaid and other safety-net programs and the collateral impact on other nonrelated state programs;
- (IV) Family caregiving and private and public options for long-term care, services, and supports;
- (V) The effects of potential federal entitlement reforms on Colorado; and
- (VI) Transportation services and infrastructure.

The Planning Group shall consider or incorporate information, recommendations, and best practices from past and current study groups, foundations, state agencies, local governments, and initiatives proposed or implemented in other states, as well as from state and national commissions and study groups on aging and long-term care, services, and supports.

Susan M. Franklin of Denver, to serve as a representative with extensive knowledge and expertise in long-term care, services and support and who is not a provider of such services

Mindy R. Kemp of Thornton, to serve as the designee of the Executive Director of the Colorado Department of Human Services

Christian M. Itin, MSW, PhD of Centennial, to serve as a representative of an institution of higher education in a field related to older adult populations

Linda M. Mitchell of Denver, to serve as a representative of private, public and community-based health care and long-term care, service or support provider for older adults

Benjamin Moultrie of Aurora, to serve as the designee of the Colorado Commission on Aging

Muriel Jean Nofles of Aurora, to serve as a consumer

David R. Norman of Grand Junction, to serve as a representative with extensive knowledge of, or experience with state and local budgets and fiscal policy, or who is a representative from nonprofit organizations that have experience with fiscal and statewide policy issues

Jennifer L. Schaufele of Greenwood Village, to serve as a representative of an area agency on aging as described in CRS 26-11-204, appointed

Sallie Thoreson, to serve as the designee of the Executive Director of the Colorado Department of Public Health and Environment

Sharron D. Williams of Denver, to serve as a representative of the business community

Key Provisions of Legislative charge (continued)

Recommendations shall include at least:

- (I) Options to address the long-term impact of the demographic shift on Colorado citizens, state government, and the private sector;
- (II) Options to address disproportional regional demographic shifts in older adult populations;
- (III) Options to improve financial security and retirement preparation for the older adult population;
- (IV) Recommendations to enhance access to services and public education on aging issues;
- (V) Options to strengthen and improve service quality and infrastructure for long-term services and supports to better enable the services and supports to meet future demand;
- (VI) Options to reduce administrative and service delivery costs of public and private long-term services and supports while maintaining service quality;
- (VII) Administrative and regulatory reforms needed to more cost-effectively organize state agencies to implement state programs and services;
- (VIII) Private sector options for state-based long-term care, services, and supports;
- (IX) Options to extend and improve other services and supports that would allow individuals to remain in their residences and communities for as long as possible;
- (X) Options to improve the accessibility and sustainability of affordable housing and transportation services;
- (XI) Options to improve caregiver supports and mitigate both the financial and nonfinancial impacts of caregiving on patients, caregivers, businesses, and the state;
- (XII) Projections on the economic, fiscal, and personal impacts of implementing or not implementing the recommendations. This analysis should also consider the nonfinancial and quality-of-care impacts of the recommendations on Colorado's long-term care, services, and supports; healthcare infrastructure and workforce; aging; and caregiver populations.
- (XIII) Possible legislation for consideration by the general assembly in order to implement the planning group's recommendations and achieve its stated goals; and
- (XIV) Possible regulatory changes to be offered to state departments in order to implement the planning group's recommendations and achieve its stated goals.

Introduction

Older adults are a vital part of Colorado’s communities. Their lifetimes of experience, knowledge, and wisdom are assets to our state. The number of Coloradans aged 65 and over is projected to rise by 1 million — an increase of 133 percent — by 2050. Contrary to conventional thinking, these demographics do not spell certain disaster. Rather, they offer Colorado an opportunity to ensure it is a great place where all Coloradans — regardless of age — can thrive.

Colorado is actively working to prepare for this fundamental demographic shift. Colorado lawmakers, with the support of the governor, created the Strategic Action Planning Group on Aging (SAPGA) in 2015 and charged its 23 members with developing a strategic plan to help Colorado prepare for aging through 2030. SAPGA’s members represent a diverse array of experts on issues vital to Colorado’s aging population and its emerging needs. They represent communities across the state — from Grand Junction to Denver and Colorado Springs to Greeley.

Living and aging well can mean many different things depending on the diversity of individuals and communities, but many agree it is the state of being surrounded by people they value, in a community where they belong, and with opportunities to make meaningful contributions. The Centers for Disease Control and Prevention defines aging in place as “the ability to live in one’s own home and community safely, independently, and comfortably, regardless of age, income, or ability level.”¹

Since its inception, SAPGA has concentrated on what it means to age well in Colorado. Through research and review of other state’s best practices and plans, SAPGA focused its work on a series of key areas, including workforce development, health and wellness, transportation and infrastructure, family economic security, and public finance.

This strategic plan, the first SAPGA will send to state leaders, provides policymakers — from the local level on up to state lawmakers and the governor — with a multifaceted roadmap. This, however, is not SAPGA’s final word. SAPGA will continue to meet to assess the state’s progress and update this plan in 2018 and 2020.

Although 2030 may seem distant, it is steadily approaching. With each passing year, increasing numbers of Coloradans will discover that aging is not an academic issue — but rather intertwined with their daily lives. Indeed, the only threat aging poses for Colorado is if we do not adequately prepare for this looming demographic shift.

¹ Centers for Disease Control and Prevention, Healthy Places Terminology, <https://www.cdc.gov/healthyplaces/terminology.htm>

Aging in Colorado

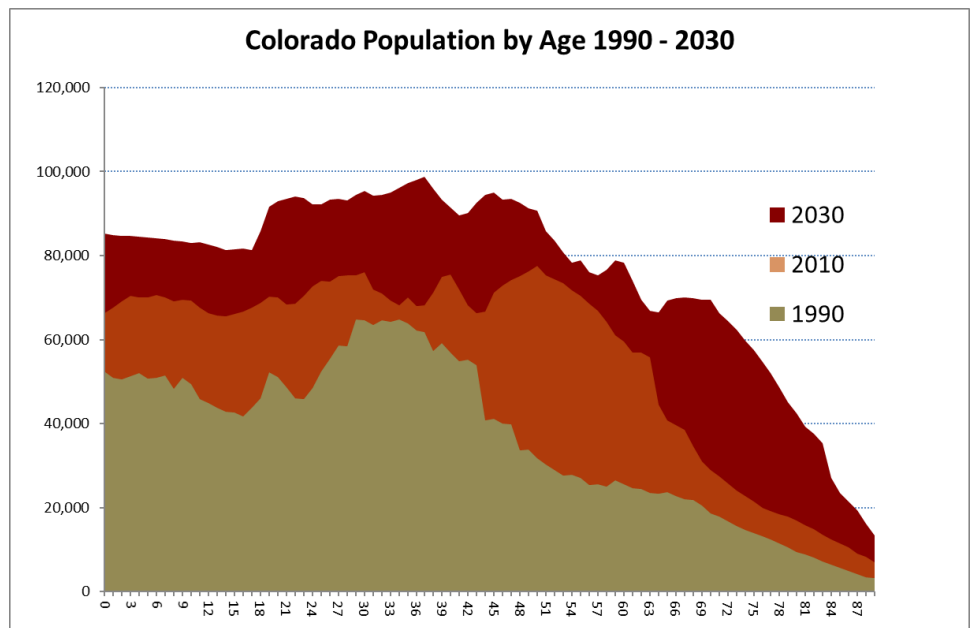
Colorado, shaped and defined by its stunning landscapes, is quietly undergoing a steady and permanent demographic shift that will redefine it for decades to come. Simply put, Coloradans are aging.

This trend, the result of a confluence of demographic change and advances in science, is one states around the nation are experiencing. Between 1900 and today, life expectancy in America increased by nearly 70 percent — from under 50 years to nearly 80 years. This is one of the great achievements of the 20th Century. Advances in medicine and public health have given Americans a whole new phase of life. Living into one's 70s and beyond used to be uncommon, but now it is something the large majority of Americans can fully expect.

These trends have long been established, though for the last 70 years they have largely been hidden from view by a phenomenon known as the Baby Boom. The huge post-WWII generation skewed our demographics toward youth.

But now that generation is retiring and we are rapidly catching up with the trends. A new and permanent reality is setting in.

The Centennial State is on the front edge of a demographic shift that will define it for generations. Baby Boomers (born between 1946 and 1964) comprised roughly one quarter of Colorado's population in 2010. As they age, Colorado's population will enter a new demographic reality — and one that will endure for generations.



As this graph, generated from Colorado State Demography Office projections, shows, Colorado's population aged 65 and over will be 125 percent larger than it was in 2010. This demographic trend is not expected to crest for several decades:

While Colorado is still years away from fully feeling the economic implications of our aging population, it's important that we take the time to look ahead and understand the changes that are taking place. Colorado's population is aging, and with that comes many economic and social changes that need to be addressed. Colorado and its communities must be ready to confront both the challenges and opportunities this growth generates.²

This trend, too, will transcend ethnicity and income levels. According to state projections, the number of Hispanic Coloradans ages 65 and over is expected to grow nearly 200 percent between 2010 and 2030;

² Colorado State Demography Office, Aging in Colorado Part 2: What Does it Mean for Our State? October 2016, <https://demography.dola.colorado.gov/crosstabs/aging-part-2/>

and the number of African American Coloradans aged 65-plus is expected to grow by nearly 155 percent in the same time period.³

Confronting this demographic trend will require a comprehensive rethinking of how Colorado supports communities, families, and individuals who will grapple with this sea change.

For example, the growing number of older Coloradans will increasingly rely upon family, friends, and others to provide assistance. Informal caregiving, while normal today, will become a part of more Coloradans lives — requiring employers and others to adapt. Family members and others acting as informal caregivers in Colorado endured a cost of \$3.7 billion in 2015, including lost wages, forgone benefits, and other expenses.^{4 5} That figure is projected to grow to \$6.6 billion by 2030.

Colorado’s aging population also will require communities to adapt physical landscapes and other systems to accommodate this change. Given that 87 percent of older Americans indicate they want to age in place,⁶ our communities also will need to adopt strategies to enable this choice. According to an analysis by the Highland Group, housing will need additional accessibility, including zero-step entries and configurations friendlier to aging bodies.⁷ Seniors also will need assistance moving around their communities for basic services. According to the Colorado Health Institute: “More than one of four Coloradans over 55 say it is at least somewhat problematic to find safe and affordable transportation options. The rate increases to 42 percent for adults 85 or older.”^{8 9} Although the transportation challenges vary by region and city, Colorado will need to expand access to ride sharing, public transportation, and other services to help seniors stay connected, access basic services, and thrive.

Aging also will place stresses upon Colorado public finance. Not only will growing numbers of retirees reduce income tax revenues and contribute less toward sale taxes, but they also will require additional support through public programs, including Medicaid. According to the Colorado State Demography Office: “Those in retirement tend to pay less in taxes both because they’re no longer working, and because they’re buying fewer taxable goods. With the aging of our population, there is an expected decline in per capita tax revenues to the state and many local governments — although it’s important to note that an overall decrease in total tax revenues is not expected due to aging.”¹⁰

[[Insert info from Colorado Futures Study]]

* * *

These trends have moved some in public life, the press, and elsewhere to ascribe cataclysmic monikers to Colorado’s demographic trend. They portend of disaster-like scenarios and end times for Colorado’s

³ Colorado State Demographer’s Office projections, <https://demography.dola.colorado.gov/population/data/race-forecast/>

⁴ CHI, Putting a Price on Informal Caregiving in Colorado report, <https://www.colorado.gov/pacific/sites/default/files/SAPGA%20Caregiving%20Report.pdf>

⁵ CHI, Putting a Price on Informal Caregiving in Colorado, July 25, 2016 presentation, <https://www.colorado.gov/pacific/sites/default/files/Caregiving%20Presentation%20SAPGA.pdf>

⁶ AARP Public Policy Institute, What Is Livable? Community Preferences of Older Adults, April 2014, http://www.aarp.org/content/dam/aarp/research/public_policy_institute/liv_com/2014/what-is-livable-report-AARP-ppi-liv-com.pdf

⁷ The Highland Group, Housing and Care Facility Needs Forecast, Gaps, and Opportunities, August 2016, <https://www.colorado.gov/pacific/sites/default/files/SAPGA%20Housing%20Report%20Highland%20Group%20FINAL%20BINDER%20August%202016.pdf>

⁸ CHI, Expanding Transportation for Older Adults, Aug. 8, 2016 presentation, https://www.colorado.gov/pacific/sites/default/files/Transportation%20Presentation%20SAPGA_distribution.pdf

⁹ CHI, Improving Senior Mobility in Colorado report, August 2016, https://www.colorado.gov/pacific/sites/default/files/Colorado%20Health%20Institute_Transportation_SAPGA_03August2016.pdf

¹⁰ Colorado State Demography Office, Aging in Colorado Part 2: What Does it Mean for Our State? October 2016, <https://demography.dola.colorado.gov/crosstabs/aging-part-2/>

unique way of life and its quality of life. Rather than simply accept this foreboding vision for the Centennial State, the Colorado General Assembly and Governor John Hickenlooper created the Strategic Action Planning Group on Aging to confront the challenges and seize the opportunities aging presents.

SAPGA's work has shown that Colorado can adapt to this trend — and ultimately make Colorado a better place for everyone. This strategic plan lays out the front edge of Colorado's visionary approach and highlights that there is more than a silver lining to the state's demographic future.

A Vision for Colorado

Before the Strategic Action Planning Group on Aging could develop a plan, it needed a vision for Colorado in 2030 and beyond: Where do we want to go? How will we know when we get there?

SAPGA tackled this challenge by embracing the idea that a Colorado adapted for aging is one where residents of all ages can thrive — a place where people in every stage of life can contribute, can live the lives they want to live, and are respected and valued for who they are and what they bring to their communities. In terms of public policy, this means doing what we can to ensure a high quality of life for older Coloradans and their families by promoting health and wellbeing, fostering self-sufficiency, providing livable communities and protecting the most vulnerable populations.

To achieve this vision, SAPGA set eight goals for what Colorado should look like in 2030. These goals defined SAPGA's work and its recommendations. They are the infrastructure — the scaffolding — of this strategic action plan for aging in Colorado:

- **Goal 1:** Colorado seniors are able to live and fully participate in their **communities** of choice for as long as possible.
- **Goal 2:** Older adults are able to **stay engaged** in the labor force and volunteer sector as long as they want or need.
- **Goal 3:** Colorado seniors and their families are more **financially secure** and prepared to meet the challenges of aging.
- **Goal 4:** Coloradans are prepared for the challenges of **caring for aging loved-ones** and are able to do so without endangering their own health or well-being or the health and well-being of the recipient of care.
- **Goal 5:** There are enough skilled, educated and trained **workers**, paid commensurate to their abilities and training, to meet the needs of employers and industries serving Colorado's growing senior population.
- **Goal 6:** Older Coloradans stay healthier longer through access to quality and affordable **person-centered care** that aligns with their preferences and values.
- **Goal 7:** All levels of **government** meet their commitments to support older Coloradans and their families.
- **Goal 8:** Colorado empowers and **protects** seniors from abuse, neglect, and exploitation.

These goals should inform policymakers' priorities and actions in 2017 and beyond. They, coupled with the recommendation in this strategic plan, set a course for how Colorado can ensure a high quality of life for older adults, their families, and caregivers — and promote health and wellbeing, foster self-sufficiency, provide livable communities, and protect the most vulnerable among us. These goals also guide steps Colorado can take to help older adults remain a vital part of our urban, rural, and tribal communities and leverage their lifetimes of experience, knowledge, and wisdom.

SAPGA focused on these goal and vision for Colorado by working through a series of committees, which included: Workforce Development; Family Economic Security; Physical Community; Health and Wellness; Public Finance; and Supportive Community. Through each subject area, SAPGA endeavored to find strategies to ensure Colorado is prepared for the needs and consequences of its growing aging population. This included ensuring the state improves the quality, effectiveness, and availability of services for older Coloradans and fully and sustainably funds essential senior services and support programs.

SAPGA’s vision for Colorado is expansive and inherently a work in progress. In fact, the legislation that established SAPGA anticipated the expansive and dynamic nature of the challenge by directing SAPGA to develop a long-term plan that can be expanded and updated over a matter of years. The General Assembly required updates to this plan in 2018 and 2020. In the interim, SAPGA will continue to update its recommendations both in light of new information and research and the progress the state makes in the interim.

In addition to these recommendations, SAPGA also is committed to continuing to explore additional recommendations over the near term to address:

- A
- B
- C
- D

It also is worth noting that SAPGA is not working in a vacuum. There are numerous other entities, including the Colorado Commission on Affordable Health Care and the Colorado Commission on Aging, working on issues facing Colorado seniors. SAPGA intends to continue to monitor these other efforts to complement its future work.

The Path Forward

Colorado's response to its aging population has the potential to create opportunities, spur innovations in public policy and the private sector, and ultimately improve our special way of life for everyone in the Centennial State. Several pressing issues relating to aging are at the forefront of SAPGA's work and recommendations, including workforce, family economic security, the physical community, health and wellness, the stability and sustainability of our public programs and communities that support aging. This plan provides eight key areas of focus and aims to make measurable improvements for older Coloradans.

Recommendation 1

The Governor should create a permanent, high-level office or position within the executive branch to be accountable to and oversee the state government's work on aging issues. The Governor should propose and the General Assembly should consider legislation to grant this new office or position the authority and capacity to:

- a) **Set consistent statewide policy priorities;**
- b) **Coordinate the aging-related work of state agencies and workgroups;**
- c) **Help the state coordinate effectively and consistently with federal and local partners — and learn from the experiences of other states;**
- d) **Maximize efficiency and cost-effectiveness of state expenditures;**
- e) **Identify gaps and unmet needs;**
- f) **Identify and help develop innovative new financing mechanisms, including utilizing opportunities for matching funding;**
- g) **Help drive public education efforts concerning the effects of aging in Colorado;**
- h) **And oversee the implementation of the state's Strategic Action Plan on Aging as well as appropriate recommendations from other efforts such as the Community Living Advisory Group (CLAG), Colorado Aging Framework, Colorado Department of Public Health and Environment Healthy Aging Plan, and the Colorado Alzheimer's Disease Plan.**

The Colorado Legislative Council should consider establishing a similar and parallel high-level mechanism and process for tracking and coordinating aging issues as well as educating individual lawmakers.

Colorado's aging population will pose challenges for Colorado's executive branch on down to county and municipal entities. To ensure Colorado responds consistently and efficiently, the state needs a coordinating aging agency or individual charged with cross agency work to implement efforts to ensure Colorado supports healthy aging.

This type of coordinating agency or person will help create efficiencies, anticipating and covering gaps in services, and ultimately eliminating waste. They also will be able to oversee the state's progress against the recommendations and goals of this strategic plan, the Community Living Advisory Group (CLAG), Colorado Aging Framework, Colorado Department of Public Health and Environment Healthy Aging Plan, and the Colorado Alzheimer's Disease Plan — and to create accountability.

It's essential to note that state agencies are already generating a tremendous amount of information and resources for seniors and those working with older Coloradans. This work extends to local entities, including the Area Agencies on Aging. Coordination and information-sharing is essential to helping Colorado respond to its demography shift and seize the opportunities it presents.

An executive branch cabinet member or agency is appropriate, given the magnitude of Colorado's growing aging population. As a point of comparison, the Colorado Department of Health Care Policy and Financing supports the more than 1.3 million Coloradans enrolled in Colorado's Medicaid and Children's Health Insurance Program;¹¹ the Colorado State Demography Office estimates Colorado will have more than 1.2 million residents aged 65 and over by 2030.¹²

As noted in this strategic plan, the effects of aging will be widespread. It's essential that Colorado's response to this shift be equally comprehensive and coordinated.

Recommendation 2

The Governor's Office of State Planning and Budgeting, the Colorado Legislative Council, and the Joint Budget Committee staffs should work together to compile a comprehensive state budget on aging to identify all state expenditures related to aging issues (including revenue expenditures such as tax credits) as a tool to help policymakers plan and prioritize at the state level. These efforts should also include identification of major long-term trends in state expenditures with special attention given to resolving the state's structural imbalance and its impact on funding aging-related programs.

Colorado's aging population will affect every aspect of the state's budget and fiscal outlook. These effects will resonate from the federal level down to local entities. To fully plan for Colorado now through 2030, the state will need a fiscal roadmap to guide its public policy choices. Although SAPGA has considered many of the impacts of Colorado's aging population, more analysis is needed.

Without a full analysis from the Office of State Planning and Budgeting, the Colorado Legislative Council, and the Joint Budget Committee staffs policymakers will be at a loss for the Centennial State's aging future intersects with the other budgetary demands. This type of analysis would help lawmakers and the Governor's Office prioritize aging in the full context of other necessities.

SAPGA's research, led by the Colorado Futures Centers at Colorado State University, found: [\[\[\[more here\]\]\]](#)

These effects also will extend to federal programs that play a critical role in older Coloradans' lives, including Medicare and Social Security. Per a 2012 Center on Budget and Policy Priorities analysis, seniors aged 65 and up received just over half of all entitlement benefits.¹³ And according to the Kaiser Family Foundation, the number of Coloradans who are Medicare beneficiaries rose from 650,687 in 2011 to 785,398 in 2015¹⁴ — with these numbers expected to increase as the state's aging population grows. The same is true of Social Security, which paid benefits to 610,436 Coloradans aged 65 and over in 2015¹⁵ — up from an estimated 514,038 Coloradans aged 65 and over in 2011.¹⁶

¹¹ Medicaid.gov, Medicaid & CHIP in Colorado, <https://www.medicaid.gov/medicaid/by-state/stateprofile.html?state=colorado>

¹² Colorado State Demography Office, Colorado Population Trends in Aging, 2015, <https://www.colorado.gov/pacific/sites/default/files/SAPGA%20101.pdf>

¹³ Center on Budget and Policy Priorities, Contrary to "Entitlement Society" Rhetoric, Over Nine-Tenths of Entitlement Benefits Go to Elderly, Disabled, or Working Households, <http://www.cbpp.org/research/contrary-to-entitlement-society-rhetoric-over-nine-tenths-of-entitlement-benefits-go-to>

¹⁴ Kaiser Family Foundation, Total Number of Medicare Beneficiaries, 2015, <http://kff.org/medicare/state-indicator/total-medicare-beneficiaries/?currentTimeframe=0&sortModel=%7B%22colld%22:%22Location%22:%22sort%22:%22asc%22%7D>

¹⁵ Social Security Administration, Number of beneficiaries in current-payment status, by state or other area, type of benefit, and sex of beneficiaries aged 65 or older, December 2015, https://www.ssa.gov/policy/docs/statcomps/oasdi_sc/2015/table02.pdf

¹⁶ Social Security Administration, Number of beneficiaries in current-payment status, by state or other area, type of benefit, and sex of beneficiaries aged 65 or older, December 2011, https://www.ssa.gov/policy/docs/statcomps/oasdi_sc/2011/table02.pdf

Alongside these analytic efforts, SAPGA recommends that Colorado policymakers, including its congressional delegation, prioritize efforts to support the long-term viability of Social Security, Medicare, and Medicaid.

Part of this work will include building support among members of the public of all ages for this work. The good news is the public is generally receptive to this message. According to Gallup, roughly 79 percent of the public believed in 2015 that they will either rely upon Social Security for some part of their retirement income.¹⁷ And in January 2016, Gallup reported that 43 percent of Americans are optimistic Medicare will still provide seniors 65 and up with adequate health care coverage.¹⁸ That said, the public also clearly believes Social Security, Medicare, and other social safety net programs need lawmakers to address the financial sustainability of these programs for future generations.

These efforts also should extend to the local level, with municipal and county leaders identifying aging-related expenses, highlighting their importance, and raising awareness on the need for action to preserve and strengthen these commitments. These efforts should extend to regional plans, efforts, and regional representative bodies, such as Club 20, Progressive 15, and Action 22.

Recommendation 3

The General Assembly should take the following three specific steps to increase retirement savings by Coloradans of all ages:

- a) **Encourage minimum standards for employers who offer defined contribution retirement plans (such as 401K plans). These standards should emphasize the essential ingredients of availability, automatic enrollment, automatic investment, and automatic escalation.**
- b) **Create a public-private partnership to design and offer a workplace retirement saving plan for employees who currently do not have access to one. This plan should be portable and should emphasize the essential ingredients of availability, automatic enrollment, automatic investment, and automatic escalation.**
- c) **Fully meet the state's obligations to fund the retirement plans of its own employees and to ensure that PERA remains solvent over the long-term.**
- d) **Work with the Governor's Office to identify or create a statewide commission or entity with the authority and capacity to develop and support aggressive financial literacy programs relevant to Coloradans of all ages, locations, and circumstances.**

Elder economic insecurity takes many forms — including unemployment, housing crises, diminished savings, and negative health outcomes — and are costly both to individuals and their communities. Aging adults who lack financial stability often take measures that can negatively impact their well-being, such as skipping meals, failing to adhere to their medication regimen, or keeping their homes at inadequate temperatures. Public benefits can play a critical role in mitigating these risks by helping to pay for health care, food, prescriptions, and utilities.

Individual retirement savings and plans play an essential role in supporting aging Coloradans as they scale back their contributions to the workforce and enjoy retirement. Accordingly, SAPGA urges policymakers to empower seniors to save for retirement and help themselves thrive.

¹⁷ Gallup, In Depth: Social Security, <http://www.gallup.com/poll/1693/social-security.aspx>

¹⁸ Gallup, In Depth: Medicare, <http://www.gallup.com/poll/14596/medicare.aspx>

Research from the Colorado Center on Law and Policy underscores the need for policymakers to take steps to bridge the divide between seniors' earned benefits, such as Social Security, and their needs in retirement: "Colorado seniors' Social Security payments and median income in retirement typically fall short of local retirement needs."¹⁹ And research from the Bell Policy Center found that nearly half of Colorado's private sector works today lack access to a retirement savings plan through their work.²⁰ With Colorado's aging population projected to significantly rise, this could leave hundreds of thousands without the resources necessary to subsist.

The Colorado legislature has previously considered legislation to implement a strengthen Coloradans' access to retirement savings, including House Bill 16-1403. SAPGA urges the General Assembly to again consider strategies to confront the retirement gap many seniors will face in 2030 — including the state's obligation to ensure the Colorado Public Employees' Retirement Association remains a reliable source of retirement income for its beneficiaries.

These recommendations rely on lawmakers' continued commitment to the public programs and services currently in place. As noted in SAPGA's narrative surrounding Recommendation 2, Medicare, Medicaid, and Social Security and others form the bedrock of Coloradans plans for retirement and economic security now and through 2030.

Finally, the state also should work to empower Coloradans to thrive in retirement by exploring strategies to boost financial literacy and Coloradans' familiarity with what they will need in retirement. Informing aging Coloradans, their families, and caregivers of their retirement options and ways to save for the future, Colorado will help ensure today's workers can join the state in planning for aging.

Recommendation 4

As key first steps in helping communities reinvent themselves so that Colorado seniors have more opportunities to age in place and remain active, the General Assembly should take the following steps to build on promising existing efforts:

- a) **Support and fund efforts to create a Universal Design Certification program to encourage the inclusion of universal design elements in new and remodeled housing for seniors, such as the one within the Colorado State University Built Environment Institute. This should include adequate resources for piloting this Universal Design Certification process with the Partnership for Age Friendly Communities in Larimer County and to share and promote the lessons of that pilot program with communities throughout Colorado.**
- b) **Support the Colorado Department of Transportation's (CDOT) State Coordinating Council in coordinating among the wide range of programs that help serve the transportation needs of Colorado's aging population. The Council should be specifically charged with making specific regulatory, legislative and funding recommendations to improve the reach, effectiveness and efficiency of existing programs.**

¹⁹ Colorado Center on Law & Policy, Measuring Senior Security, The Colorado Elder Index, Spring 2016, <http://ccplonline.org/wp-content/uploads/2016/08/Making-Ends-Meet--The-National-Elder-Economic-Security-Initiative.pdf>

²⁰ The Bell Policy Center, Colorado Workers Face a Retirement Crisis, <http://www.bellpolicy.org/research/colorado-workers-face-retirement-crisis>

Older adults overwhelmingly express a desire to “age in place,” in a place that is safe, affordable, walkable, healthy, and inclusive. Somewhere they feel a sense of connection and belonging. Somewhere age-friendly.

Older adults can be a vital asset to communities and community development, contributing their experience, leadership, and, often, economic participation. Unfortunately, most live in places that are not well prepared for an aging population, and most communities have a long way to go before they can be called “age-friendly”.

Confronting Colorado’s aging population will require a reconsideration of its physical environment. From housing to sidewalks, Colorado will need to adapt its infrastructure to increase the number of older adults who are living well in our communities.

“Age friendly communities” or “livable communities” are terms used to describe community-wide or citywide efforts being made in some areas by groups of citizens, government services, and other stakeholders to re-shape their communities to work well for all ages. Generally, these efforts include consideration and adaptation of transportation/walkability, housing, healthcare, government services, accessibility, and other aspects of community living. The Partnership for Age-Friendly Communities in Larimer County is a good example of an age-friendly community-wide effort.

—Housing and Care Facility Needs Forecast, Gaps, and Opportunities, The Highland Group

As Colorado communities work to build housing, it is essential that policymakers explore strategies to ensure that housing built for today’s needs²¹ is built with tomorrow’s population in mind. The state should implement pilot programs to explore the utilization of universal design — housing designs that reflect the diverse needs of aging Coloradans. These pilot programs would provide insights into what works and what does not as communities plan for aging. These types of homes would allow more Coloradans to age in place and thrive.

These pilots also could explore strategies to modify current homes to enable today’s Coloradans to age safely in place. According to research conducted for SAPGA, this could involve “a streamlined permit process, as well as services to provide the modifications, and, for low-income seniors, rebates of permit fees or subsidization of costs.”²²

In addition to locally based pilots, SAPGA developed a framework to help communities create gaining-friendly environments for their residents.²³ Although communities face varied challenges across Colorado, the framework can provide useful guides as local governments explore ways to help their residents age in place.

Beyond housing, Colorado cities, counties, and state agencies also will need to explore and embrace new strategies to help seniors get around their communities and access essential services.

²¹ The Denver Post, Colorado population growth far outstripped new housing, census says, <http://www.denverpost.com/2016/05/19/colorado-population-growth-far-outstripped-new-housing-census-says/>

²² The Highland Group, Housing and Care Facility Needs Forecast, Gaps, and Opportunities, <https://www.colorado.gov/pacific/sites/default/files/SAPGA%20Housing%20Report%20Highland%20Group%20FINAL%20BINDER%20August%2022%202016.pdf>

²³ CHI, Creating Supportive Communities for Colorado Seniors, https://www.colorado.gov/pacific/sites/default/files/Supportive%20Community%20Report_Final%2010-7.pdf

A comprehensive report prepared for SAPGA outlines gaps in the state’s transportation services for seniors.²⁴ It found that “getting around is a fundamental need of daily life. Mobility becomes increasingly important as one ages and physical, cognitive, and financial limitations make the simple act of getting from one place to the next a difficult undertaking. Improving transportation for all residents is a top priority across the state.”²⁵

The Colorado Department of Transportation should leverage this research in exploring better ways to keep Coloradans connected through transportation networks and programs. This effort should include making the connection between aging Coloradans’ needs and the transportation network Colorado will have in 2030.

When Colorado adapts its infrastructure and programs for the state’s aging population — making them safe, accessible, and affordable — it ultimately will improve all Coloradans’ quality of life.

Senior mobility is more than just getting to the doctor’s office. Transportation is an essential ingredient for healthy, vibrant aging.

But, many Colorado seniors struggle to get from Point A to Point B every day, detracting from their quality of life.

—Improving Senior Mobility in Colorado, Colorado Health Institute

Recommendation 5

As a first step to ensure Colorado’s future workforce is adequate to meet the needs of an aging population, the General Assembly should authorize and direct an appropriate state agency to identify workforce needs specific to nursing homes, assisted living communities, home health agencies, caregivers (nonprofit and individual), and other professionals who support the state’s aging population. This analysis should include estimates of future use of those particular care settings, given demographic trends.

Aging Coloradans will require a wide variety of caregivers, health care professionals, and other service works to assist them. As the number of Coloradans over 65 grows through 2030, a growing number of people will be needed to support them. According to the Colorado State Demographer’s Office, 69 percent of Coloradans aged 65 and over will have a disability at some point, 35 percent of Coloradans 65 and older will enter a nursing home, and 50 percent of Coloradans 85 and older will need assistance with everyday tasks.²⁶

Some older adults will need higher levels of skilled care provided in nursing facilities as they age. Those who remain in their homes will require a robust network of supports. Consequently, many communities are asking — and others will be soon — what they can do to assist stay-at-home seniors. While needs vary by individual and community, there are common components of an age-friendly environment: accessible outdoor spaces and buildings; a variety of safe mobility options; affordable housing; opportunities for social and civic engagement and more.^{27 28}

²⁴ CHI, Improving Senior Mobility in Colorado, September 2016, <https://www.colorado.gov/pacific/sites/default/files/SAPGA%20Transportation%20Report.pdf>

²⁵ *Ibid*

²⁶ Colorado State Demography Office, Colorado Population Trends in Aging, 2015, <https://www.colorado.gov/pacific/sites/default/files/SAPGA%20101.pdf>

²⁷ CHI, Creating Supportive Communities for Colorado Seniors,

https://www.colorado.gov/pacific/sites/default/files/Supportive%20Community%20Report_Final%2010-7.pdf

²⁸ AARP, Beyond 50.05: A Report to the Nation on Livable Communities, http://assets.aarp.org/rgcenter/il/beyond_50_communities.pdf

Despite all we do know about older Coloradans' needs, the state would benefit from a more comprehensive analysis of this specific issue. Such findings would not only help SAPGA chart a course for Colorado in 2030, but also would help state agencies and local organizations get ahead of the curve on workforce needs.

Recommendation 6

To provide support to the growing number of Colorado workers who are also caregivers for aging loved ones, the General Assembly and Governor should take these concrete steps:

- a) Establish family leave policies that set standards for compensating employees who are caring for aging family members. This might include a Temporary Caregiver Insurance Program through employee payroll deductions, such as those in California, New Jersey, and Rhode Island.**
- b) Create and promote a partnership among state and local governments, employer groups and educational institutions to identify and promote best practices for educating and supporting employees who are also caregivers.**
- c) Fully fund the recommendations made by the Respite Care Task Force in their January 2016 report.**

Today, caregiving for a parent, grandparent, spouse, partner, or other adult relative or friend is commonplace as our population ages. It is the “new normal” of family life for many in the Colorado. Caregivers wear many hats. They help their loved ones navigate the bewildering complexity and fragmentation of the Long-Term Services and Supports (LTSS) and health care systems.

Many individuals who provide assistance and support do not identify themselves as “caregivers.” Rather, they describe what they do in terms of their relationship to the other person: as a husband, wife, partner, grandson, niece, or close friend.

A new model developed by the Colorado Health Institute (CHI) estimates that the cost to individuals providing informal care for older adults in 2015 was \$3.7 billion, or \$7,400 per caregiver.

Because family caregivers have numerous roles and carry out multiple tasks, often, over many years, they need a range of support services to stay healthy, improve their caregiving skills, and remain in their caregiving role.

The average age of an informal caregiver providing support to an older adult is about 50, so most are still

Who is Providing Informal Care for Older Adults in the United States?

- The average age of an informal caregiver is about 50 years old.
- Most informal caregivers (86 percent) are caring for a relative.
- 60 percent of informal caregivers are women. Female caregivers tend to provide more hours of care than men.
- Six in 10 informal caregivers are employed.
- Informal caregivers' median household income is \$55,000, slightly higher than the average U.S. median household income.
- Hispanic caregivers spend an average of 32 hours per week providing support, compared with 21 hours among white non-Hispanic caregivers.

What Types of Care Do Informal Caregivers Provide?

- Sixty percent of informal caregivers in the United States help with one or more Activity of Daily Living, which can include eating, bathing and dressing.
- Six in 10 informal caregivers help with medical or nursing tasks, most without receiving any formal training or preparation.
- Six in 10 caregivers (63 percent) are providing care for someone with a physical condition, and 30 percent are supporting an individual with a memory problem.
- Informal caregivers provide an average of 3.7 years of care. However, that figure varies greatly. For example, caregivers of individuals with dementia or Alzheimer's disease tend to provide care for longer durations than other caregivers, with 38 percent providing care for over six years.

Source: Colorado Health Institute

working as they juggle this responsibility.²⁹ Fewer work hours, forgone wages, sacrificed promotions, and lost benefits are some of the costs incurred by informal caregivers who are employed.

Colorado's demographic shift means that in a decade or two, the ratio of informal caregivers to older adults is expected to shrink dramatically as the overall population becomes older. Informal caregivers provide essential services not only for their loved ones but also for Colorado's budget. Without them, many seniors would spend down their resources to pay for formal caregiving and eventually qualify for Medicaid, with financial impacts for both individuals and the state.

Recommendation 7

The General Assembly should work with the appropriate regulatory agencies to ensure state laws and regulations are adequate to protect consumers, including seniors, from predatory financial practices.

In particular, the General Assembly and the Governor should:

- a) Support the U.S. Department of Labor fiduciary rule to protect workers from business practices that cost American families excess fees and charges;**
- b) Support the Colorado SeniorSafe Program developed by the Colorado Division of Securities and Division of Banking and Financial Services.**

Financial fraud levies steep costs on its victim, particularly those on fixed incomes or in retirement. Colorado should work to empower seniors to protect themselves and to support regulatory steps to prevent financial fraud.

Colorado has a strong tradition to build upon. The state supports public education and enforcement aimed at consumer fraud, including the work of the Office of the Colorado Attorney General in partnership with AARP ElderWatch.

Colorado lawmakers, its executive officers, and its congressional representatives should build on these efforts by supporting federal and state programs aimed at further curtailing financial fraud and abuse. These efforts should include supporting the implementation and enforcement of the U.S. Department of Labor fiduciary rule.³⁰ Per the agency, "The Department's conflict of interest final rule and related exemptions will protect investors by requiring all who provide retirement investment advice to plans, plan fiduciaries and IRAs to abide by a 'fiduciary' standard — putting their clients' best interest before their own profits. This final rulemaking fulfills the Department's mission to protect, educate, and empower retirement investors as they face important choices in saving for retirement in their IRAs and employee benefit plans."

Colorado also should continue to support state-based efforts, including the SeniorSafe program and other similar programs, aimed at protecting seniors from financial fraud and abuse.

²⁹AARP Public Policy Institute and the National Alliance on Caregiving. Caregiving of Older Adults: A Focused Look at Those Caring for Someone Age 50+, June 2015. <http://www.aarp.org/content/dam/aarp/ppi/2015/caregiving-in-the-united-states-2015-report-revised.pdf>

³⁰ U.S. Department of Labor, Fact Sheet: Department of Labor Finalizes Rule to Address Conflicts of Interest in Retirement Advice, Saving Middle Class Families Billions of Dollars Every Year, <https://www.dol.gov/agencies/ebsa/about-ebsa/our-activities/resource-center/fact-sheets/dol-final-rule-to-address-conflicts-of-interest>

Recommendation 8

To ensure older adults are free from abuse, neglect, and exploitation, Colorado should take the following steps:

- a) **Ensure quality, effective Adult Protective Services (APS) are available and provided to all vulnerable adults in Colorado.**
- b) **Implement key recommendations from the Office of Public Guardianship Advisory Committee (PGAC), including establishing a State Office of Guardianship.**
- c) **Support programs to raise awareness and train law enforcement personnel, district attorneys, service providers, caregivers, and other key audiences in how to identify and prevent elder abuse.**

As a result of Colorado's growing aging population, a rising number of seniors will rely upon caregivers, family, friends, and others to maintain their quality of life. This dependence coupled with other physical and mental consequences of aging will leave seniors vulnerable to fraud and mistreatment. Thus, it is essential that the state prioritize initiatives aimed at combating elder abuse and exploitation.

The costs of inaction are staggering: According to the National Center on Elder Abuse, one in 10 Americans ages 60 and over have experienced abuse — and many in multiple forms.³¹ According to research published in the Journal of the American Geriatrics Society in 2010, the rate of abuse of older Americans suffering from dementia is nearly 50 percent.³² Abuse victims are often hospitalized or must undergo medical care to recover. Financial fraud also imposes steep costs on seniors. A 2009 study from MetLife found that elderly victims lost an estimated \$2.9 billion to financial abuse.³³

Colorado lawmakers passed a Senate Bill 13-111 in 2013 to require mandatory reporting of elder abuse. This landmark law, whose reporting mandates went into effect July 1, 2014, requires that a series of elder care, health, and service professionals report suspected abuse of adults aged 70 and over within 24 hours.

The law also required additional training to help caregivers and others recognize the signs of abuse. As a result, nearly 24,000 people received training from the Colorado Adult Protective Services in the 2014-2015 fiscal year.³⁴ Thanks to this training and law's mandatory reporting requirements, the number of adult and elder abuse reports increases to 16,696 in FY2014-2015, up from an average of about 11,452 cases over the previous three fiscal years.³⁵ Colorado Adult Protective Services attributed this sharp rise to Senate Bill 13-111: "With the implementation of SB13-111 ... APS realized a 48 percent increase in reports for clients aged 70 and older."³⁶ The number of cases opened as a result of these reports also sharply rose to 8,932 in FY2014-2015, up from an average number of 6,660 cases over the previous three fiscal years.

Although Colorado has taken tremendous, recent steps to raise awareness about this issue and combat it, SAPGA recommends that policymakers build on these steps to ensure older adults can live free from abuse and neglect and exploitation.

³¹ Nation Center on Elder Abuse, Elder Abuse and Its Impact fact sheet, <https://ncea.acl.gov/resources/docs/EA-Impact-What-You-Must-Know-2013.pdf>

³² National Center for Biotechnology Information, Screening for abuse and neglect of people with dementia, March 2010, <https://www.ncbi.nlm.nih.gov/pubmed/20398118>

³³ Metlife, The MetLife Study of Elder Financial Abuse, June 2011, <https://www.metlife.com/assets/cao/mmi/publications/studies/2011/mmi-elder-financial-abuse.pdf>

³⁴ Colorado Adult Protective Services, Annual Report – Fiscal Year 2014-15, http://www.coloradoaps.com/uploads/5/0/9/7/50975653/aps_annual_report_-_fy_2015.pdf

³⁵ *Ibid*

³⁶ *Ibid*

Appendix A — _____

Appendix B — _____