



Strategic Action Planning Group on Aging

Initial Strategic Action Plan on Aging for Colorado
November 29, 2016

Action Plan produced by



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Executive Summary

Colorado's aging population is projected to grow at an unprecedented rate through 2030. This demographic shift is already reshaping Colorado, with its 65-and-over population growing 29 percent between 2010 and 2015 — the third fastest rate in the nation.¹ This growth is forecast to continue with Colorado's population aged 65 and over projected to rise by more than 508,000 — an increase of 68 percent — by 2030.²

This trend will affect every facet of daily life for millions of Coloradans — from the economy to transportation systems to the workforce. Indeed, Colorado stands at the edge of a demographic shift that will redefine it for generations to come.

Living and aging well can mean 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.”³

This change presents opportunities and challenges alike. To ensure Colorado seizes these potential benefits and confronts problems before they arise, the General Assembly and Governor's Office created the Strategic Action Planning Group on Aging (SAPGA). Its mission is to lay out not only a vision for Colorado through 2030, but also to illuminate a path forward.

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.

This initial strategic action plan is the result of more than a year's worth of rigorous discussion, research, and debate. This plan lays out how policymakers and other key stakeholders, including community leaders and local government, can ensure Colorado is a place where everyone — regardless of age — can live life on their own terms, stay engaged, and thrive throughout their lives.

This plan is divided into three sections: an introduction, a vision for Colorado, and recommendations. Each section lays out a case for rethinking facets of Colorado's approach to aging and builds toward SAPGA's initial recommendations, which include:



¹ Colorado State Demography Office, Aging in Colorado Part 1: Why is Colorado Aging So Quickly? October 2016, <https://demography.dola.colorado.gov/crosstabs/aging-part-1/>

² Colorado State Demographer's Office projections, <https://demography.dola.colorado.gov/population/data/race-forecast/>

³ Centers for Disease Control and Prevention, Healthy Places Terminology, <https://www.cdc.gov/healthyplaces/terminology.htm>

- Creating a permanent office or high-level position within the executive branch to coordinate and oversee Colorado’s work on aging issues.
- Developing a comprehensive accounting of all state expenditures related to aging as a tool to help policymakers plan and prioritize at the state level.
- Committing, through existing state programs, partnerships, and resources, to protect older Coloradans from abuse, fraud, neglect, and exploitation — and ensure all can age with dignity.
- Empowering and supporting caregivers as they assist aging parents, family, and friends.
- 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 meet aging Coloradans’ needs;
- Supporting local communities’ efforts to adapt to aging Coloradans’ needs, including transportation networks and building design; and,
- Developing and implementing comprehensive local and regional plans for aging.

These initial recommendations are important next steps in Colorado’s work to prepare for its aging population. They are not, however, the final word on SAPGA’s work. The Planning Group’s work is inherently a work in progress and premised on the need to continue to study and debate strategies to seize the opportunities aging presents and confront related challenges.

SAPGA will continue to work to meet its legislative charge, which included a series of areas the Planning Group still needs to study. These areas of focus include assessing aging in the criminal and civil justice systems, veterans programs, strategies to help seniors support their own wellness and mobility, access to health care and other wellness programs, the role of the private sector in supporting aging Coloradans, and ways to reframe how aging is perceived by the public at large. SAPGA also will work to determine how Colorado can better address disparities that occur in the barriers older Coloradans face including those arising from race, ethnicity, income inequality, and LGBTQ status.

SAPGA also intends to monitor the implementation of these initial recommendations as it continues to work toward its intended 2018 and 2020 updates to this plan depending on the availability of resources.

In addition, SAPGA will continue to engage the private sector in its continuing work. Many entrepreneurs believe a whole new demographic (ages 60 to 80) will emerge by 2030 with many seniors transforming wisdom and experience into innovation. This is a core focus for SAPGA in 2017. SAPGA also will tackle how technology can benefit the elderly. In just the time since House Bill 15-1033 became law, customized mobility has become the new norm for people who either cannot or will not drive. Further, artificial intelligence will make it easier for an aging population to utilize the latest software technology with simple voice recognition.

This initial strategic plan’s goals and recommendations represent the beginning of the state’s leadership in understanding and solving some of its most pressing concerns. It is essential to keep this work on the front burner in 2017 and allow SAPGA to further its exploration into the possibilities ahead.

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. The only threat aging poses for Colorado is if its leaders do not adequately prepare for this looming and ongoing demographic shift. The aging dynamic presents some difficult challenges, but it also introduces unique opportunities.

Strategic Action Planning Group on Aging Members

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Honorable Steven F. Child of Snowmass

Pitkin County Commissioner

To serve as a county commissioner

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 care, services, and supports.

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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.

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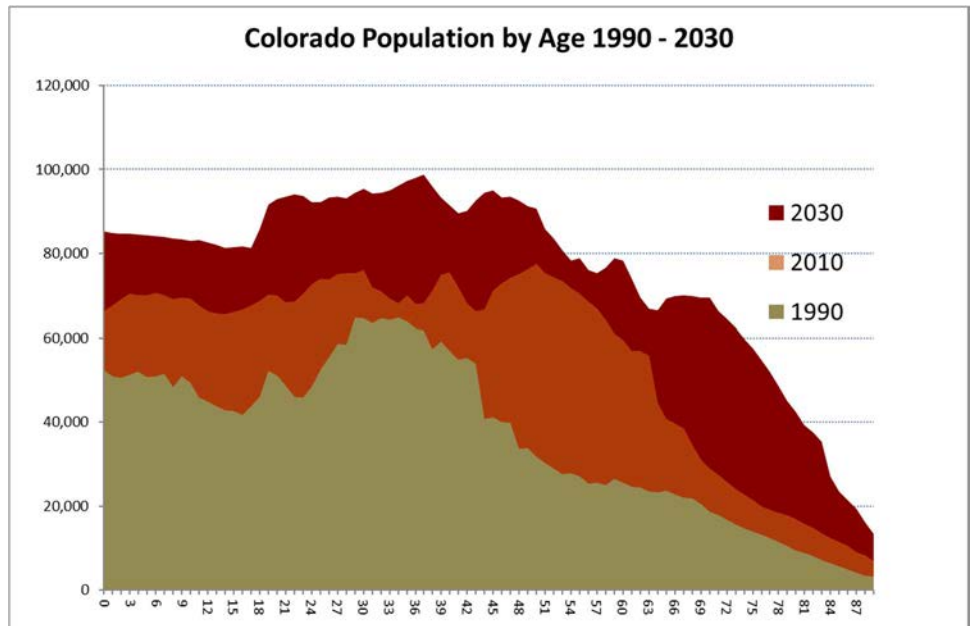
Aging in Colorado

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.

The number of Coloradans aged 65 and over is projected to rise by more than 508,000 — an increase of 68 percent — by 2030. This trend, the result of a confluence of demographic change and advances in science, is one that 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 a 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-World War II 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.



As this graph, generated from Colorado State Demography Office projections, shows, Colorado's population aged 65 and over will be substantially larger in 2030 than it is today. 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.⁴

This trend, too, will transcend ethnicity and income levels. In addition, state projections show the number of Hispanic Coloradans aged 65 and over is expected to grow nearly 200 percent between 2010 and 2030; and the number of African American Coloradans aged 65-plus is expected to grow by nearly

⁴ 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/>

155 percent in the same time period.⁵ This will require consideration of equity issues throughout the goals and recommendations that relate to aging, race, ethnicity, and income.

(It is worth noting that the Colorado General Assembly charged SAPGA with focusing on issues facing Coloradans 50 and older. SAPGA's work and recommendations do concern all aging Coloradans, however, the Colorado State Demography Office and other organizations maintain statistics and reports focused on those ages 65 and older. Those statistics are utilized in this initial strategic plan as a reference point, but they do not circumscribe or limit the recommendations herein.)

The fundamental fact is that this new reality is not just about older people. The changes that are coming will affect virtually every Coloradan in profound ways. Workers will need to do a much better job planning for retirement, starting early in their careers. Families will need to understand the potential effects that caring for aging loved ones will have on work and home lives. Businesses will need to adjust to the challenges and opportunities presented by an aging workforce and customer base — as well as the needs of their employees who also are caregivers. Our education system will need to produce enough new skilled workers to support industries that serve aging Coloradans. Communities will need to rethink a wide range of policies and regulations that affect everything from the kinds of homes that get built to how sidewalks, transportation systems, parks, and shopping areas accommodate the needs of people with diverse abilities. The public sector will need to grapple with increasing pressures on their budgets even while the aging demographic slows the growth in revenues.



This effort will require a comprehensive rethinking of how Colorado supports communities, families, and individuals who will grapple with this profound 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 both employers and employees 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.^{6 7} 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

⁵ Colorado State Demographer's Office projections, <https://demography.dola.colorado.gov/population/data/race-forecast/>

⁶ CHI, Putting a Price on Informal Caregiving in Colorado report, <https://www.colorado.gov/pacific/sites/default/files/SAPGA%20Caregiving%20Report.pdf>

⁷ 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>

age in place,⁸ our communities also will need to adopt strategies to enable this choice. According to an analysis by the Highland Group conducted for SAPGA, housing will need additional accessibility, including zero-step entries and configurations friendlier to aging bodies.⁹ Seniors also will need assistance moving around their communities for basic services. According to the Colorado Health Institute, which also conducted research for SAPGA: “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.”^{10 11} Although the mobility 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 slow the growth in income tax revenues, contribute less toward sale taxes, and pay less in property taxes — notably due to homestead property tax exemptions — 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.”¹²

An analysis the Colorado Futures Center conducted for SAPGA found that reductions in older Coloradans’ contributions to state and local revenues, however modest, coupled with increasing pressure on virtually all state programs and agencies will pose challenges for policymakers: “The bottom line [is] aging will have a real but modest effect on state revenue growth rates. Because Colorado is projected to be a growing state, total revenue

Research Conducted by SAPGA

Colorado Futures Center, The Effects of Aging on Colorado’s Revenue and Expenditures: A View to 2030, <http://bit.ly/2fi5rXz>

Colorado Health Institute, Putting a Price on Informal Caregiving in Colorado, <http://bit.ly/2f8hQMJ>

Colorado Health Institute, Creating Supportive Communities for Colorado Seniors, <http://bit.ly/2fzPg2y>

Colorado Health Institute, Improving Senior Mobility in Colorado, September 2016, <http://bit.ly/2fi5vXj>

The Highland Group, Housing and Care Facility Needs Forecast, Gaps, and Opportunities, <http://bit.ly/2f1HXFe>

Keystone Policy Center, Literature Review, Colorado Commissions and Reports, April 2016, <http://bit.ly/2fi0KwK>

Keystone Policy Center, Literature Review, Other State Reports, April 2016, <http://bit.ly/2fXewFb>

Keystone Policy Center, Literature Review, Colorado Legislation, April 2016, <http://bit.ly/2gizTG1>

Keystone Policy Center, Literature Review, Federal Legislation, April 2016, <http://bit.ly/2gi27zS>

Keystone Policy Center, Literature Review, Misc. Reports, April 2016, <http://bit.ly/2fhZIXm>

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To view other information and presentations presented to SAPGA, visit colorado.gov/pacific/agingstrategy/resources

⁸ 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

⁹ 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%2022%202016.pdf>

¹⁰ CHI, Expanding Transportation for Older Adults, Aug. 8, 2016 presentation,

https://www.colorado.gov/pacific/sites/default/files/Transportation%20Presentation%20SAPGA_distribution.pdf

¹¹ CHI, Improving Senior Mobility in Colorado report, August 2016,

https://www.colorado.gov/pacific/sites/default/files/Colorado%20Health%20Institute_Transportation_SAPGA_03August2016.pdf

¹² 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/>

will continue to increase, albeit at a slowing rate. However, at the same time, aging will place increased expenditure pressure on the state budget. The largest growth rates in the 65 and over cohort are projected to occur by the end of the current decade. This will place additional expenditure pressures on the budget immediately. While growth rates in the 65 and over cohort are projected to slow after 2020, many of the expenditure pressures will continue to increase as the full 65 and over cohort continues to age.”¹³

This pressure is most significant in Medicaid. As aging populations grow through 2030 and as the costs per beneficiary grow, the pressure on state finances will increase. “Of those served in Medicaid, just over 75,000 or 3.09 percent of the Medicaid population received eligibility as Adults 65 and Older (OAP-A) or Partial Dual Eligibles.¹⁴ Yet, expenditures for these two cohorts represented 16.73 percent of total Medicaid expenditures in FY 2015-16. By 2030, over one out of every five dollars spent in the Medicaid program will be spent on the aged populations and total Medicaid expenditures for the aging cohorts are projected to grow from just over \$1.04 billion in FY 2015-16 to just over \$2.325 billion in FY 2029-30, an increase of more than 100 percent in 15 years.”¹⁵

* * *

These trends have moved some in public life, the press, and elsewhere to ascribe foreboding monikers to Colorado’s demographic trend. Rather than accepting this negative vision for the state, the Colorado General Assembly and Governor John Hickenlooper created SAPGA to confront the challenges and seize the opportunities aging presents.

In fact, Colorado’s growing aging population will pay dividends for Colorado. Aging Coloradans, for example, are a tremendous resource. Their wisdom and experiences can strengthen Colorado institutions and provide crucial guidance across numerous sectors. Older Coloradans also play critical roles in the state’s economy — with Coloradans aged 50 and older accounting in 2013 for 45 percent of the state’s GDP (\$131 billion) and supporting 48 percent of its jobs (1.6 million).¹⁶ Colorado seniors receive relatively high marks for lower obesity rates and higher rank in physical activity.¹⁷ Colorado should capitalize on this trend, and maintain and improve the opportunities for healthy aging throughout the state.

Adapting to Colorado’s aging demographics and preparing for this growing segment of the population will help the state tap into older Coloradans’ insights and other assets. More importantly, SAPGA’s work has shown that Colorado can adapt to this trend — and ultimately make Colorado a better place for everyone.

¹³ Colorado Futures Center, The Effects of Aging on Colorado’s Revenue and Expenditures: A View to 2030, https://www.colorado.gov/pacific/sites/default/files/CFC%20Finance%20Report%20for%20SAPGA_FINAL.pdf

¹⁴ The Congressional Budget Office glossary contains the following definition of partial duals “Dual-eligible beneficiaries who qualify to have Medicaid pay some of the expenses they incur under Medicare. For all partial duals, Medicaid pays the premiums for Part B of Medicare (and for Part A, if applicable). For some partial duals (depending on the state they live in and their income and assets), Medicaid also pays part or all of the cost-sharing amounts they owe under Medicare.” See <https://www.cbo.gov/publication/44309>

¹⁵ Colorado Futures Center, The Effects of Aging on Colorado’s Revenue and Expenditures: A View to 2030, https://www.colorado.gov/pacific/sites/default/files/CFC%20Finance%20Report%20for%20SAPGA_FINAL.pdf

¹⁶ AARP, The Longevity Economy, Colorado, 2014, http://www.aarp.org/content/dam/aarp/livable-communities/documents-2014/LongevityEconomy/Colorado_datasheet_V1.pdf

¹⁷ United Health Care foundation. America’s Health Rankings® Senior Report. 2016. <http://assets.americashealthrankings.org/app/uploads/final-report-seniors-2016-edition-1.pdf>

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.

SAPGA also developed its vision for Colorado in collaboration with community organizations, public agencies, and others. SAPGA's members attended meetings throughout Colorado, listened to feedback from members of the public, and received presentations at its meetings from a wide range of organizations, thought leaders, and key stakeholders. SAPGA supplemented its work by investing in research from a wide range of Colorado think tanks and other research organizations.

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 provide the infrastructure — the scaffolding — of this strategic action plan for aging in Colorado:

- **Goal 1:** Colorado seniors will be able to live and fully participate in their communities of choice for as long as possible.
- **Goal 2:** Older adults will be able to stay engaged in the labor force and volunteer sector for as long as they want or need.
- **Goal 3:** Colorado seniors and their families will be more financially secure and prepared to meet the challenges of aging.
- **Goal 4:** Coloradans will be prepared for the challenges of caring for aging loved-ones and will be 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 will be 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 will 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 will meet their commitments to support older Coloradans and their families.
- **Goal 8:** Colorado will empower and protect seniors from abuse, neglect, and exploitation.

These goals should inform policymakers' priorities and actions in 2017 and beyond. They, coupled with the recommendations in this strategic plan, set a course for how Colorado can ensure a high quality of life for older adults, their families, and caregivers. 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 goals 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 topic 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.

The legislation that established SAPGA directed its members to develop a long-term plan that can be expanded and updated over a matter of years. The General Assembly requested updates to this plan in 2018 and 2020 depending on the availability of resources. In the interim, SAPGA will continue to update its recommendations both in light of new information and research as well as the progress the state makes on these recommendations.



SAPGA's work in 2017 and beyond will include assessing the roles emerging technology and innovation can play in helping Colorado prepare for aging, working with seniors to support their own wellness and mobility, access to quality care including addressing the needs of those with dementia and Alzheimer's Disease, exploring how the private sector can complement public programs to support Colorado seniors, and elevating support for policies, communication, and practices that can better respond to the overall aging trend in our state. The Planning Group also will explore other issues directly affecting older Coloradans and potential avenues for action, including veterans programs and assistance, senior issues in the criminal and civil justice systems, access and barriers to participation in senior nutrition and wellness programs, and the intersection of these issues with race, ethnicity, and income levels in equitably accessing these services. SAPGA will continue to leverage its committees, organizations that serve older Coloradans, and partner with local communities to develop additional recommendations on these and other key topics and priorities.

This continuing work also will take into account the work of other entities in Colorado and beyond, whose work will affect Colorado seniors. These include but are not limited to the Colorado Commission on Affordable Health Care, the Colorado Department of Human Services, and the Colorado Commission on Aging. Their insights into issues such as the wellbeing of seniors to rising cost of prescription drugs holds tremendous value for SAPGA and Colorado policymakers alike. SAPGA intends to continue to monitor these other efforts to complement its future work.

The remainder of this section outlines the progress the Planning Group has made in understanding the challenges presented by the eight goals and the strategies considered for each. Some of these strategies form the basis for recommendation made in the next section; others need more work before SAPGA can decide whether they will form the basis for future recommendations. All goals and strategies are to be achieved before 2030.

Goal 1: Colorado seniors will be able to live and fully participate in their communities of choice for as long as possible.

Outcomes and Strategies under consideration:

People will be able to go where they want to go, when they want to get there.

- Increase awareness of the mobility needs of an aging population.
- Make alternative transportation resources more available.
- Eliminate funding barriers that prevent the most effective use of existing systems.
- Ensure older adults are aware of options and resources available to them.

Support networks will give older adults confidence in using transit options.

- Develop volunteer systems and training programs for seniors.
- Improve communications about services and options.

Infrastructure will be adequate and reliable so older adults can remain independent.

- Ensure communities are walkable and offer easy access to public transportation.
- Improve public transportation spaces (lighting, benches, signage, snow removal, etc.).
- Implement driver's license monitoring programs.
- Encourage private industry to provide technology solutions to mobility challenges.

Building codes will meet the needs of an aging population, with universal design as the standard.

- Promote universal design standards and include them in local building codes.
- Educate the public on the benefits of universal design.
- Create incentives for developers and contractors to use universal design.

The supply of accessible, affordable housing will meet the needs of seniors at all income levels.

- Provide a variety of housing options and help seniors find those most appropriate to their situations.
- Increase the affordable housing stock in Colorado.
- Support public funding to produce and preserve affordable housing.
- Encourage innovative options such as co-housing, Accessory Dwelling Units, village concepts, and Naturally Occurring Retirement Communities.

Community planning and design practices will support senior health, wellness, and mobility.

- Revise local planning and zoning to foster mixed-use development and improve access to services, mobility, safety, and walkability.
- Develop accessible open spaces (paths free of trip hazards, available seating, shelter, toilets, etc.).
- Improve air quality, noise pollution, traffic congestion, and safety standards.
- Revise local planning and zoning to support inter-generational community models.

Older adults will have access to resources and services throughout their life cycles that support their aging in place within their communities.

- Create a multi-agency leadership team to coordinate the efforts recommended by previous task forces and commissions, including Community Living Advisory Group, Colorado Aging Framework, Colorado Department of Public Health and Environment Healthy Aging Plan, and the Colorado Alzheimer's Disease Plan.
- Coordinate among "care gap" programs to identify aging populations with limited incomes who do not qualify for existing programs and to identify additional resource needs.
- Expand existing ombudsman programs to help seniors with problems they may encounter with agencies, home health care and facilities in their communities.
- Develop a retirement education and planning program to assist people throughout the aging process.
- Develop innovative models to improve services in rural and underserved communities.

Goal 2: Older adults will be able to stay engaged in the labor force and volunteer sector for as long as they want or need.

Outcomes and Strategies under consideration:

Older adults will be able to continue to participate in the paid labor force.

- Provide education, training and support to ensure the workforce readiness or entrepreneurial activity of older adults.
- Increase workforce opportunities for older adults.
- Increase business development opportunities for older adults.
- Improve the perception of older adults as valued and valuable workers.

Older adults will be able to meaningfully contribute to their communities as volunteers and build the capacity of non-profits and public institutions.

- Provide education and training to ensure the readiness of older volunteers.
- Increase volunteer opportunities for older adults.
- Improve institutional readiness and willingness to leverage the skills and abilities of older volunteers
- Improve the perception of older adults as valued and valuable volunteers.

Industries and employers will be prepared for the aging of their workforce.

- Improve employer awareness of and preparation for the aging of their labor force.
- Improve employer readiness to leverage the skills and abilities of older workers.

Goal 3: Colorado seniors and their families will be more financially secure and prepared to meet the challenges of aging.

Outcomes and Strategies under consideration:

Workers of all ages will be able to save to be economically secure as they age.

- Ensure workplace opportunities for all workers to save for retirement.
- Protect against financial abuses and exploitation.
- Ensure workers and retirees continue to have access to stable, secure, and viable retirement plans, including defined benefit plans.

People will understand the importance of planning, know how to plan, and are motivated to plan to be economically secure as they age.

- Provide Coloradans with skills in personal financial management by the time they enter the workforce and throughout their lifetimes.
- Encourage Coloradans to increase their savings for contingencies as they age.

Goal 4: Coloradans will be prepared for the challenges of caring for aging loved-ones and will be able to do so without endangering their own health or well-being or the health and well-being of the recipient of care.

Outcomes and Strategies under consideration:

Families will be able to provide adequate care to loved ones based on patient and family choice without endangering their own earning potential or family resources.

- Encourage families to make and communicate multi-generational financial and health plans.
- Encourage families to plan for future health and care costs — including end of life — considering family history, health history and status, and anticipated retirement lifestyle.

- Increase the prevalence of workplace policies that help employees balance their work and unpaid caregiver obligations.

Caregivers will have access to respite services and resources that reduce stress and allow them to be better caregivers.

- Develop a comprehensive statewide system for respite care services.
- Make caregivers aware of resources available to them.
- Train caregivers about abuse, neglect and exploitation.

Goal 5: There will be 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.

Outcomes and Strategies under consideration:

Colorado’s workforce will be sufficient to build the capacity of the wide range of industries serving older adults, including healthcare, social services, long-term care, transportation, housing, caregiving, and more.

- Increase awareness of the career opportunities in industries that are growing due to aging.
- Improve access to education and training to ensure the readiness of workers in these fields.
- Improve the image and desirability of professions serving older adults.

Goal 6: Older Coloradans will stay healthier longer through access to quality and affordable person-centered care that aligns with their preferences and values.

Outcomes and Strategies under consideration:

Older Coloradans will have access to quality, affordable, coordinated, person-centered care.

- Ensure older adults have access to a regular health care provider (medical and dental home).
- Provide access to case management and care coordination for those in need.
- Ensure transitions of care occur more safely.
- Align medical care delivery with patient preferences and values (e.g. the right care, at the right time, for the right person).

Colorado leaders will utilize resources that support informed health and wellness decision-making.

- Increase understanding by older adults and caregivers of their health service options.
- Use evidence-based programs that support healthcare decision-making and advanced care planning.
- Ensure access to patient-appropriate educational resources at the time of decision-making.

Colorado will foster programs, environments, and behaviors known to maintain health and well-being.

- Promote lifestyles that incorporate physical and mental exercise, nutrition, oral health, and social interaction.
- Ensure access to community programs that promote healthy lifestyles.
- Optimize physical, mental, oral and behavioral functions as needs change across the lifespan.
- Increase availability of services and programs to manage chronic disease.

Colorado will provide person-centered care for older adults with decreasing functional status.

- Increase participation in comprehensive care coordination programs (disease support, wellness coordination, hospital discharge, inter-facility transfer, nutrition, living situation, transportation, caregivers, etc.).
- Increase use of programs that promote quality of life for individuals with functional limitations.
- Increase awareness and timely use of palliative care across care settings.
- Include caregivers more often as members of care teams.

Goal 7: All levels of government will meet their commitments to support older Coloradans and their families.

Outcomes and Strategies under consideration:

Colorado policymakers will support federal programs and expenditures as the foundation for building the economic security, health, and well-being of seniors and their families.

- Improve understanding among elected officials, opinion leaders, and the public of the challenges and opportunities presented by an aging population.
- Improve understanding of the foundational role of federal programs such as Social Security, Older Americans Act, Medicare, and Medicaid.
- Support national efforts to keep these programs viable and effective for the long-term.
- Leverage and maximize all appropriate age-related federal programs, demonstration projects, and other funding opportunities.

Colorado will address the structural imbalance between state revenues and expenditures in a manner that ensures adequate resources for aging-related programs without undermining support for other state priorities.

- Increase coordination among Colorado agencies and with federal and local entities to identify gaps, set priorities, and maximize cost-effectiveness of public spending.
- Develop long-term financial planning scenarios for aging programs across state agencies and departments to ensure they are prioritized and adequately funded.
- Encourage Colorado's leaders to build public understanding of the state's fiscal challenges, including the fiscal impacts of an aging population.

Local governments will adapt to how the aging of their populations impacts their revenues and expenditures in order to maximize aging related services and the overall well-being of their communities.

- Improve understanding of how aging will impact local revenue and expenditures.
- Develop and implement comprehensive local and regional financing plans to address aging.

State and local governments will augment public resources through collaborative, innovative and diverse revenue and financing models, including public-private partnerships and other non-public opportunities.

- Engage a wide range of stakeholders to identify, develop, and implement innovative financing strategies.

Goal 8: Colorado will empower and protect seniors from abuse, neglect, and exploitation.

Strategies under consideration:

Public

- Establish a State Office for Guardianship.
- Ensure quality, effective Adult Protective Services are available to vulnerable older adults.
- Expand training for law enforcement and district attorneys on abuse, neglect and exploitation of vulnerable adults, as well as how to interact with this population and prosecute these crimes.
- Provide Long-term Care Liaisons to address redetermination of Medicaid.

Community

- Raise awareness of elder abuse, neglect and exploitation, and what people can do to report and prevent it.
- Assess need for community services and supports for older adults (particularly in rural communities).
- Train caregivers to recognize and help prevent abuse, neglect, and exploitation.

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 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.



Aging issues affect different communities and regions of Colorado in very different ways. Exploring these regional experiences and perspectives is central to SAPGA's work. The Planning Group sought out feedback on this issue as well as potential solutions from more than 20 statewide and regional organizations.

The members of SAPGA vetted these initial recommendations through its committees and full membership. SAPGA was focused on recommendations that had a clear problem that needed to be addressed, a defined entity tasked to carry out the recommendation, a strong foundation of research or empirical evidence, a clear way to help seniors and the state address a vital issue or improve the quality of life in Colorado for the next 14 years and beyond, lay the groundwork for future work on aging issues, and build on the state's progress or work already underway.

SAPGA adopted its initial recommendations through rigorous debate and, ultimately, consensus. Through that process, SAPGA reached nine key recommendations that will make measurable improvements for all Coloradans.

Recommendation 1

Relates to Goals 1 through 8

The Governor should create a permanent, high-level office or position within the executive branch to be accountable for and lead 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, commissions, planning groups, and other research entities, including the work conducted by and on behalf of SAPGA;**
- d) **Maximize efficiency and cost-effectiveness and identify potential savings;**

- e) **Identify gaps and unmet needs;**
- f) **Identify and help develop innovative new financing mechanisms, including utilizing opportunities for matching funding;**
- g) **Collect, analyze, and share data across agencies to improve decision-making related to workforce development and participation, health and wellness, and other key areas related to aging policy;**
- h) **Help drive public education efforts concerning the effects of aging in Colorado;**
- i) **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 office or position charged with cross-agency work to implement efforts to ensure Colorado supports healthy aging.

Every one of SAPGA’s committees agreed on the clear need for this coordinating entity. In fact, all of the subsequent recommendations in this plan — as well as the achievability of the Planning Group’s vision for Colorado in 2030 — rest on the idea that policymakers will act on this essential idea.

This coordinating office or position will help create efficiencies, anticipate and cover gaps in services, and ultimately eliminate 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, 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 is 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 demographic shift and seize the opportunities it presents. Data collection and analysis also are central to helping the state plan for aging and working across agency lines to respond, including confronting falling labor force participation rates.¹⁸

A high-level office or position within the executive branch 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;¹⁹ the Colorado State Demography Office estimates Colorado will have more than 1.2 million residents aged 65 and over by 2030.²⁰

¹⁸ U.S. Bureau of Labor Statistics, Monthly Labor Review, December 2013, <http://www.bls.gov/opub/mlr/2013/article/labor-force-projections-to-2022-the-labor-force-participation-rate-continues-to-fall.htm>

¹⁹ Medicaid.gov, Medicaid & CHIP in Colorado, <https://www.medicaid.gov/medicaid/by-state/stateprofile.html?state=colorado>

²⁰ Colorado State Demography Office, Colorado Population Trends in Aging, 2015, <https://www.colorado.gov/pacific/sites/default/files/SAPGA%20101.pdf>

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

Relates to Goals 1 through 8

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 be felt from the federal level down to local entities. Despite this fact, there is no comprehensive accounting of how much Colorado spends on aging-related programs. This lack of understanding is a problem as Colorado grapples with the challenges and opportunities its aging population will present.

A comprehensive state budget on aging would help lawmakers and the Governor's Office prioritize aging in the full context of other necessities.

Research conducted for SAPGA underscores the need for this type of nonpartisan and detailed analysis: "The aging of Colorado's population has a significant and increasing impact on the programs, services and budgets of multiple state departments. In fact, it is difficult to identify any state department that is not affected in some way by the growth in the number of older Coloradans."²¹

These state programs, however, do not exist in a vacuum. The accounting produced by the Governor's Office of State Planning and Budgeting, the Colorado Legislative Council, and the Joint Budget Committee staffs should take into account related federal programs, including Medicare, Social Security, and the Older Americans Act. Hundreds of thousands of aging Coloradans will count on these programs alongside state programs. According to the Kaiser Family Foundation, the number of Coloradans who are Medicare beneficiaries rose from 650,687 in 2011 to 785,398 in 2015²² — 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 2015²³ — up from an estimated 514,038 Coloradans aged 65 and over in 2011.²⁴

These analytic 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

²¹ Colorado Futures Center, The Effects of Aging on Colorado's Revenue and Expenditures: A View to 2030, https://www.colorado.gov/pacific/sites/default/files/CFC%20Finance%20Report%20for%20SAPGA_FINAL.pdf

²² 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>

²³ 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

²⁴ 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

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

Relates to Goals 3 and 7

The General Assembly should take the following 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 vesting, 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 the Colorado Public Employees' Retirement Association (PERA) remains sustainable 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.**

Local government entities should continue to fully meet funding obligations to county, municipal and other public employee retirement plans (e.g., the Fire and Police Pension Association) to ensure that plans remain solvent over the long-term.

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 all Coloradans to save for retirement and help themselves thrive.

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."²⁵ And research from the Bell Policy Center found that nearly half of Colorado's private sector workers today lack access to a retirement savings plan through their work.²⁶ This is especially pronounced among employees of small businesses, where workers are at the greatest risk of lacking access to retirement savings accounts.²⁷ With Colorado's aging population projected to significantly rise, this could leave hundreds of thousands without the resources necessary to maintain a reasonable standard of living in retirement.

Empowering Coloradans to plan and save for retirement will lessen demands on public programs aimed at helping retirees get by. According to a study of the impact which a new retiree's income level has on Utah's government financial outlays, "The least prepared new retirees cost the government the most in

²⁵ Colorado Center on Law & Policy, Measuring Senior Security, The Colorado Elder Index, Spring 2016, <http://cclponline.org/wp-content/uploads/2016/08/Making-Ends-Meet-The-National-Elder-Economic-Security-Initiative.pdf>

²⁶ The Bell Policy Center, Colo. Workers Face a Retirement Crisis, <http://www.bellpolicy.org/research/colorado-workers-face-retirement-crisis>

²⁷ U.S. Small Business Administration, Small Business Trends, <https://www.sba.gov/managing-business/running-business/energy-efficiency/sustainable-business-practices/small-business-trends>

program benefits.”²⁸ The same study also found: “An increase in net worth among the bottom one-third of retirees by just 10 percent over the workers’ careers would decrease expected government layouts by more than \$194 million over the next 15 years. For these individuals, savings increases of that size would be very small — an increase of just \$14,000 over their career. Most increases in net worth have substantive impacts on government spending.”²⁹



Recent research by the Schwartz Center for Economic Policy Analysis concludes, “Employer sponsored retirement plans provide the best vehicle for retirement savings because they provide a practical and efficient way for workers to save consistently.”³⁰ Many other studies have affirmed this conclusion, including parametric statistical analyses by the Employee Benefit Research Institute that estimate retirement savings shortfalls. These analyses demonstrate that access to retirement savings plans in the workplace can significantly reduce savings shortfalls.³¹

The Colorado legislature has previously considered legislation to implement and 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, Social Security, and other programs 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. By informing Coloradans 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.

²⁸ Notalys LLC, The Cost of Retiring Poor: Government Outlays for Utah’s Retiring Population, January 2015, <http://www.aarp.org/content/dam/aarp/ppi/2016-03/cost-to-taxpayers-of-utahns-retiring-poor.pdf>

²⁹ *Ibid*

³⁰ Schwartz Center for Economic Policy Analysis, Are U.S. Workers Ready for Retirement? Trends in Plan Sponsorship, Participation, and Preparedness, April 9, 2015, http://www.economicpolicyresearch.org/images/docs/research/retirement_security/Are_US_Workers_Ready_for_Retirement.pdf

³¹ Employee Benefit Research Institute, Issue Brief No. 410, Retirement Savings Shortfalls: Evidence from EBRI’s Retirement Security Projection Model®, February 2015, https://www.ebri.org/publications/ib/index.cfm?fa=ibDisp&content_id=5487

Recommendation 4

Relates to Goal 1

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 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 Institute for the Built Environment. 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 charged with making specific regulatory, legislative and funding recommendations to improve the reach, effectiveness and efficiency of existing programs.**
- c) **Utilize the CDOT State Coordinating Council and regional councils to help seniors access tools and training to remain safe on the road, such as AARP Driver Safety Courses, the Manual on Uniform Traffic Control Devices, the CarFit Program, the Colorado Guide for Aging Drivers and Their Families, and the 2015 Strategic Highway Safety Program.**

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.

Older adults can be a vital asset to communities and community development, contributing their experience, leadership, and, often, economic participation. Unfortunately, many 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.”

Adapting to Colorado’s aging population will require a reconsideration of its physical environment. 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 needs³² also 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

³² 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/>

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.”³³

In addition to locally based pilots, SAPGA had a framework developed to help communities create aging-friendly environments for their residents.³⁴ 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. Unless people have safe, convenient and affordable transportation options, they will be stuck at home or will be at greater risk on the roads than they need to be. Having access to transportation is critical to staying connected to family and friends and to pursuing day-to-day activities, both those that are essential and those that enhance the 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

A report prepared for SAPGA outlines gaps in the state’s transportation services for seniors.³⁵ 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 mobility for all residents is a top priority across the state.”³⁶

The Colorado Department of Transportation should leverage this research in exploring better ways to keep Coloradans connected through mobility 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.

³³ 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>

³⁴ CHI, Creating Supportive Communities for Colorado Seniors, https://www.colorado.gov/pacific/sites/default/files/Supportive%20Community%20Report_Final%2010-7.pdf

³⁵ CHI, Improving Senior Mobility in Colorado, September 2016, <https://www.colorado.gov/pacific/sites/default/files/SAPGA%20Transportation%20Report.pdf>

³⁶ *Ibid*

Recommendation 5

Relates to Goal 5

Colorado must work to ensure its workforce meets the service needs of its aging population, including nursing homes, assisted living communities, home health agencies, caregivers, and other professionals who support the state’s aging population. Colorado should address the employment and skill development needs of workers who serve older Coloradans.

The state should build on the effective talent development strategies already in place to identify workforce needs and develop career pathways (including those related to aging services), led by the Colorado Workforce Development Council (CWDC). The General Assembly also should identify an entity to advocate for workforce development in industries serving older adults and for services to older workers; that entity should collaborate with the CWDC to utilize existing talent development strategies and infrastructure to ensure Colorado’s future workforce meets the needs of older adults.

The CWDC also should ensure that older workers have access to training and support services required for meaningful employment.

Aging Coloradans will require a wide variety of caregivers, health care professionals, and other service workers to assist them. As the number of Coloradans over 65 grows through 2030, an increasing 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.³⁷

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.^{38 39}

In order to develop a sustainable pipeline of professionals needed by Colorado’s aging population, the state should build on the successful strategies already underway, including the work of the Colorado Workforce Development Council (CWDC). The General Assembly should support the CWDC’s work to identify critical needs, develop programs or initiatives to ensure Colorado has the workers necessary to provide aging-related services, and support these efforts.

As Colorado’s population ages, so too will its workforce. Barring a growth in younger workers, this will likely lead to a transformation of Colorado’s workplaces and its economy. Accordingly, Colorado should support efforts to help its aging workforce remain at work for as long as they choose.

³⁷ Colorado State Demography Office, Colorado Population Trends in Aging, 2015,

<https://www.colorado.gov/pacific/sites/default/files/SAPGA%20101.pdf>

³⁸ CHI, Creating Supportive Communities for Colorado Seniors,

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

³⁹ 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 issue. Such findings would help SAPGA chart a course for Colorado in 2030 and help state agencies and local organizations get ahead of the curve on workforce needs.

Recommendation 6

Relates to Goals 3 and 5

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.**⁴⁰

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), help with activities of daily living, and assist with finances — while many also are caring for other family members, raising children, and working full time.

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 friend.

A new model developed for SAPGA by the Colorado Health Institute (CHI) estimates that the cost to Coloradans providing informal care for older adults in 2015 was \$3.7 billion,

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

⁴⁰ Respite Care Study Final Report, November 2015, <https://drive.google.com/file/d/0B6jLab7wPqJtLW4yaUtjUWd2SjQ/view>

or \$7,400 per caregiver; the model found Colorado employers shouldered a cost of \$564 million in 2015, or roughly \$1,100 per caregiver.⁴¹

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 working as they juggle this responsibility.⁴² 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

Relates to Goals 3 and 8

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; and,**
- 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. A 2009 study from MetLife found that elderly victims lost an estimated \$2.9 billion to financial abuse.⁴³ Colorado should work to empower seniors to protect themselves and to support regulatory steps to prevent financial fraud.

⁴¹ Colorado Health Institute, Putting a Price on Informal Caregiving in Colorado, October 2017.

https://www.colorado.gov/pacific/sites/default/files/SAPGA%20Caregiving%20Report_1.pdf.

⁴²AARP 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>

⁴³ 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>

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.⁴⁴ 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.

Recommendation 8

Relates to Goals 7 and 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.⁴⁵ 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.⁴⁶ Abuse victims are often hospitalized or must undergo medical care to recover.

⁴⁴ 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>

⁴⁵ 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>

⁴⁶ National Center for Biotechnology Information, Screening for abuse and neglect of people with dementia, March 2010, <https://www.ncbi.nlm.nih.gov/pubmed/20398118>

Colorado lawmakers passed 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.⁴⁷ Thanks to this training and the law's mandatory reporting requirements, the number of adult and elder abuse reports increased to 16,696 in FY2014-2015, up from an average of about 11,452 cases over the previous three fiscal years.⁴⁸ 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."⁴⁹ 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, neglect and exploitation.

Recommendation 9

Relates to Goals 1 through 8

Colorado's counties and municipalities, in collaboration with the Area Agencies on Aging and state agencies, should develop and implement comprehensive local and, where appropriate, regional plans for aging that prioritize services and expenditures, promote efficiencies, and identify public and private strategies to ensure adequate long-term funding.

These plans should include strategies and solutions that have been demonstrated to help improve the lives of older Coloradans, help them age in place, and contribute to their communities.

Local governments will have a critical role to play along with state agencies, nonprofits, and the private sector in ensuring older adults have access to essential services and vital programs. Partnerships and collaborations can and should start at the local level — where public programs are the most responsive to Coloradans' needs and, in some cases, the most effective at responding. To that end, the state should facilitate partnerships between local governments, housing providers, and care providers to examine rules and requirements attached to state and federal funding for housing, health care, and other senior services to identify barriers that prevent collaboration and innovation. County and local governments also should foster collaboration across their departments and programs — including economic development, transportation, human services, parks and recreation, planning and zoning, housing, and aging-well initiatives — to ensure resources are not being deployed in duplicative or contradictory fashions.

⁴⁷ 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

⁴⁸ *Ibid*

⁴⁹ *Ibid*

Municipal and county governments should target local funds, loan programs, and local shares of federal and state funds to good-quality, affordable rental housing for seniors, including both new construction and renovation and preservation of existing affordable properties. They also should offer waivers of fees and reasonable exemptions to zoning rules as fair trade-offs for affordability.

Local government should explore strategies to help seniors afford to age in place. These programs could include the implementation of “stacked vouchers,” where programs would bridge the gap between seniors’ housing vouchers or other support and the cost of rent for qualifying units.

Local governments should modify zoning and planning rules to allow more forms of shared housing, accessory dwelling units, micro-units, mobile homes, and group homes that foster companionship, mutual support, resource sharing, and affordability. Local agencies also should consider modifying local ordinances or rules to allow seniors to cohabitate with multiple unrelated people in certain circumstances.

Local communities should utilize and invest in evidence-based programs that have demonstrated value to older Coloradans. For example, county and city governments should identify and promote the expanded use of evidence-based fall prevention programs, such as Stepping On and Tai Ji Quan: Moving for Better Balance.⁵⁰ These examples would help reduce the number of hospitalizations and health care costs related to seniors’ falls — which cost seniors upwards of \$31 billion each year.⁵¹ Another example would be the promotion and provision of Mental Health First Aid training to all employees in law enforcement, first responders, and those in direct contact with residents. When more people are equipped with the tools they need to start a dialogue about mental health and substance use problems, more people can get the help they may need. The evidence⁵² behind the program demonstrates that it does build mental health literacy, helping the public identify, understand, and respond to signs of mental illness.

* * *

Aging is an expansive issue and SAPGA is committed to continuing to work to address the numerous opportunities and challenges Colorado’s demographic shift will present through 2030. These nine initial recommendations are a foundation upon which SAPGA will build with the continued support and investment of the Colorado General Assembly and Governor’s Office.

House Bill 15-1033 identified 14 areas SAPGA would need to address in its strategic action plans. Those areas, listed at the beginning on this action plan, will guide SAPGA’s continued work. The degree to which lawmakers and others act upon this initial plan also will guide the potential updates to this plan in 2018 and 2020.

⁵⁰ National Council on Aging, Fall Prevention Programs, <https://www.ncoa.org/healthy-aging/falls-prevention/falls-prevention-programs-for-older-adults/>

⁵¹ CDC, Important Facts About Falls, <http://www.cdc.gov/homeandrecreationalafety/falls/adultfalls.html>

⁵² Substance Abuse and Mental Health Services Administration’s National Registry of Evidence-based Programs and Practices, <http://legacy.nreppadmin.net/ViewIntervention.aspx?id=321>

Conclusion

Colorado is leading the way in planning for aging. By creating the Strategic Action Planning Group on Aging and supporting its development of a roadmap, Colorado has taken an important first step. The recommendations in this strategic plan are the next series of bold steps Colorado should take to prepare for its demographic future.

SAPGA's recommendations cover a broad range of issues directly related to Colorado's demographic future. They also lay out a series of important initial steps to prepare for where Colorado will be in 2030.

Aging will present expansive, cross-cutting challenges for Colorado. To address these big issues and to capitalize on the opportunities it presents, Colorado will need to undertake equally big solutions. The first recommendation, the creation of an executive branch office or position to oversee the state's work on aging issues, is the most critical of these recommendations and the type of big step Colorado needs to take. This office or position will ensure the state is acting in concert on aging-related issues, is accountable to Coloradans and its commitments to its seniors, and can advocate for these and future recommendations. Without a coordinating office or position, it will be nearly impossible for Colorado to efficiently and effectively grapple with the other important steps it will need to take to prepare and plan for aging. The other recommendations in this strategic plan will complement this new office or position and empower seniors, their friends and family, and leaders to contribute to its work.

The American writer and poet Robert Frost once said, "The afternoon knows what the morning never suspected." With age comes wisdom — a resource Colorado will have in droves come 2030 and beyond. SAPGA's recommendations provide a roadmap to ensure Colorado is well positioned to capitalize on its seniors and their contributions.

Taken together, SAPGA's nine recommendations are policies that will set the tone in Colorado and beyond for how to prepare for this latest demographic trend and ensure our communities, state, and nation are places where everyone can thrive.

With the support of the General Assembly and Governor's Office, SAPGA will continue its pioneering work to help Colorado prepare for its aging population. Even as the Planning Group continues to delve into issues that require additional study, such as health and wellness and the need to reframe how aging is perceived, it will monitor policymakers' work on the nine recommendations in this plan. SAPGA fully intends to advocate for its work and press lawmakers to act on these urgent priorities.

Appendix A — State Aging Programs

The following list of state aging programs was compiled by the Colorado Commission on Aging with additions from the SAPGA Technical Advisory Committee. While the list is intended to be inclusive of all state programs related to aging, some programs may be missing.

SAPGA welcomes suggestions of additional programs that should be included in this list.

Colorado Department of Health Care Policy and Financing

Medicaid:

- Demonstration Project to integrate care for Medicare – Medicaid Enrollees
- Program of All Inclusive Care
- Nursing facility benefit
- Colorado Choice Transitions (CCT)
- Changes to the Preadmission Screening and Resident Review Program (PASRR)
- Colorado’s Community Living Plan (Olmstead Response) – CDPHE/CDHS/DOLA
- Community Living Advisory Group
- Colorado Dental Health Program for Low-income Seniors
- Home and Community Based Services
- Family Caregiver Support
- Medicaid Savings Program
- Old Age Pension Health and Medical Care Program
- Complex Services Solutions Work Group
- Testing Experience and Functional Tools

Colorado Department of Public Health and Environment

Health Facilities and Emergency Medical Division

- Health facilities oversight

Prevention Services Division

- Violence and Injury Prevention-Mental Health Promotion Branch

- Older adult fall prevention

- Suicide prevention

- Health Services and Connections Branch

- Breast and cervical cancer screening

- Cardiovascular health and diabetes screening

- Healthy Living and Chronic Disease Prevention Branch

- Diabetes self management, diabetes prevention

- Hypertension, high cholesterol and cancer control programs with clinical partners

- Patient Navigation promotion

- Nutrition Services Branch- Child and Adult Care Food Program

- Oral Health Program

Disease Control and Environmental Epidemiology Division

- Colorado Immunization Branch

- Communicable Disease Branch

- STI/HIV/Viral Hepatitis Branch

Office of Health Equity-communicate about health equity, and funding and working with communities

Colorado Department of Higher Education:

- Colorado Community College System

Arapahoe Community College / North Eastern Junior College - - 50+ Initiative
Alms Community College: Gerontology Certification Program
Healthcare Navigator Certificate

University of Colorado – Colorado Springs – UCCS
Listen-In for 55+
Geropsychology PhD
UCCS Gerontology Center
Gerontology Minor
UCCS Aging Center – clinical setting for graduate students
UCCS Peak Nutrition Clinic
UCCS Center for Active Living
Peak Vista Community Health Senior Clinic

University of Colorado – Denver
At 60+ enroll for free

Metropolitan State University – Denver
Free courses on a non-credit basis
Mentor Up program with AARP – pairs a AARP person with student
LearnOn – short courses
Geriatric Work Force enhancement – apply for grant

Colorado State University – Fort Collins
Osher Lifelong Learning Institute
Gerontology Interdisciplinary Minor

Fort Lewis College
Life Long Learning Program – free lecture series
KDUR Community Radio – develop/DJ shows

Career Retooling
Master of Arts in Education
Certificate in Geographic Information Systems
Ed2Go Online partner w/Office of Continuing Education

Volunteer Opportunities
Professional Associates
Center for Southwest Studies
Community Concert Hall Volunteer Program
Engineers Without Borders

Colorado Mountain College
Live Long Learning Program
High Country RVSP
Tuition Discounts

Career Retooling:
Ed2go

Go2Workshops
Gateway (partnerships)

Colorado Mesa University
Golden Scholar program for 60+, low tuition when taking classes for no credit

University of Northern Colorado
Graduate degree in Gerontology

Colorado Department of Human Services:

Demonstration Project to integrate care for Medicare – Medicaid Enrollees
Statewide ombudsmen program

Office of Community Access and Independence – Veterans Community Living Centers

Office of Community Access and Independence – Division of Aging and Adult Services

State Unit on Aging

Congregate Nutrition Services

Home-Delivered Nutrition Services

Transportation Services

In-home services

Legal Services for Older Persons

Other Community Based Services for Older Adults

Family Caregiver Support

Long Term Care Ombudsman Services for Older Persons

Federal Aging and Disability Resource Centers

A Matter of Balance Intervention

Chronic Disease Self- Management

Senior Community Services Employment Program

Community Based Care Transition Program

Adult Protective Services

Office of Community Access and Independence – Division of Regional Center Operations

Community Support Team

Office of Economic Security – Employment and Benefits Division

Financial Security Programs

Old Age Pension

Adult Foster Care

Home Care Allowance

Personal Needs Allowance

Burial Benefit

Re-Hire Colorado

Supplemental Nutrition Assistance Program

Low-Income Energy Assistance

Colorado Property / Rent / Heat Credit Rebate

Office of Behavioral Health – Community Programs

Governor's Plan for Strengthening Behavioral Health
Colorado Crisis Support Services
Trauma-informed Services
Older Adult Initiatives

Colorado Energy Office

Low Income Weatherization Assistance Program
Residential Energy Efficiency Program

Colorado Department of Law

AARP Foundation ElderWatch Colorado

Colorado Department of Local Affairs – Division of Housing

Single Family Owner – Occupied Rehabilitation Program
Housing Choice Voucher Program – HCV
Affordable Housing Development
Transit-Oriented Housing Development
State Housing Vouchers
Housing and Colorado Choice Transitions
Medicaid Home Modifications
Medicaid Crosswalk
Low Income Housing Tax Credits
Colorado Permanent Supportive Housing Toolkit
ColoradoHousingSerach.org
Senior Property Tax Exemption

Colorado Department of Natural Resources

Senior Annual Fishing License
Low-income Senior Lifetime Fishing
Aspen Leaf Annual Pass
Camping Discount
Hunter Education Classes

Colorado Department of Public Safety

Colorado Background Investigations
Division of Criminal Justice
Division of Homeland Security and Emergency Management
Division of Fire Prevention and Control
Colorado State Patrol

Colorado Department of Transportation

Section 5310: Enhanced Mobility for Seniors and Individuals
w/Disabilities (EMSID)
Fort Collins and Colorado Springs
Denver
State
(Covers mobility mgmt., some operating, buy vehicles)

Section 5311: Formula Grants for Rural Areas - Rural Public Transportation
Section 5339: Replacement Cost for Vehicle Program
 Formula
 Competitive Application
Section 5307: Discretionary funding for operating
 and/or capital (vehicles) – urban only

FASTER

Other transportation outside of CDOT:
 Older Americans Act Funding
 Medicaid – medical and non-medical transportation
 Veteran’s Administration

Appendix B — Presentations to SAPGA

[Putting a Price on Caregiving](#), CHI, September 2016

[Final Housing Report](#), The Highland Group, September 2016

[Caregiving Memo](#), CHI

[Caregiving Presentation](#), CHI

[NCI-AD presentation](#), HCPF and CDHS

[Presentation from Kelli Fritts](#), AARP

[Boomer Bond presentation](#), May 2016

[CMS Medicare presentation](#), April 2016

[Colorado Medicaid and Older Adults](#), April 2016

[Colorado Opportunities Project presentation](#), March 2016

[Measuring Health in 65 and Older](#), Colorado Cross Agency Collaborative, 2016

[Colorado Opportunities Framework document](#)

[Leeds presentation on aging in Colorado](#), February 2016

[Newsletter](#) and [1 page Handout](#) from Knoebel Institute for Healthy Aging

[Respite Care Task Force presentation](#), CDHS, February 2016

[State fiscal impacts of the aging of Coloradans](#), Colorado Futures, January 2016

[Federal Funding in Colorado from the Administration for Community Living](#)

[Updated FY2015-2016 Staff Budget Briefing Issue to the JBC Concerning Demographic and Budgetary](#)

[Trends for the Senior Population](#), January 2016

[CDHS Division of Aging and Adult Services](#), Mindy Kemp, January 2016

[Colorado Population Trends in Aging](#), Elizabeth Garner, Colo. Department of Local Affairs, 2015

[Housing and Transportation](#), Brad Calvert and Matthew Helfant, DRCOG, December 2015

[Housing](#), Alison George, Colorado Dept of Local Affairs, Division of Housing, December 2015

Appendix C — SAPGA Presentations

Alpine Area Agency on Aging

Alzheimer's Association Education Symposium

Aurora Health Access

Boulder County Aging Well Conference

Carbon Valley Network

Club 20

Colorado Alliance for Senior Americans

c4a Colorado Association of Area Agencies on Aging

Colorado Association of Human Services Directors

Colorado Commission on Aging

Colorado Counties Inc.

Colorado Social Legislation Committee

Craig Senior Program

Larimer County Aging Advisory Council

Larimer County Partnership for Age Friendly Communities

Larimer County Senior Network

Metro Area County Commissioners

Northern Colorado Senior Living Network

Pueblo Advisory Council on Aging

Senior Day at the Capitol

Senior Resource Center

UC School of Medicine

Weld County Area Agency on Aging Advisory Board

Weld County Senior Organizations

Learn more about SAPGA, its work, and upcoming meetings by visiting www.colorado.gov/agingstrategy