



The Bell Policy Center

THE STATE OF AGING

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Introduction

That Colorado is [aging, and aging quickly](#), is no surprise. For some time, the Bell Policy Center and many others [have documented](#) the magnitude and impact of this demographic shift on our workplaces, state budget, families, and communities. Despite recognizing this change is happening, Colorado still lacks an aggregated set of measurable metrics capable of helping us understand how we're doing in meeting our communities' evolving needs. Without this information, we're vulnerable to investing in misdirected solutions, dedicating resources to phantom problems, and overlooking

critical gaps that are just beneath the surface. This lack of a holistic assessment tool remains a barrier to developing effective, efficient, and equitable solutions.

In response to the above-mentioned gaps, the Bell developed this State of Aging report and the accompanying online dashboard to simultaneously measure how older Coloradans are currently doing, while also gaining a better understanding of the underlying systems that contribute to these outcomes. In choosing what to examine in this report, we prioritized the following:

Data with an eye toward the long-term: The value of this report and the data within it center on their replicability. Progress within each of the highlighted areas won't be immediate, and as a result, we'll need to revisit these metrics to understand trends across time. By choosing systems and data that can be reexamined in the future, we'll be better able to recognize emerging needs and outcomes.

Holistic measures reflective of Colorado's diversity: Aging is not homogenous. Instead, opportunities, challenges, and priorities are shaped by factors like race, ethnicity, geographic location, gender, sexual identity and orientation, and ability status. To depict a more inclusive picture of aging, we not only chose a holistic set of measures, but also, where possible, disaggregated the data to better understand outcomes and needs across various demographic groups.

Inclusive examination of outcomes and underlying systems: Outcomes and the strength of underlying systems are intricately connected. When viewed together they place where we currently are in the context of where we'd like to be and how we can get there. To this end, we examined the current state of aging for older adults, but also the levers capable of creating the meaningful change we'd like to see in Colorado. Over time, we can track changes for both to better recognize ongoing challenges and opportunities.

Building the Report

In deciding which issue areas and data points to focus on, we adopted an intentional process involving:



- **Prioritizing community feedback and perspectives:** Aging does not look the same for every Coloradan. Instead, the experience is largely shaped by one's culture, socioeconomic status, and identity. Recognizing this, we worked to ensure this report captures the experience of aging from an array of perspectives. To do so, we formed an advisory group comprised of representatives from the [Center for African American Health](#), [Colorado Cross Disability Coalition](#), [Colorado Latino Leadership Advocacy and Research Organization](#), [One Colorado](#), and the [Tri-County Health Network](#).

Throughout this project, we had multiple individual conversations with representatives from each of these organizations. Additionally, we held several larger meetings with the entire advisory group. This process allowed us to receive iterative feedback from group members which proved pivotal in shaping the project's priorities and areas of focus.



- **Building upon previous work:** Attempting to understand the impact of Colorado's aging demographics is not a new area of focus for the Bell. Our recent work on this topic includes the creation of a national [scan of best practices](#) and an [actionable aging policy agenda](#). Importantly, in developing our previous reports, we had dozens of conversations with community leaders to identify major gaps and opportunities. These conversations provided an invaluable starting point in choosing areas of focus.

However, more than simply building upon our own work, we also relied upon the efforts of others, both in Colorado and across the country. For example, the work of [Colorado's Strategic Action Planning Group on Aging](#) and the national [Economic Policy Institute](#) provided insightful perspectives on many of the issues discussed below.

Major Findings

Within this report, we examine outcomes and the accompanying systems across four main issue areas: financial well-being, health, ability to live in one's community of choice, and overall quality of life. More in-depth information about the specific findings within each of these areas can be found in our online dashboard.

Through our holistic analysis and research, five major findings about the current state of aging emerged.

1. A significant number of older Coloradans are economically vulnerable, and face challenges as the cost of living rises.
2. Tremendous racial disparities exist for older BIPOC Coloradans.
3. Systems meant to support aging Coloradans and their loved ones often vary significantly by geographic area.
4. Large data gaps make it difficult to holistically assess the well-being of older Coloradans.
5. Recently, Colorado has made progress in adopting important policies supportive of older adults. Monitoring and assessing the impact of these initiatives will be crucial over the coming years.

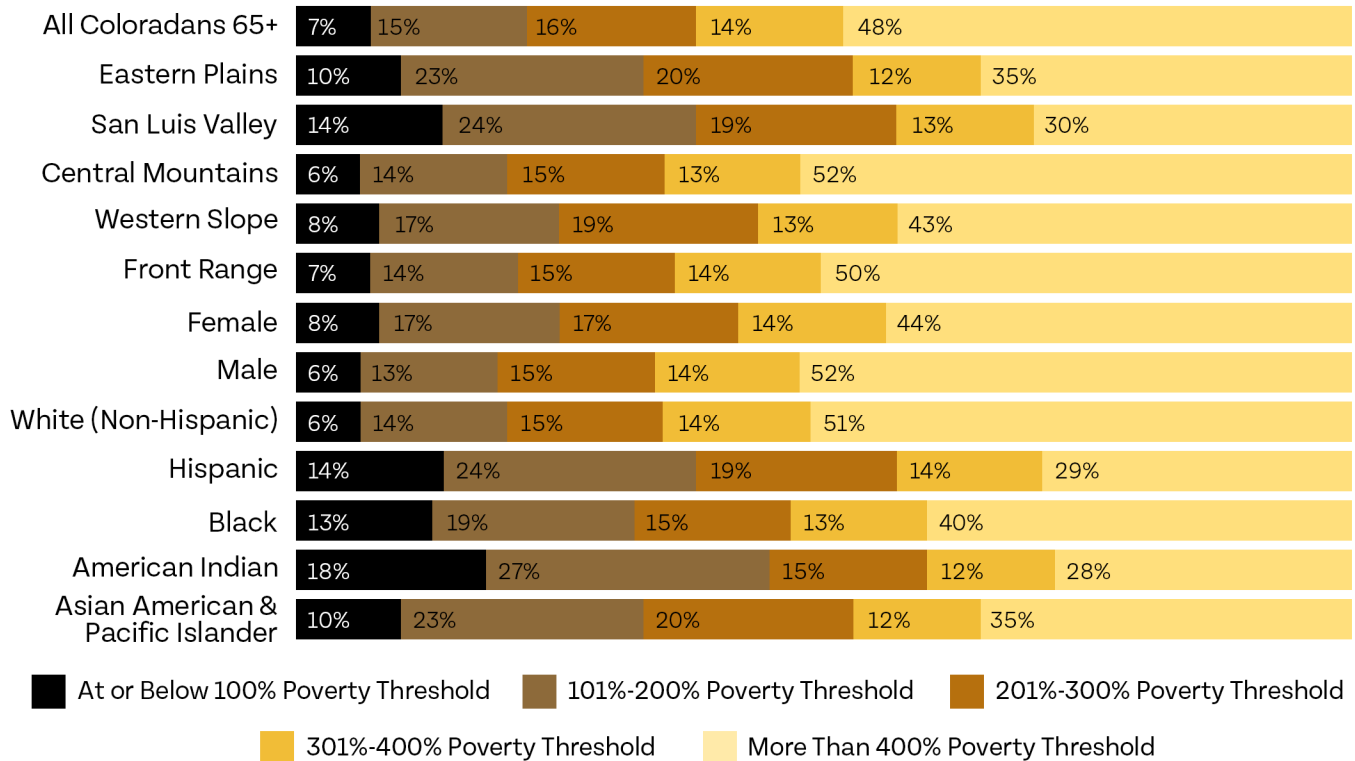


A significant number of older Coloradans are economically vulnerable. Not only do a large number of older adults currently live in poverty, but financial vulnerability is a reality for the many who face rising costs with limited mechanisms for increasing their income.

Over 20 percent of Coloradans 65 and older live in a household at or below 200 percent of the [federal poverty threshold](#), a widely recognized indicator of economic vulnerability. While this top-level finding is significant, the story doesn't end here. Instead, our analysis raises concerns about potential challenges for the many older Coloradans not currently in poverty, but who face rising costs of living on stagnant incomes.

Nationally, approximately [40 percent of older adults](#) rely solely upon social security in retirement, which our analysis shows to be a median of \$14,000 per year in Colorado. Concerningly, housing costs [continue to rise](#), and home care and health costs can take a significant portion of older Coloradans' income. For those on the economic edge, these rising costs without a parallel increase in income are cause for concern.

Share of Poverty Threshold for Coloradans 65+ & Their Families



Bell analysis of 2019 ACS five-year data

Measuring Future Progress

At its core, in the coming years, we can measure progress in this category by examining:

- Number of older Coloradans in poverty:** Though a simplistic, high-level measure, tracking the total number of older Coloradans in poverty says a good deal about this demographic's financial health. In the coming years, if our state succeeds in increasing older Coloradans' financial security, we'll see decreases in the percentage of those at or below 200 percent of the federal poverty threshold.
- Growth in income versus growth in expenses:** Minimal changes to older Coloradans' income won't be as much of a problem if costs remain flat. The data pulled in this report offer an easy way to examine whether this happens in the coming years. While a holistic tracking of costs is necessary, two expenses will be particularly important to watch given the outsized role they can play in older Coloradans' budgets.
 - Housing costs, especially for the 14 percent of older Coloradans who are renters. Our analysis shows housing expenses, are often, by far, the largest item in older Coloradans' budgets.
 - Home care costs, or services which help older adults stay in their homes and communities as they age. Currently, 10 hours of care, paid for out of pocket, can take up nearly one-quarter of older Coloradans' household income.

Levers for Change

Increasing economic security for older Coloradans must include dual efforts to grow income and reduce expenses. Several prime levers to achieve both of these goals are mentioned below. Additional details about these and other systems can be found in our online dashboard.

- **Colorado's Secure Savings Program:** In 2020, Colorado's legislature passed a bill creating a state-facilitated Secure Savings program to [help individuals save for retirement](#). This program has the potential to help individuals increase their income in the later years of life. In the future, we can assess this program's impact by examining enrollment and use.
- **Housing Supports:** Housing costs make up the largest percentage of most older Coloradans' budgets.

Median Family Household Income as a Percentage of Median Housing Costs for Coloradans 65+

Homeowners With a Mortgage	Homeowners Without a Mortgage	Renters
26%	8%	20%

Source: Bell analysis of ACS five-year data

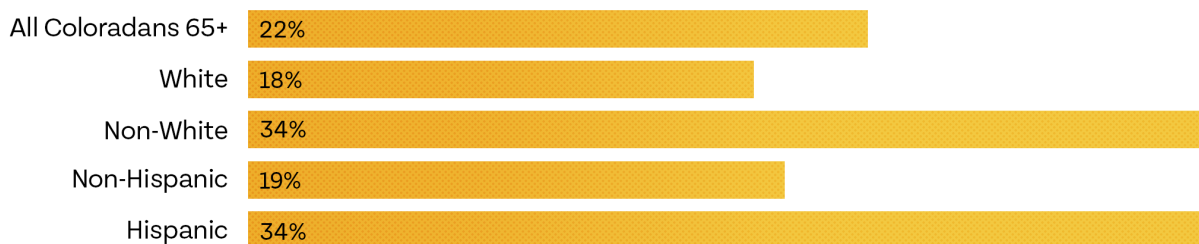
However, older Coloradans who rent are especially vulnerable to the whims of larger economic forces. Housing assistance, largely from the U.S. Department of Housing and Urban Development (HUD), can play an important role in defraying these costs. Measuring how these supports do or don't keep up with poverty and rental rates will indicate whether this program is truly meeting the needs of older Colorado renters.

FINDING 02

Tremendous racial disparities exist for older BIPOC Coloradans. Mirroring longstanding national trends for Coloradans of all ages, there are stark disparities for older BIPOC individuals in nearly all aspects of aging.

Across the range of metrics examined in our dashboard, including self-reported quality of life, health status, poverty status, homeownership status, and household income, older BIPOC Coloradans have worse outcomes than their white counterparts.

Percentage of Coloradans 65+ with Self-Reported Fair or Poor Health



Source: Bell analysis of Colorado Health Institute 2019 Colorado Health Access Survey data

Unfortunately, these findings are not particularly surprising given the widespread prevalence of longstanding racist public policies. As we've documented in other publications, BIPOC Coloradans have historically been excluded from programs and initiatives that support [homeownership](#), [higher wages](#), and [labor protections](#). Similarly, it has long been recognized that our [health systems](#) produces worse outcomes for BIPOC Coloradans. An all too real connection exists between a lifetime of accumulated inequities and increased health, financial, and quality of life challenges in older age.

Measuring Future Progress

In the coming years, we'll know if we're making headway in addressing racial disparities in aging by tracking changes regarding:

- **Self-reported health outcomes:** This measure affords a high-level assessment of overall health in older age. Progress will mean a growing number of Hispanic and non-white older Coloradans self-report their health status as good to excellent; and a diminished gap between the percentage of Hispanic and non-white older Coloradans and their white peers who report fair to poor health.
- **Relation to the federal poverty threshold:** Though not a perfect metric, one's relation to the federal poverty threshold is a telling indicator of financial security. Similar to the health considerations detailed above, success will be evidenced by a drop in the percentage of BIPOC Coloradans at or below 200 percent of the federal poverty threshold; and a diminished gap between the percentage of BIPOC Coloradans and their white peers at the poverty threshold's upper end.

Levers for Change

We can address racial and ethnic health disparities in aging by leveraging the systems mentioned below. Parallel levers to address financial inequity are detailed above within the first finding on economic vulnerability.

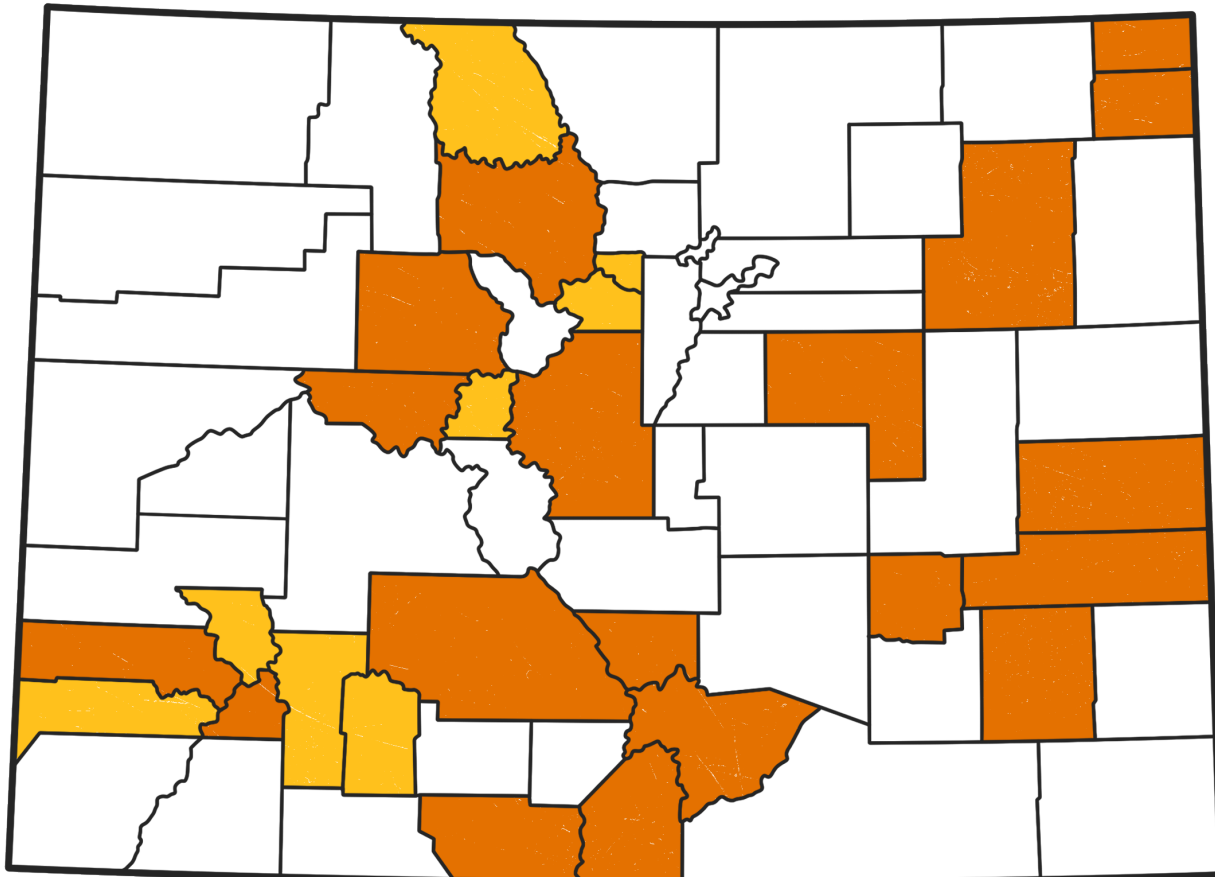
- **Medicare:** As the most prevalent form of health coverage for older Coloradans, Medicare provides a unique avenue to address affordability challenges. As described in greater depth in the online dashboard, tracking changes in both Medicare's coverage and cost-sharing provisions offer avenues to recognize progress within this system.
- **Culturally competent health systems:** A lack of culturally appropriate care options contribute to the worse health outcomes we see amongst older BIPOC Coloradans. The absence of this type of care within our current systems was regularly noted by members of the advisory group. Discussed further on the dashboard, future progress on this need can be measured in the form of a centralized database where older Coloradans can find information about culturally and linguistically competent providers, uniform standards regarding what qualifies as training in cultural competency, and increased attention to the needs of those with intersectional identities.

FINDING 03

Systems meant to support aging Coloradans and their loved ones can vary significantly by geographic area. Unfortunately, community-based resources to support older adults and their caregivers aren't universally available across Colorado. Instead, there are notable gaps in the availability of needed supports, especially in rural counties.

Our analysis shows geographically based resource discrepancies are a significant issue plaguing the aging community. For example, as seen in the map below, Colorado has many rural counties with an inadequate supply of county-based supports for those who would like to remain in their communities as they age.

Counties with Minimal Long-Term Care Services



- County lacks a hospice provider and has only one or two home health home care, skilled nursing, or assisted living providers
- County lacks a single home health, home care, hospice, assisted living, or skilled nursing provider

There are important consequences to this finding. Fifteen percent of older adults don't live along the Front Range, and differential access to needed services can contribute to varied health and quality of life outcomes.

Measuring Future Progress

Future success on this front can be evidenced in changes to the geographic availability of essential supports which help older Coloradans remain in their homes and communities as they age. The most important services to track include hospice, palliative, and direct care services. Additional maps found on the online dashboard show which communities lack adequate county-based access to the above-mentioned services. In the coming years, we'll be able to measure progress based upon the continued or diminished prevalence of geographic-based disparities on these maps.

Levers for Progress

Building a uniformly strong network of community-based services requires state support. The following mechanisms offer meaningful avenues to accomplish this goal:

- **Colorado's Area Agencies on Aging:** A statewide network of community-based providers, [Colorado's Area Agencies on Aging](#) (AAA) are vital resources which provide and coordinate many of the services older adults need. As noted throughout our dashboard, their work is key to supporting financial and physical health, the ability to live in one's community of choice, and quality of life outcomes. Despite the vital role they play in supporting older adults and all those connected to them, we know many of our AAAs are under resourced and overstretched. In the coming years, we can track our commitment to this network by examining whether funding keeps up with the growing population these agencies are charged with serving.
- **Medicaid reimbursement rates:** [Low Medicaid reimbursement rates](#) are a significant challenge to providing many aging services, including respite and direct care support. While a statewide issue, low rates are especially problematic in rural areas and exacerbate already existing challenges. Over the coming years, at a minimum, rates should at least keep up with inflation and the growing cost of living.

Large data gaps make it difficult to holistically assess the well-being of older Coloradans.

A lack of quality, disaggregated data challenges our ability to adequately understand the opportunities and obstacles many older Coloradans face.

In developing this report, we pulled data from a range of state, federal, and local sources. Throughout all of this, however, we were regularly challenged in our ability to find comprehensive quantitative information. Most notable were the:

- **Near complete absence of data about certain populations:** Within most large data sets, there was, at best, a very limited ability to find specific information about older Coloradans with disabilities or those who identify as part of the LGBTQ+ community. Concerningly, we know older Coloradans from these groups have specific needs, such as accessible housing and the provision of culturally appropriate care, which foster health and well-being in older age.

Concerningly, there are some proof points that Colorado is doing an inadequate job in supporting older adults from these communities. [Surveys](#) conducted by One Colorado show tremendous access and cost challenges for those in the LGBTQ+ community. Similarly, failure to meet reasonable accommodations standards continues to be one of the [top complaints](#) about state and federal housing programs.

- Lack of adequately disaggregated data: Data challenges were also prevalent when we had some, but often incomplete information, especially as related to the following communities.
 - **BIPOC communities:** Much of the available data about race and ethnicity in Colorado comes from the Census Bureau. Concerningly, we know surveys from this source regularly undercount [BIPOC individuals](#). Equally problematic is the lack of disaggregated data about communities within a larger racial or ethnic group. For example, we know the Latinx community in Colorado is not homogenous, yet they are often treated as such in official data sources.
 - **Rural communities:** Challenges also exist when examining data as it relates to rural communities, as most of the current information provides only county-level snapshots. However, in many rural areas, counties are very large, and demographics and access to needed services are non-homogenous. Instead, there can be vast differences and discrepancies within a single county.

These data gaps have real and important consequences. Notably, we can't address problems we don't know exist, and right now, there are a lot of things we don't know about older adults throughout our state. Of especial concern is the fact many of these gaps exist in relation to historically marginalized and discriminated against communities.

Measuring Future Progress

We can address these gaps in data by investing resources into the collection and disbursement of comprehensive, culturally inclusive, replicable data. We'll be able to tell whether this investment is happening based upon the ability of researchers to develop better disaggregated analyses. Larger progress in collecting the type of data mentioned above will be evident if organizations like the Bell can offer new levels of disaggregated analysis within reports such as this one. Notably, as we update and build out the findings from this initial State of Aging, we will be looking for, and hoping to include, these new data sources in future iterations.

Levers for Progress

Fortunately, there are many opportunities to improve the data we collect. Most notably, we can do this through the inclusion of targeted questions on already existent evaluations and surveys. We don't have to create new tools to collect better data. Instead, we can simply alter the way we currently collect and analyze information. Each of the programs mentioned in this report and accompanying dashboard are required to collect information about and report on outcomes. By adding questions to these existing instruments that expose the differential experiences of members within our aging community, Colorado can make progress on this important issue.



FINDING 05

Recently, Colorado has made progress in adopting important policies supportive of older adults. Monitoring and assessing the impact of these initiatives will be crucial over the coming years. Many state leaders have already recognized the need for better systems to support our changing demographics, as evidenced by a host of new programs and initiatives. Monitoring the progress of this work and advocating for needed change will be pivotal as these efforts become more fully developed. Fortunately, throughout the past couple decades, many forward-looking leaders in Colorado have recognized the need for stronger, and sometimes new, systems that can meet the evolving needs of our communities. This has resulted in several new programs and initiatives, many of which are only just now getting off the ground. These include:

- **Paid family and medical leave:** In 2020, Colorado became just the eighth state in the country to pass a measure creating a [paid family and medical leave program](#). We know programs like these are [essential](#) to supporting caregivers and helping older adults remain in the workforce and in their homes and communities.
- **Paid sick leave:** During the 2020 legislative session, Colorado passed a new law giving most workers paid sick leave. As with paid family and medical leave, we know workplace supports like this are valuable for [older workers](#).

- **Secure Savings Program:** As mentioned earlier in this report, Colorado created this program in 2020 to help individuals [save for retirement](#) and protect against economic insecurity in older age.
- **Wage increases for direct care workers:** Recognizing the tremendous disparity between the value of the direct care workforce and workers' wages, state legislators and department leaders have taken several steps to increase compensation for those who provide direct care support. Most recently, this involved a mandatory wage increase for these individuals, temporarily paid for with federal relief dollars, to [\\$15 per hour](#). As the Bell has documented multiple times, [low wages](#) are a prime contributor to instability within this workforce.

These efforts and initiatives represent significant progress and are capable of creating better outcomes for older Coloradans. However, long-term sustainability and robust outcomes are not guaranteed. Instead, constant vigilance and monitoring of this work are required to ensure intended results.

Measuring Future Progress

As these efforts are stood up, we'll know they're succeeding based upon their:

- **Accessibility, specifically to those who are most marginalized within our existing systems:** As we've noted throughout this report, there are tremendous disparities in outcomes for older adults based upon demographic characteristics. These new programs can make a difference in closing some of the gaps we've identified. To do so, however, programs must be truly accessible to all older Coloradans and their caregivers. We'll be able to tell if this is happening based upon program enrollment and utilization data.
- **Sustainability:** That this progress will last into the future is not a given. For example, the above-mentioned increased minimum wage for direct care workers only has a reliable, guaranteed funding source through mid-2024. Afterward, funds will need to be appropriated yearly from state coffers. In part, we'll be able to assess, the success of these efforts based upon their long-term continuity.
- **Success in meeting stated goals:** Whether it's increased retention of direct care workers, greater retirement savings, or a reduction in nursing home utilization, these new programs each have some measure by which we can assess whether they're meeting stated goals. Charting progress against these metrics can tell us how these programs are actually doing. This can help to identify whether programmatic or policy adjustments are needed.

Levers for Progress

As of late 2021, each of the previously mentioned programs and initiatives are still being set up. As a result, we have yet to understand which aspects of these efforts will need adjustment. However, if analysis and examination of these programs does show a need for change, existing budget, rules, and regulatory processes are avenues which can be used to make necessary adjustments.

Looking Ahead

This report and accompanying dashboard showcase the many opportunities and challenges ahead of Colorado as our state continues to age. In our research, we find too many older Coloradans are economically vulnerable, racial and geographic disparities persist, and data gaps make it difficult to truly assess progress. However, we also know there have been many promising efforts over the past several years which we can build from to create a stronger state.

This report is just the beginning of the work needed to better understand how older Coloradans, and the systems they rely upon, are doing. In the short term, these findings offer a platform to better dive into other factors which contribute to the outcomes spotlighted in this work. More importantly, however, is the long-term value of these metrics. By themselves, these findings tell us where we currently are, but by examining these same data points in the coming months and years, we'll be able to more completely understand whether we are succeeding in creating an equitable, healthy state for everyone to age.

