

NEXT
50[®]



AGING *at* ALTITUDE

*Why It's
Expensive to
Age in Colorado*

INTRODUCTION

THE BIG PICTURE

Aging is a process we all have in common, and we all dream of a future filled with health, financial and housing security, and community.

That’s Next50’s vision for older Coloradans, too. However, the stark reality is that rising costs are creating a financial crisis for many older adults in Colorado.

This report focuses on the costs of aging for Coloradans beginning at age 50. We introduce you to **Julie, Miguel, and Nancy**, whose experiences help illuminate the many challenges related to the high cost of aging in our state.

Economic insecurity affects one in five older Coloradoans, a disproportionate number of whom live outside the Front Range or identify as Black, Indigenous, Hispanic, Asian, and other people of color. Not only is it expensive to age, but these costs impact everyone, regardless of how old you are. **This is a call to action that, as a state, we must confront the high cost of aging head-on.**



CASE STUDY: JULIE, 56

BALANCING LOVE IN BOTH DIRECTIONS

With two children preparing for college and an aging mother who recently suffered a stroke, Julie is in the “sandwich generation,” juggling full-time work, caregiving, her own health, and her own financial future. ■



FINANCES & AGEISM

Julie hopes to retire in the next decade, but feels financially and emotionally tied to her job. The cost of caregiving, especially frequent trips to her mother’s rural home, has made saving for retirement more difficult than expected. She’s also started to notice subtle ageism at work. Despite her 25 years of sales experience, she’s repeatedly been passed over for internal promotions, speaking opportunities, and conferences. While no one says that she’s been sidelined, she feels undervalued and worries she may be pushed out before she’s ready.



DIGITAL ACCESS

Julie is concerned about her mother’s lack of reliable internet access in rural Fort Lupton. After her mother’s stroke, staying connected by phone, email, and online services became critical for her mother’s safety and mental health, yet affordable and dependable options are limited in her mother’s area. Past attempts to help her mom sign up for services have led to near-scams, deepening her mother’s distrust of providers. Julie hoped the Affordable Connectivity Program might help, but its expiration due to lack of federal funding cut off a vital pathway for families like hers. Julie constantly needs to fill in the gaps to help her mom.



MOBILITY & TRANSPORT

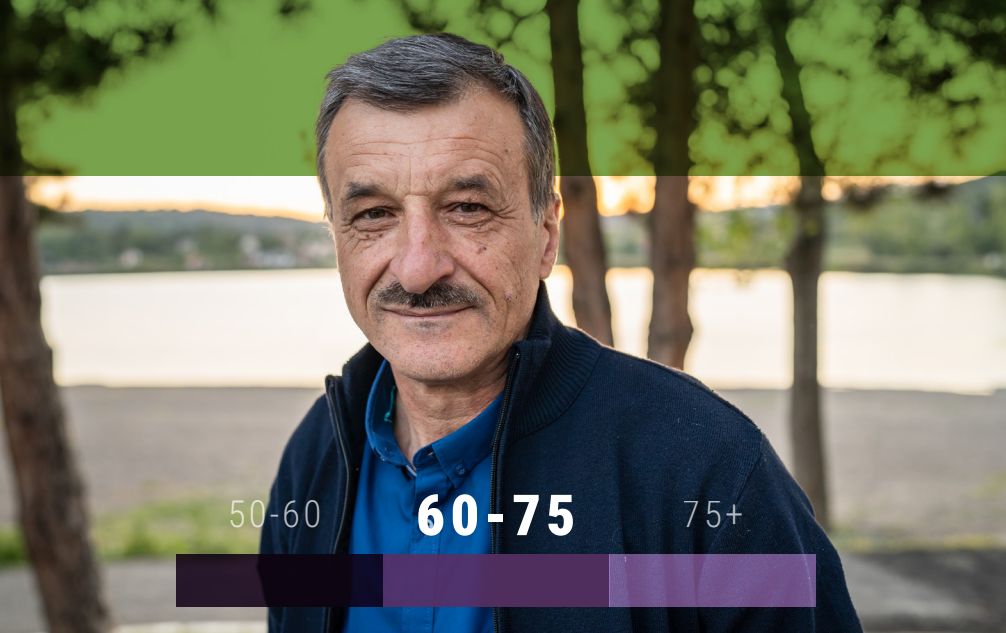
Her mother can no longer drive after her stroke, leaving Julie responsible for transporting her to appointments, grocery stores, and other errands. Each trip to visit her mom in Weld County requires a two-hour round-trip drive from Julie’s urban home to her mom’s rural town. The cost of fuel, car maintenance, and lost time is growing, as is Julie’s exhaustion. These long commutes impact Julie’s ability to be present with her children and at work, increasing her stress. Her situation underscores the lack of coordinated transportation services for older adults in rural Colorado, which often shifts the burden onto family caregivers — most often women.



HOUSING & CARE

Julie’s home is stable, and she has the support of a steady marriage. Still, she is deeply concerned about her mother’s housing. It’s unclear whether her mother can continue to live independently. Affordable, accessible care options are limited near her mother’s home, and Julie is unsure whether her mother would even be open to relocating closer to her family. At the same time, Julie is going through menopause and managing physical and emotional changes while trying to remain steady for everyone else. Despite doing everything she can to hold it all together, Julie feels trapped between generations with few safety nets of her own.

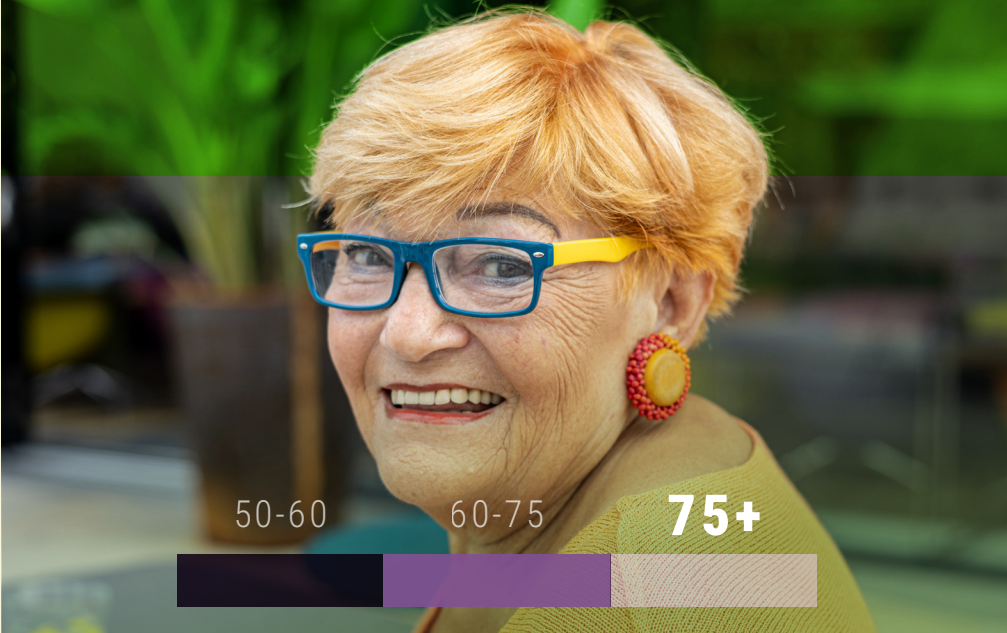
“I’m spending less time with my kids and wondering how to put money away for their education and catch up on my own retirement savings.”



CASE STUDY: MIGUEL, 68

HOLDING STEADY,
EVEN WHEN THE
GROUND SHIFTS

Miguel, a 68-year-old Mexican immigrant and non-native English speaker, faces intersecting barriers as he considers retirement, researches housing options, and deals with social isolation and declining physical health. ■



CASE STUDY: NANCY, 84

SLOWING DOWN
AND SPEAKING UP
AS LIFE UNFOLDS

Nancy is an 84-year-old in Weld County, Colorado. A grandmother, widow, and stroke survivor, Nancy is facing the realities of aging while managing health challenges, financial strain, and the limits of a rural town. ■



FINANCES & AGEISM

Miguel is nearing retirement and wrestling with the emotional and financial implications. He likes the structure of work and enjoys his job as a maintenance worker for the school district. He's afraid that he'll lose a sense of purpose and connection when he leaves. Financial planning is a stressor for Miguel, who fears outliving his savings and burdening his family.

Miguel shared health concerns with a doctor who attributed his symptoms to aging. Miguel felt dismissed, and it took two more years for him to get a specific diagnosis. Miguel wishes he could have seen a doctor who specialized in geriatric medicine and spoke Spanish.



DIGITAL ACCESS

Miguel has internet and a smartphone, but his digital literacy is limited. Navigating online systems related to health and housing can be frustrating and overwhelming. Since English is Miguel's second language, he feels especially vulnerable to online fraud and misinformation, and he's already been targeted by scams more than once.

A community health worker has helped Miguel immensely, setting up appointments for him and showing him how to use an online calendar. As systems move increasingly online, Miguel feels a need for trusted, ongoing digital navigation support from a real person in his community.



FINANCES & AGEISM

Nancy lives on a fixed Social Security income. To help manage housing costs, she uses a Housing Choice Voucher (formerly known as Section 8), which subsidizes part her mortgage and utilities. This allows her to stay in her home despite limited income, but she still fears displacement.

With rising costs of transportation, medical care, and everyday essentials, expenses are tough to cover. Nancy spent over \$200 on taxis last month. Though she's spent decades contributing to her family and community, she finds herself in a vulnerable, emotionally taxing position, dependent on her daughter and local services to meet her needs.



DIGITAL ACCESS

Nancy's lack of reliable digital access and literacy is a significant barrier to her health, social life, and independence. Following her stroke, her doctor recommended telehealth, but without broadband in her area or a working device, it simply isn't an option. Nancy can't afford a new laptop or smartphone and is cut off from services and connections others take for granted. Her lack of access leaves her disconnected from family members who aren't local, and puts her at risk for scams.



MOBILITY & TRANSPORT

He used to be a confident driver, but now Miguel avoids driving at night. His worsening health has made it harder to get around, and though he still maintains some independence, his world is becoming smaller. Limited public transportation in his part of Colorado mean Miguel depends on friends or health workers for rides to appointments or errands.

These changes are affecting his autonomy and social network. While Miguel hasn't yet stopped driving entirely, he's aware that day may be coming when he has even more limitations on his freedom and connection to community.



HOUSING & CARE

Miguel lives alone in a home that no longer meets his needs. He's explored home modifications, but they are too pricey to outsource, and he can't manage them on his own. He's considering 55+ retirement communities but is unsure if they'd be a financial or cultural fit.

As his health needs change, living independently feels less sustainable. In-home care is expensive, and local Medicaid-accepting facilities have long waits. Miguel is torn between a desire for independence and a need for support. He relies heavily on a community health worker to help him manage online appointment scheduling and access Medicaid benefits.



MOBILITY & TRANSPORT

After her stroke, Nancy's doctor instructed her to stop driving. Since then, getting to and from medical appointments, therapy, and the grocery store has become one of her biggest challenges. Her rural town has limited public transportation, so she relies on her daughter or neighbors when they're available. When they're not, she has no choice but to pay for taxis, which is an unsustainable cost on her fixed income.



HOUSING & CARE

Nancy has lived in her home for decades. But now, with her own health declining, aging in place feels increasingly unsustainable. Local support from the Weld County Area Agency on Aging has helped extend the time she can remain in her home. Through their programs, she receives home-delivered meals and had grab bars installed in her bathroom. Still, the question of how to maintain her home and preserve her independence remains heavy and unresolved.

ECONOMIC & DEMOGRAPHIC OVERVIEW

REALITY CHECK

It’s expensive to age in Colorado.

Getting older is getting more expensive, especially in Colorado. Costs associated with health care, transportation, and housing can increase as we age, and the financial realities for many older adults reveal growing difficulty in meeting basic needs. The situation in Colorado is particularly concerning.

More Aging Coloradans

Colorado is one of the fastest-aging populations in the nation. Colorado now has more people over 60 than under 18. Between 2010 and 2020, the number of residents aged 65 and older increased by about 58%, significantly outpacing the state’s overall population growth of 15%. This rapid growth places an escalating financial strain on both aging individuals themselves and the state’s overall resources.

“I’m constantly juggling the needs of my kids and my mom. After her stroke, my mom relies on me to get her to the store and doctor appointments. Her rural town is over an hour each way, so I’m spending hundreds each month on gas and the wear and tear on my car. Meanwhile, I’m spending less time with my kids and wondering how I’m going to put money away for their education and my own retirement.” **Julie**

20% NEAR THE POVERTY THRESHOLD

of older residents live at or below 200% of the federal poverty threshold, with even higher rates within communities of color.

26 NATIONAL RANKING FOR SINGLES

Nationally, Colorado ranks 26th for older singles and 38th for older couples living below the Elder Index, a tool that considers essential costs like housing, healthcare, food, and transportation.

45.5% LIVING BELOW THE ELDER INDEX

Nearly half of older adults live below the Elder Index (how much income older adults needs to meet their basic needs).

13.7%

of older adults live below the poverty line.

+20% ABOVE AVERAGE HOUSING COSTS

Housing in Colorado costs approximately 20% more than the national average, and the cost of housing in Denver is 37% more than the national average.

+30% MEDIAN RENT INCREASE SINCE 2010

Since 2010, median rent in Colorado has increased by 30%, and the cost of a new home has increased by nearly 50%.

+10% INCOME GROWTH SINCE 2010

Over the same period, income among people ages 65 or older has grown by just 10%.



Housing & Long-term Care

We know that older adults want to live in their homes and communities for as long as they safely can. At the same time, older adults are more likely to face higher health costs and fixed incomes, both of which contribute to less affordable and less stable housing situations.

Today, about one-third of older adults are housing cost-burdened, meaning they are spending more than 30% of their total income on housing. If current trends continue, more than half a million older Coloradans are at risk of being housing cost-burdened by 2030.

Aging in home is not always feasible for older adults for various reasons, yet the alternatives, such as independent living, assisted living, memory care, skilled nursing facilities, and home care, are cost-prohibitive.

“It’s harder for me to stay in my home due to my health condition, and I worry I need more care than I can get living on my own. In-home care is far too expensive for me, and there are barely any facilities nearby that accept Medicaid. Those that do have months-long waiting lists. What am I supposed to do when I can no longer take care of myself at home?” **Miguel**

“My home is all I’ve ever known. The thought of having to move due to costs and caretaking needs is daunting, both emotionally and financially. Luckily, the Weld County Area Agency on Aging in my town has provided support – like home-delivered meals and a maintenance service that installed grab bars in my bathroom – so I can stay in my own home while receiving the care I need.” **Nancy**

Housing & Care Costs

| Care Category | Colorado Average Monthly Cost (2023) | National Average Monthly Cost (2023) |
|-----------------------------|--------------------------------------|--------------------------------------|
| Independent Living | \$5,244 | \$3,065 |
| Assisted Living | \$5,073 | \$4,995 |
| Memory Care (Estimate) | \$7,149 | \$6,450 |
| Nursing Home (Semi-Private) | \$9,475 | \$8,669 |
| Nursing Home (Private) | \$10,433 | \$9,733 |
| Home Health Aide (Hourly) | \$36 | \$30 |

While the total cost depends on the amount of care needed, for older adults requiring extensive support, this can become a substantial monthly expense. Medicaid may cover both types of care for income-qualified older adults, and Medicare’s coverage is limited in many in-home services. Long-term care insurance is designed to cover some of these costs, but policies vary in their coverage, and premiums are lowest when purchased at a younger age. Only 11% of Colorado adults 65+ have long-term care insurance, leaving the vast majority vulnerable to catastrophic costs.

The financial strain of housing and care can lead to instability and force difficult choices among essential needs. In extreme cases, financial strain can even lead to homelessness. In fact, older adults are the fastest-growing demographic of unhoused individuals in Colorado, many of them experiencing homelessness for the first time.

There are several nonprofit organizations working to address these challenges like **Homeward Alliance** in Fort Collins, which offers housing-based case management, **Brothers Redevelopment** in Denver offering housing-related services, and **A Little Help** that focuses on empowering older adults to thrive in their homes and communities. Yet, the need remains great.

Transportation

Transportation is another essential expense for older adults. The lack of access and affordability can often prohibit older adults from attending health appointments, going shopping, and enjoying other social activities. In the Denver metropolitan area, the Regional Transportation District (RTD) offers discounted fares for adults aged 65 and older. However, for older adults requiring more personalized or frequent transportation, private transportation services are available but can be significantly more expensive. The average starting cost for personalized and accessible transportation in the metro area is \$23.89 per hour or \$20.44 per hour in the Colorado Springs area. Hourly rates translate to substantial weekly and monthly costs for older adults requiring regular assistance.

The need for affordable and accessible transportation increases in the rural areas of

Colorado. Nonprofit partners like **60+ Ride** in Greeley or **Via Mobility** in the metro Denver area can save thousands of dollars annually for older adults needing transportation.

Compounding the transportation issue, approximately 17% of Colorado’s older population lives in rural counties, where healthcare provider shortages are acute and patients forgo seeking care or are forced to travel greater distances to receive care. Often, this translates to poorer health outcomes. For example, Coloradans in rural areas are seven times more likely to report poor general health than those in metro areas. Of Colorado’s 64 counties, 13 have no hospital and 11 counties have no pharmacy, creating both direct costs (travel expenses) and indirect costs (delayed care leading to more severe and expensive health issues).

“My doctor instructed me to give up driving after my stroke. Living in a rural area with limited bus service, I rely on my daughter or neighbors to help with transportation to doctor’s appointments or the grocery store. If they’re not available, I have to pay for a ride service. Last month, I spent over \$200 on that alone. It’s the most challenging part of my budget to manage.” **Nancy**





Digital Access

Today, technology is a basic need for reducing isolation and promoting health and wellness. Creating equitable and affordable access to technology will improve the economic well-being of older adults. Digital equity encompasses not only access to affordable, high-speed internet and suitable devices, but also the necessary digital literacy skills and technical support to effectively use these resources. Lack of connectivity can lead to social isolation and disconnection from essential services like telehealth, disaster preparedness information, and employment opportunities. One in 20 Coloradans lack broadband access in their homes, including 8% of older adults.

“With my mom over an hour away, I’m desperate to get her reliable internet for both for social and safety reasons. She’s limited on what services she can afford and options are sparse in Fort Lupton. She’s almost been scammed, so she’s skeptical when talking to anyone with an internet company. I heard about the Affordable Connectivity Program, which offers internet discounts to eligible households, but it ended due to a lack of congressional funding. It could have really helped my mom.” **Julie**

“During COVID-19, everything moved online: my appointments, my church services, even keeping in touch with my grandkids. I had a very old computer, and it couldn’t handle video calls. I can’t afford a new laptop and internet. Even a smartphone is too expensive for my budget. I’d love to FaceTime with my grandkids and catch up with old friends on Facebook; I’m just not sure how and I miss them.” **Nancy**

74% BELIEVE AGE CAN BE A HIRING BARRIER

AARP found that 74% of older Americans believe their age could be a barrier to getting hired.

50% LEAVE JOBS BEFORE THEY WANT TO

Over half of long-time employees 50 and older are forced to leave their positions before they want to, and only 1 in 10 ever fully recover financially from these setbacks.

\$850B ANNUAL COST OF AGEISM

In the U.S., workplace age discrimination is estimated to cost the economy a staggering \$850 billion annually.

Financial Implications of Ageism

Ageism — discrimination based on age — has significant economic implications for older adults. About one in three older Coloradans are active in the workforce and many older adults are delaying retirement due to economic factors. Yet over 30% of older Coloradans report experiencing workplace age discrimination.

This discrimination can take many forms, like being pushed into early retirement, denied promotions, not receiving offers to interview for positions they are qualified for, and more. The fear of age discrimination is widespread among older workers, and this fear is merited.

Ageism is also evident in healthcare settings, where it can influence both the quality and expense of care provided to older adults. Ageism in healthcare is estimated to cost the U.S. economy \$63 billion annually.

The intersection of ageism with other forms of discrimination, like sexism and racism, can compound economic challenges. Older women who take time away from work to care for children or aging relatives may face gender- and age-based discrimination when trying to re-enter the workforce. Older immigrants of color often experience combined effects of racism, sexism, and ageism, making it even more difficult to secure employment and financial stability.

“When I told my doctor I was struggling with increasing joint pain and stiffness, he said it was because I was getting older. It felt like he didn’t take me seriously because of my age and because I am an immigrant. I went two years without a diagnosis. When I was diagnosed with rheumatoid arthritis and started treatment, my condition had progressed so much that I was no longer able to work full time and live independently without significant care from others. I wonder how things would be different if I had been listened to from the start.” **Miguel**

“I’d like to retire in the next 10 years, but I need to keep working to care for my mom and her health and housing needs – not to mention my kids and their college aspirations. I fear I’ll be pushed out of my career in software sales given my age. I’ve applied for internal promotions and am told I’m not a “culture fit” or I lack necessary skills, despite 25 years of relevant experience. It’s so frustrating! Overlooking the benefits of a multi-generational workforce means losing out on knowledge, diverse perspectives, and problem-solving skills that older employees like me bring to the table.” **Julie**

Fraying Support Systems

Community-based organizations serving older adults face an increasingly precarious situation despite their critical role in Colorado’s aging infrastructure. Next50 grants support many such organizations to provide essential services — from home care and meal delivery to transportation and healthcare navigation — that allow thousands of older adults to maintain independence and dignity. These organizations’ financial foundation, however, built primarily on government funding and private donations, is crumbling under significant cuts by the Trump administration. This systematic defunding threatens the very existence of our state’s aging safety net at a time when demographic shifts demand expansion rather than contraction of these vital supports.

“English isn’t my first language, so figuring out the U.S. healthcare system has been a challenge. Nancy connected me with a community health worker that schedules doctor’s appointments for me and helps me access Medicaid benefits. As my health begins to decline, I’m not sure how I’d coordinate these healthcare needs on my own.” **Miguel**



POLICY RECOMMENDATIONS

POLICY RECOMMENDATIONS FOR AFFORDABLE AGING

While older Coloradans face significant challenges, Next50’s nonprofit partnerships are making meaningful improvements. The recommendations listed below would strengthen support for all of us as we age.

Housing

Safe and affordable housing is critical for meeting the needs of older adults.

- Expand tax exemption and tax credits for low-income older adults.
- Increase affordable housing for senior housing developments.
- Require units of multi-family developments to be accessible.
- Create tax incentives for developers to incorporate universal design principles.
- Develop a state benefit that supplements federal programs to help cover long-term care costs.

Transportation

A system-wide approach will make transportation more accessible and more affordable.

- Increase funding for existing older adult transportation programs through a dedicated revenue stream.
- Introduce economic development strategies to draw transportation service providers to rural communities.
- Develop volunteer driver programs with tax incentives for participants.
- Create zoning incentives for senior housing developments near existing public transportation hubs.
- Develop a transportation voucher system for older adults in areas with limited public transportation options.

Digital Access

Recent state initiatives identify older adults as a priority for digital access support, but widespread implementation is needed to address the severe economic impacts of this divide.

- Create a monthly subsidy for low- and moderate-income older adults to offset internet service costs.
- Develop equitable, innovative digital education programs to facilitate access to financial or workforce resources.
- Expand telehealth infrastructure and increase broadband.
- Prioritize digital fraud and scam prevention.

Ending Ageism

For the economic impact alone, we must fight against ageism in our society.

- Create age-inclusive workforce, human resources, and healthcare training.
- Strengthen and enforce age discrimination laws to protect older workers from unfair employment practices and promote their continued participation in the workforce.
- Implement healthcare price transparency measures to reduce age-based disparities.

While our state’s existing advocacy groups provide valuable services, none solely champion comprehensive affordability solutions for older adults. Colorado needs a dedicated advocacy organization focused exclusively on affordable aging to drive systemic change.

CONCLUSION

THE BOTTOM LINE

Getting older in Colorado shouldn't come with a financial burden too heavy to bear. As Julie, Miguel, and Nancy have helped us illustrate, the rising costs of housing, healthcare, transportation, food, and staying digitally connected, alongside the harmful effects of ageism, are making it harder for older adults to live with security and dignity.

This isn't just frustrating for older adults and their families, it's unacceptable. It's time for bold, coordinated action across policy areas to tackle the high costs of aging head-on. With its newly announced 10-year Multisector Plan on Aging, Colorado has an opportunity to lead the way in creating a future where aging in place is not only possible but fully supported.

Through thoughtful implementation of the recommended policies, and the financial support of government, business, and philanthropic agencies, Colorado can transform the experience of aging from one of financial anxiety to one of security, dignity, and continued contribution to the vibrant communities that make our state special.

Colorado needs a dedicated advocacy organization focused exclusively on affordable aging to drive systemic change.



Want more information?

Learn more about this report at next50foundation.org/about-us/reports/

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