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Best Cities for Successful Aging

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Introduction by Paul H. Irving



MILKEN INSTITUTE

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ABOUT THE MILKEN INSTITUTE

A nonprofit, nonpartisan economic think tank, the Milken Institute works to improve lives around the world by advancing innovative economic and policy solutions that create jobs, widen access to capital, and enhance health. We produce rigorous, independent economic research—and maximize its impact by convening global leaders from the worlds of business, finance, government, and philanthropy. By fostering collaboration between the public and private sectors, we transform great ideas into action.

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INTERACTIVE DATA

Infographics and data for each metro area as well as tools for policymakers can be found at www.milkeninstitute.org/successfulaging.



INTRODUCTION

America is growing older. The implications and costs of this extraordinary demographic shift are now upon us. In the public arena, every day brings hand-wringing from leaders in government and business over the increasing strains on social safety nets and health-care systems. On a personal level, we want to know where we'll live, how we'll take care of ourselves, and whether we'll enjoy meaning and dignity as we age. How should we respond to the aging of America?

Of course, there are societal and personal challenges that may seem daunting and must be addressed. But it's not all dire news. Aging Americans want to remain healthy, active, engaged, and contributing members of society. They represent not only a challenge but also an opportunity—the chance to build a better and stronger America.

Across the country, leaders are developing exciting solutions to enable *successful aging*. Policymakers are driving senior-sensitive civic projects to improve aging lives. With 80 million boomers on their way to senior status, entrepreneurs and business leaders are seeking to capitalize on the emerging opportunities presented by the massive longevity economy. Innovation abounds—from new approaches to wellness and health-care delivery, to senior-friendly housing and transportation systems, to encore education, career, and engagement opportunities, to aging-centered technologies and social networks, to travel, entertainment, and leisure.

To shine a light on the best of these programs and encourage new ones, the Milken Institute is proud to present the first *Best Cities for Successful Aging™* index, which measures, compares, and ranks the performance of 359 U.S. metropolitan areas in promoting and enabling successful aging.

What Is Successful Aging?

Successful aging is vitally important to all of us. We all want it for ourselves, and for our parents and grandparents. While each one of us has specific interests, needs, and priorities related to our own aging, at the Milken Institute, we define successful aging in America this way:

- » **We want to live in places that are safe, affordable, and comfortable.** We compiled statistics on cost of living, employment growth, jobless rates, income distribution, crime rates, alcoholism, and weather.
- » **We want to be healthy and happy.** We looked at a range of factors, including the number of health professionals, hospital beds, long-term hospitals, and facilities with geriatric, Alzheimer's, dialysis, hospice, and rehabilitation services. We also examined hospital quality and affiliation with medical schools. To determine the general wellness of a community, we studied the rates of obesity, diabetes, Alzheimer's, smoking, and mental illness and looked at the availability of recreation, wellness programs, and other healthy pursuits.
- » **We want to be financially secure and part of an economy that enables opportunity and entrepreneurship.** We examined each area's tax burden, small-business growth, poverty levels, and employment rates for those 65-plus, and the number of reverse mortgages.
- » **We want living arrangements that suit our needs.** We compiled statistics on the costs of homeownership and rental housing, nursing homes, assisted living facilities, and home health-care providers, and checked for programs that help pay for senior housing.
- » **We want mobility and access to convenient transportation systems that get us where we want and need to go.** We studied commute times, fares, the use of and investment in transit for the public and for seniors specifically, and the number of grocery stores and other key retailers.
- » **We want to be respected for our wisdom and experience; to be physically, intellectually, and culturally enriched; and to be connected to our families, friends, and communities.** We compiled statistics on volunteerism, employment opportunities, and factors relating to encore careers, and we reviewed indicators including access to fitness and recreational facilities, training and education, senior enrichment programs, museums, cultural and religious institutions, libraries, and YMCAs, as well as the proportion of the population 65 and older.

We used all those factors and more to develop our *Best Cities for Successful Aging* index. The overall rankings are based on eight subcomponents (general indicators, health care, wellness, living arrangements, transportation/convenience, financial well-being, employment/education, and community engagement). Each subcomponent is based on multiple individual indicators—78 indicators in all.

How Is the Index Different?

There have been aging rankings before, often based on opinion and speculation, or focused on a limited aspect of aging. But the Milken Institute's data-driven approach represents a deeper level of analysis. Developed by our research staff with input from our Best Cities for Successful Aging Advisory Committee (see page 57 for the list of experts), the index rankings are based on a weighted, multidimensional methodology that examines the factors above and others that help determine the quality of life for older Americans.

Don't confuse the Milken Institute *Best Cities for Successful Aging* index with the many rankings and opinion polls that identify the sunniest or most inexpensive spots to live out retirement. Up to 90 percent of older Americans want to age in place, according to a recent survey by AARP, and our goal is to enhance their communities so they can do so with the greatest quality of life possible.

As you review the findings, you will see three main rankings for each city: one for the aging population overall, one for those 80 and older, and one for those 65-79. We created the two sub-indexes because we recognize that seniors 80 and older may have different needs than their 65-year-old counterparts.

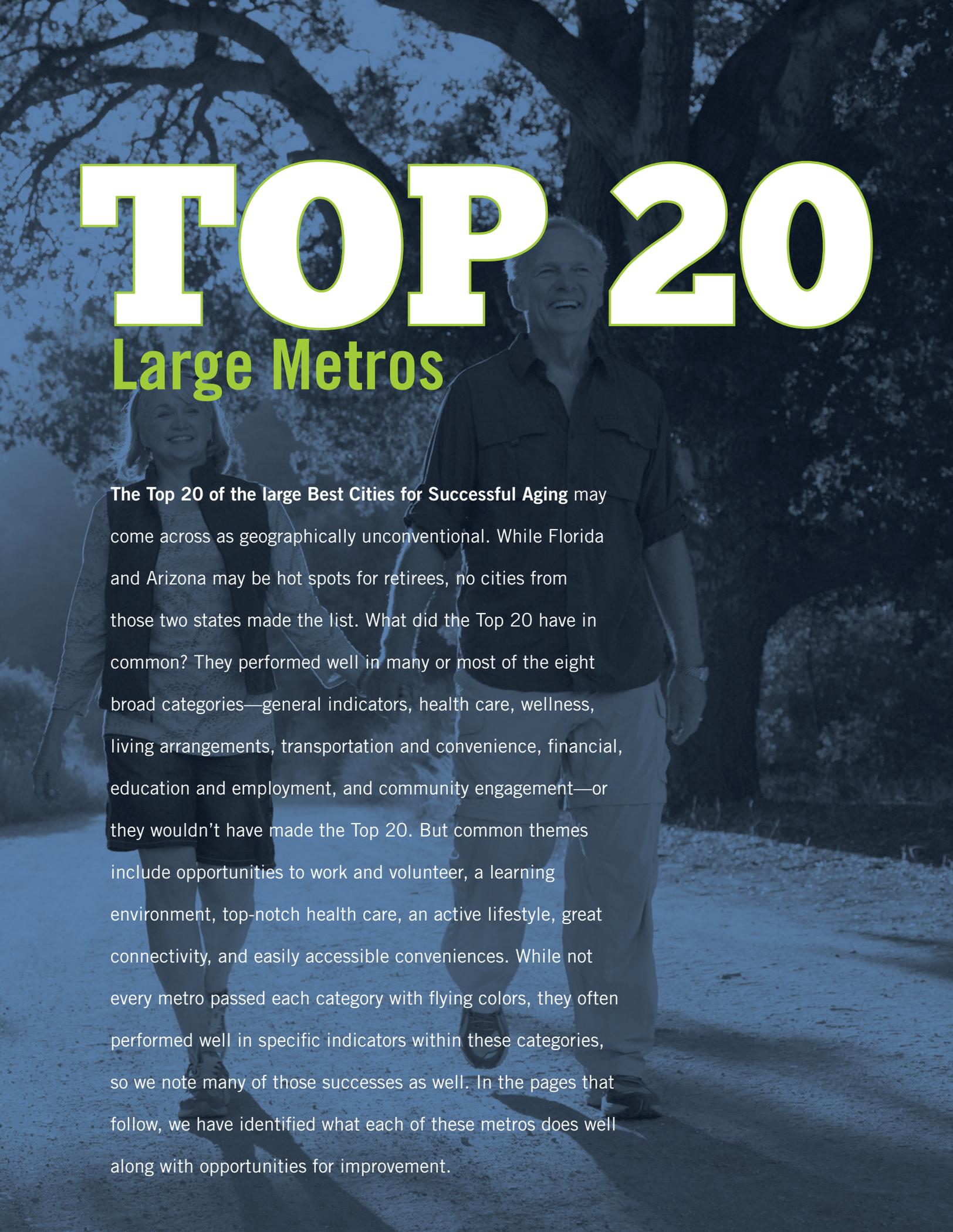
While the three main rankings rely on the same data sets, the data are weighted somewhat differently. For those 80-plus, we give more weight to factors such as health care and weather, while the sub-index for those 65-79 focuses more on active lifestyles and engagement opportunities. The overall rankings are not simply an average of the metro's performance in the sub-indexes, but are the result of their own weighting convention. (For detailed information on how the indicators are weighted, see page 37.)

The index also has separate rankings for the 100 largest cities and 259 smaller metropolitan areas to account for the disparity in their potential resources and the lack of certain data for the smaller metros.

What Is the Goal?

The Milken Institute's objectives for the *Best Cities for Successful Aging* index are straightforward. We want to generate virtuous competition among cities and galvanize improvement in the social structures that serve aging Americans. We want to encourage and promote best practices and innovation. We want to catalyze solutions-focused dialogue among thought leaders, decision-makers, and stakeholders. In short, we want to shape the future and spread successful aging across America.

We're pleased to congratulate the public- and private-sector leaders of the Milken Institute *Best Cities for Successful Aging* on their communities' accomplishments. We look forward to their ongoing achievements and to acknowledging the work of other innovative leaders as they push to improve their metros' rankings.



TOP 20

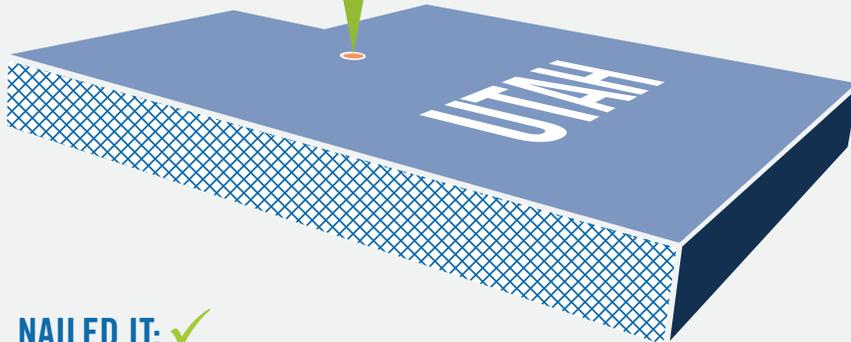
Large Metros

The Top 20 of the large Best Cities for Successful Aging may come across as geographically unconventional. While Florida and Arizona may be hot spots for retirees, no cities from those two states made the list. What did the Top 20 have in common? They performed well in many or most of the eight broad categories—general indicators, health care, wellness, living arrangements, transportation and convenience, financial, education and employment, and community engagement—or they wouldn't have made the Top 20. But common themes include opportunities to work and volunteer, a learning environment, top-notch health care, an active lifestyle, great connectivity, and easily accessible conveniences. While not every metro passed each category with flying colors, they often performed well in specific indicators within these categories, so we note many of those successes as well. In the pages that follow, we have identified what each of these metros does well along with opportunities for improvement.

Provo-Orem, UT

NO. **1** out of 100
 FOR AGES 65-79
 NO. **1**
 NO. **7**
 FOR AGES 80+

 GENERAL 15TH	 LIVING ARRANGEMENTS 61ST
 HEALTH CARE 67TH	 EMPLOYMENT/EDUCATION 3RD
 WELLNESS 1ST	 TRANSPORTATION 66TH
 FINANCIAL 3RD	 COMMUNITY ENGAGEMENT 27TH



NAILED IT: ✓

Healthy, active lifestyle

- Smoking and binge drinking rates are low.
- The metro's diabetes rate is the fourth lowest among the 100 largest metros. Combined with low obesity, this suggests residents suffer fewer chronic diseases.
- More than 5 percent of the population walks to work.
- The metro has the fewest fast-food outlets per capita, so unhealthy choices are less available.

Access to quality care and other services

- Three of the seven medical centers are Magnet hospitals.
- It has ample continuing-care facilities.
- The state of Utah (city-level data isn't available) has one of the largest pools of caregivers.
- Residents have easy access to grocery stores and conveniences.

Vibrant economy cultivates learning, enrichment

- Employment and personal incomes are growing.
- It ranks first in growth of small businesses over the past five years.
- The metro leads the rankings in per capita college enrollment and ranks high in universities and community colleges.
- It has the lowest poverty rates among seniors.

Safety, security, and a sense of community

- The crime rate is low.
- Commute times are short.
- It has one of the highest numbers of volunteers per capita.
- Many seniors live with their children.

NEEDS WORK: 🔧

- Despite a vital economy and the smallest percentage of seniors living below the poverty line, the metro has the highest unemployment rate for those 65 and older of the 100 largest metros.
- Provo-Orem is an expensive place to live.
- The metro needs to improve its pool of health-care providers and certain specialized facilities.



TAKEAWAY:

Provo has a relatively young population, but more older Americans have been moving to the metro over the past decade. A learning environment and vibrant economy provide opportunities for a second career and retraining. The presence of Brigham Young University, one of the largest private universities in the U.S., and a pro-business environment make Provo the No. 1 city on our list. It also boasts a low incidence of chronic disease, thanks to healthy lifestyles and a focus on wellness. Provo is an excellent location for seniors who are relocating or hoping to age in place, with safety, security, high community engagement, quality health care, a healthy lifestyle, and opportunities for second careers and entrepreneurship.

Madison, WI

NO. 2
out of 100

FOR AGES 65-79
NO. 5
FOR AGES 80+
NO. 4

GENERAL **69TH**

HEALTH CARE **1ST**

WELLNESS **8TH**

FINANCIAL **37TH**

LIVING ARRANGEMENTS **54TH**

EMPLOYMENT/EDUCATION **21ST**

TRANSPORTATION **69TH**

COMMUNITY ENGAGEMENT **6TH**

NAILED IT: ✓

Comprehensive health care

- Solid pool of physicians, orthopedic surgeons, psychologists, and nurses and ample continuing-care facilities.
- Hospitals include geriatric, Alzheimer's and rehab facilities.
- 8 of 9 hospitals are JCAHO-accredited.

Culture and recreation

- Recreational facilities, fitness centers, and YMCAs are abundant.
- Libraries, museums, religious institutions, etc., are readily available.

Good economic environment

- Employment is growing in sectors where seniors have higher job prospects, and the poverty rate among seniors is low.

NEEDS WORK: ⚙️

Neighborhood improvements

- Senior transportation is lacking and fares for public transportation are high.
- Binge drinking is prevalent in this college town.
- More grocery/convenience outlets would improve access for seniors.

Expensive for the Midwest

- Housing is pricy.

TAKE AWAY

Home to the respected University of Wisconsin, Madison is a hub of innovation and intellectual stimulation. A mid-size city with its own quality health-care system and cultural events, Madison and its residents also benefit from being just 150 miles from Chicago's amenities, services, and consumer markets.

Omaha-Council Bluffs, NE-IA

NO. 3
out of 100

FOR AGES 65-79
NO. 7
FOR AGES 80+
NO. 3

GENERAL **25TH**

HEALTH CARE **5TH**

WELLNESS **54TH**

FINANCIAL **41ST**

LIVING ARRANGEMENTS **6TH**

EMPLOYMENT/EDUCATION **5TH**

TRANSPORTATION **50TH**

COMMUNITY ENGAGEMENT **12TH**

NAILED IT: ✓

Expert health care

- Plenty of hospital beds and nursing facilities.
- Hospitals affiliated with local medical schools suggest state-of-the-art medical technologies and a hotbed of innovation.

Employment-friendly

- Low jobless rate overall and high employment among seniors.
- Cost of living is relatively low.
- Commute times are on the short side.

NEEDS WORK: ⚙️

Medical shortcomings and unhealthy behavior

- The metro needs more long-term hospitals and MRI clinics.
- High smoking, binge drinking, and soda consumption might increase chronic disease.
- Seniors need to be more physically active.

TAKE AWAY

The Greater Omaha area hosts the headquarters of five Fortune 500 companies, which contribute significantly to the area's financial well-being and are a testament to its low-cost environment. The metro is becoming a health-care hub for the surrounding area and a popular place for holding conferences.

Boston-Cambridge-Quincy, MA-NH

NO. **4** out of 100
 FOR AGES 65-79 NO. **6**
 FOR AGES 80+ NO. **1**

GENERAL **24TH**
 HEALTH CARE **4TH**
 WELLNESS **5TH**
 FINANCIAL **72ND**
 LIVING ARRANGEMENTS **82ND**
 EMPLOYMENT/EDUCATION **13TH**
 TRANSPORTATION **2ND**
 COMMUNITY ENGAGEMENT **15TH**

NAILED IT: ✓

Mecca for medical professionals

- Doctors, physical therapists, nurses, psychologists, and orthopedic surgeons are plentiful.
- Fitness centers are readily available, and many walk to work, indicating a healthy lifestyle.

Careers and convenience

- Employment is high for those 65+.
- Public transport is used regularly, and grocery and convenience stores are ample.

NEEDS WORK: ⚙️

Big-city blues

- The cost of living is high, owing to housing prices.
- Commuting times aren't for the faint of heart.
- Assisted living facilities can be pricy.
- Residents bear the brunt of higher taxes, and small businesses struggle.

TAKE AWAY

It almost goes without saying: Few places are as innovative or offer as many opportunities for education and retraining as the Greater Boston area, home to more than 100 colleges and universities. For culture vultures, the area is full of theaters, historic places, lively lectures, and music venues.

New York-Northern New Jersey-Long Island, NY-NJ-PA

NO. **5** out of 100
 FOR AGES 65-79 NO. **3**
 FOR AGES 80+ NO. **2**

GENERAL **45TH**
 HEALTH CARE **24TH**
 WELLNESS **9TH**
 FINANCIAL **91ST**
 LIVING ARRANGEMENTS **76TH**
 EMPLOYMENT/EDUCATION **4TH**
 TRANSPORTATION **1ST**
 COMMUNITY ENGAGEMENT **33RD**

NAILED IT: ✓

Superb connectivity to amenities

- It's no surprise that this transit-accessible metro ranks first in number of passenger trips per capita.
- Cultural enrichment opportunities include world-class museums, religious institutions, art and entertainment venues, etc.

Job opportunities

- Unemployment is low among 65+ residents. A relatively large service sector improves seniors' chances of securing jobs.
- The area has a strong fiscal base and ranks high in bank deposits per capita.

NEEDS WORK: ⚙️

A pricy place to be

- The poverty rate among those older than 65 is high.
- The cost of living and tax burden are considerable.
- Despite all that public transit, fares are high and commute times significant.

TAKE AWAY

Greater New York hosts two of the Top 20 hospitals in the U.S. Despite being the nation's financial capital, it did poorly in the financial category because of high taxes and many seniors facing financial distress. If you can afford to live there, the area has all the big-city amenities—and all the negatives, too.

Des Moines, IA

NO. 6 ^{TIE}
out of 100

FOR AGES 65-79
NO. 8

FOR AGES 80+
NO. 6

GENERAL **33RD**

HEALTH CARE **19TH**

WELLNESS **46TH**

FINANCIAL **9TH**

LIVING ARRANGEMENTS **10TH**

EMPLOYMENT/EDUCATION **16TH**

TRANSPORTATION **45TH**

COMMUNITY ENGAGEMENT **4TH**

NAILED IT: ✓

Available, affordable care

- Geriatric, Alzheimer's, hospice, and rehab services are readily available.
- Nursing and assisted-living facilities are relatively inexpensive.
- Happy-go-lucky population has low incidence of mental distress.

Ready employment

- Des Moines has high employment growth.
- A relatively large service sector offers job opportunities for seniors.
- The average commute time is short.

Cultural, educational, and community engagement

- As Iowa's cultural center, Des Moines boasts museums and other venues.
- The metro has an active senior volunteer scene.

NEEDS WORK: ⚙️

Lack of quality health care

- While care is available and affordable, Des Moines lacks magnet and long-term hospitals.
- Few seniors are engaged in regular leisure-time physical activity.
- Caregivers are in short supply.

TAKE AWAY

Des Moines has dynamic financial services and insurance industries, and its economic outlook is bright. However, the car is still king in this mid-size Midwestern city, making it difficult for seniors who no longer drive. Des Moines ranks 45th out of 100 in the transportation/convenience indicator.

Salt Lake City, UT

NO. 6 ^{TIE}
out of 100

FOR AGES 65-79
NO. 2

FOR AGES 80+
NO. 14

GENERAL **92ND**

HEALTH CARE **32ND**

WELLNESS **12TH**

FINANCIAL **2ND**

LIVING ARRANGEMENTS **94TH**

EMPLOYMENT/EDUCATION **8TH**

TRANSPORTATION **10TH**

COMMUNITY ENGAGEMENT **17TH**

NAILED IT: ✓

Solid financial infrastructure

- A solid financial base with a high volume of bank deposits.
- The tax burden is relatively low.

Access to conveniences

- Seniors have easy access to financial institutions.
- Public transit fares are low, and grocery stores are readily available.

Learning environment

- It's home to many educational institutions, including community colleges.

Abundant health-care specialists

- The metro has a high density of orthopedic surgeons and physical therapists.

NEEDS WORK: ⚙️

Pricy living, crime concerns

- Salt Lake City endures a high crime rate.
- The cost of living is steep.

Quality of care

- Better quality nursing homes and hospitals are needed.

TAKE AWAY

Salt Lake City has a strong economy with solid financial infrastructure and a well-educated population. It's a perfect place for someone looking to engage in a second career or start a business, given the atmosphere and ready access to education and retraining. However, safety is a big concern.

Toledo, OH

NO. **8**
out of 100

FOR AGES 65-79
NO. **12**
FOR AGES 80+
NO. **8**

GENERAL **36TH**

HEALTH CARE **28TH**

WELLNESS **28TH**

FINANCIAL **28TH**

LIVING ARRANGEMENTS **2ND**

EMPLOYMENT/EDUCATION **31ST**

TRANSPORTATION **34TH**

COMMUNITY ENGAGEMENT **23RD**

NAILED IT: ✓

Quality health care

- The area has 11 JCAHO-accredited hospitals.
- Toledo tops the rankings in availability of nursing beds per capita.

Affordable and active

- It boasts some of the lowest housing and rental prices of the Top 20 large metros.
- A high percentage of seniors are physically active.
- Golf courses, parks, and other recreational opportunities are plentiful.

NEEDS WORK: ⚒️

Less-than-vibrant economy

- Growth in employment and incomes is stagnant.
- Business startups have been balky over the past five years.
- Small service base makes it difficult for older people to find jobs.

TAKE AWAY

Toledo is a safe, affordable city with excellent health care and recreational facilities. But the economic environment makes it more difficult to find employment or start a new business. And although the metro is proud of its quality hospitals, it lacks specialized medical facilities.

Washington-Arlington-Alexandria, DC-VA-MD-WV

NO. **9**
out of 100

FOR AGES 65-79
NO. **4**
FOR AGES 80+
NO. **12**

GENERAL **26TH**

HEALTH CARE **31ST**

WELLNESS **26TH**

FINANCIAL **31ST**

LIVING ARRANGEMENTS **98TH**

EMPLOYMENT/EDUCATION **2ND**

TRANSPORTATION **3RD**

COMMUNITY ENGAGEMENT **63RD**

NAILED IT: ✓

Employment opportunities

- The jobless rate both overall and for those 65+ is low.
- More service-sector than manufacturing jobs suggests seniors have a good chance of finding employment.

Excellent connectivity

- The metro area has a sound transportation system with the third-highest volume of passenger trips among the large metros.
- Its many educational institutions can be tapped for education, retraining, and interesting coursework.
- Museums and other points of interest provide opportunities to volunteer.

NEEDS WORK: ⚒️

Capital of costly living

- Housing prices and rent are pricy, one of several reasons the metro ranked poorly in the living arrangements category.
- The tax burden is relatively high.
- Even the fares for public transportation are expensive.

TAKE AWAY

The Washington, D.C., metro area is a prime spot for seniors who want to work, further their education, or find satisfying volunteer work. But the area is pricy and ranks below the median in community engagement in part because its population skews younger, so seniors have fewer contemporaries.

Pittsburgh, PA

NO. 10 out of 100
 FOR AGES 65-79
 NO. 10
 NO. 13
 FOR AGES 80+

- GENERAL **22ND**
- HEALTH CARE **33RD**
- WELLNESS **25TH**
- FINANCIAL **59TH**
- LIVING ARRANGEMENTS **44TH**
- EMPLOYMENT/EDUCATION **6TH**
- TRANSPORTATION **13TH**
- COMMUNITY ENGAGEMENT **7TH**

NAILED IT: ✓

Safe and affordable

- Pittsburgh is an inexpensive place to live.
- Its crime rate is relatively low.

Highly engaged community

- It has an abundance of fitness and recreational facilities, including YMCAs.
- Seniors can connect with their peers, thanks to a large concentration of 65+ residents.
- Many community colleges are available for education and retraining.

NEEDS WORK: ⚠

Unhealthy practices and living arrangements

- The obesity rate for seniors is among the worst for large metros.
- Despite a high number of fitness centers, most seniors are not physically active.
- Pittsburgh has a high incidence of binge drinking.
- It ranks 94th out of 100 in the share of seniors caring for children.
- Nursing homes are expensive and their quality lacking.

TAKE AWAY

Top-tier education and research centers, museums and libraries, safe and affordable neighborhoods, and significant community engagement make Pittsburgh a suitable place for seniors. Although opportunities for education and retraining are available, this metro lacks mom-and-pop entrepreneurial activities.

San Francisco-Oakland-Fremont, CA

NO. 11 out of 100
 FOR AGES 65-79
 NO. 13
 NO. 5
 FOR AGES 80+

- GENERAL **10TH**
- HEALTH CARE **43RD**
- WELLNESS **6TH**
- FINANCIAL **43RD**
- LIVING ARRANGEMENTS **73RD**
- EMPLOYMENT/EDUCATION **59TH**
- TRANSPORTATION **4TH**
- COMMUNITY ENGAGEMENT **54TH**

NAILED IT: ✓

Health-conscious, connected inhabitants

- Smoking and obesity rates are among the lowest in the Top 20 large metros.
- Soda consumption per capita is also minimal.
- Many use public transportation, and grocery stores are nearby.

Top-notch hospitals and nursing homes

- JCAHO-accredited hospitals.
- The area has a ready supply of continuing-care facilities.

NEEDS WORK: ⚠

Expensive living

- Housing and rental prices, respectively, rank 98th and 96th out of 100.
- Fares for public transportation are expensive.
- The tax burden is high.

Inequality and a sluggish economy

- Employment growth is balky.
- Income is unevenly distributed.

TAKE AWAY

Beautiful weather, picturesque landscapes and a lively atmosphere make the metro by the Bay a desirable place to live. Top-notch health care, an innovative business atmosphere, public transit, and active lifestyles only add to its appeal. But the metro area has its flaws: It's extremely pricy to live in paradise.

Jackson, MS

NO. **12** out of 100
 FOR AGES 65-79 NO. **16**
 FOR AGES 80+ NO. **9**

GENERAL **41ST**
 HEALTH CARE **2ND**
 WELLNESS **96TH**
 FINANCIAL **40TH**
 LIVING ARRANGEMENTS **17TH**
 EMPLOYMENT/EDUCATION **45TH**
 TRANSPORTATION **41ST**
 COMMUNITY ENGAGEMENT **80TH**

NAILED IT: ✓

Large pool of health-care providers

- The metro has abundant hospital and nursing beds, orthopedic surgeons, nurses, caregivers, and dialysis centers.
- Hospitalization and assisted living are relatively inexpensive.

Wallet issues and neighborhood

- Binge drinking isn't much of a factor in the metro.
- Jackson has a low tax burden.

NEEDS WORK: ⚙️

Quality of health care

- JCAHO-accredited and Magnet hospitals are in short supply.
- The region lacks hospitals with Alzheimer's units and hospice services.

At risk for chronic diseases

- The metro ranks 98th out of 100 in the incidence of obesity, 99th in diabetes.
- Although there are fewer fast-food outlets, unhealthy food choices at home (high soda consumption) are putting residents at risk for chronic disease.

Safety concerns

- The metro area suffers high rates of crime and fatal car crashes.

TAKE AWAY

This city has a strong pool of health-care providers and colleges, including the University of Mississippi. However, unhealthy lifestyles suggest residents will need more quality health care in the future. A dearth of cultural enrichment opportunities hurts its ranking in this regard.

Baltimore-Towson, MD

NO. **13** out of 100
 FOR AGES 65-79 NO. **14**
 FOR AGES 80+ NO. **19**

GENERAL **59TH**
 HEALTH CARE **6TH**
 WELLNESS **19TH**
 FINANCIAL **92ND**
 LIVING ARRANGEMENTS **62ND**
 EMPLOYMENT/EDUCATION **20TH**
 TRANSPORTATION **14TH**
 COMMUNITY ENGAGEMENT **24TH**

NAILED IT: ✓

Expert health care

- Top-notch facilities with university affiliations suggest dependable, innovative health care.
- The metro has plenty of physicians and medical providers.
- Fast-food outlets are relatively few.

Easy access to stores and employment

- Many grocery and convenience stores mean seniors don't have to travel far to shop.
- Many people take advantage of public transportation.
- Employment opportunities for 65+ are abundant.

NEEDS WORK: ⚙️

Costly care and living arrangements

- Inpatient hospitalization, nursing rooms, and assisted-living facilities are expensive.
- The tax burden is high along with the cost of living.

Signs of financial distress

- The metro has one of the highest amounts of reverse mortgages.

TAKE AWAY

Greater Baltimore enjoys the benefits of Johns Hopkins University and its proximity to Washington, D.C., offering residents opportunities in education, retraining, and cultural fulfillment. However, living arrangements are expensive, and small-business growth is sluggish.

Baton Rouge, LA

NO. **14** out of 100
 FOR AGES 65-79 NO. **9**
 FOR AGES 80+ NO. **16**

- GENERAL **35TH**
- HEALTH CARE **62ND**
- WELLNESS **62ND**
- FINANCIAL **1ST**
- LIVING ARRANGEMENTS **60TH**
- EMPLOYMENT/EDUCATION **66TH**
- TRANSPORTATION **20TH**
- COMMUNITY ENGAGEMENT **94TH**

NAILED IT: ✓

Robust economy and investment in transportation

- High levels of income and employment growth contribute to residents' economic well-being.
- It has a low tax burden.
- The metro has many financial institutions and a low amount of reverse mortgages.
- Investment in transportation helps seniors to be more mobile.

Affordable, accessible health care

- Long-term hospitals, dialysis centers, home health-care providers, and caregivers are abundant.
- Assisted living and nursing rooms are relatively inexpensive.

NEEDS WORK: ⚒

Seniors' socioeconomic status

- High poverty rate among seniors.
- More senior volunteer activities are needed.

Wellness woes, accessibility

- The metro needs more JCAHO-accredited hospitals, Alzheimer's units, and hospice services.

TAKE AWAY

Baton Rouge enjoys a thriving economy, a great medical school, and its status as the state capital. However, job opportunities for those 65+ are limited, and community engagement is on the low side with few volunteer opportunities and a smaller population of seniors with whom to socialize.

Little Rock-North Little Rock, AR

NO. **15** out of 100
 FOR AGES 65-79 NO. **17**
 FOR AGES 80+ NO. **17**

- GENERAL **49TH**
- HEALTH CARE **3RD**
- WELLNESS **92ND**
- FINANCIAL **29TH**
- LIVING ARRANGEMENTS **26TH**
- EMPLOYMENT/EDUCATION **28TH**
- TRANSPORTATION **64TH**
- COMMUNITY ENGAGEMENT **89TH**

NAILED IT: ✓

Community and economic factors

- The metro has a low tax burden, low unemployment, and strong income growth.
- Heavy investment has been made in senior transportation.

Accessible, affordable health care

- Hospital beds and specialty care (geriatrics, rehabilitation, and Alzheimer's) are ample.
- Inpatient care and assisted living are inexpensive.
- The area has a large pool of physicians, nurses, and orthopedic surgeons.

NEEDS WORK: ⚒

Threats to health and well-being

- High crime and car fatality rates.
- Limited supply of continuing-care facilities.
- Few people are physically active, and community engagement suffers from small number of YMCAs.
- Lack of physical activity and high soda consumption at home may be associated with high obesity and diabetes rates in the metro.

TAKE AWAY

This capital city, home of the University of Arkansas and its medical school, has great health care, a low cost of living, and a learning environment. But a less active population and unhealthy eating habits breed chronic disease in the metro. High rates of crime and fatal car crashes add to these woes.

Philadelphia-Camden-Wilmington, PA-NJ-DE-MD

NO. **16** out of 100
 FOR AGES 65-79 NO. **15**
 FOR AGES 80+ NO. **17**

GENERAL **27TH**
 HEALTH CARE **21ST**
 WELLNESS **29TH**
 FINANCIAL **84TH**
 LIVING ARRANGEMENTS **65TH**
 EMPLOYMENT/EDUCATION **17TH**
 TRANSPORTATION **6TH**
 COMMUNITY ENGAGEMENT **36TH**

NAILED IT: ✓

Mobility and convenience

- A high number of passenger trips suggests good public transportation, and fares for seniors are low.
- There are plenty of conveniences in the metro.

Work or homework?

- Unemployment is low among those 65+.
- Educational facilities are plentiful for retraining and other coursework.
- A relatively large service sector increases seniors' job prospects.

NEEDS WORK: ⚒

A pricy place to be

- Assisted living is costly.
- The tax burden is relatively high.
- Reverse mortgages are numerous, and small businesses are struggling.
- The metro area ranks 75th out of 100 for the share of those 65 and older living in poverty.

TAKE AWAY

Greater Philadelphia, a hotbed for pharma, has a large share of medical services and research facilities. It is well-connected, with many educational facilities, historic landmarks, and cultural venues, not to mention its proximity to other major cities in the Northeast. But all those amenities don't come cheap.

Syracuse, NY

NO. **17** TIE out of 100
 FOR AGES 65-79 NO. **18**
 FOR AGES 80+ NO. **27**

GENERAL **68TH**
 HEALTH CARE **11TH**
 WELLNESS **13TH**
 FINANCIAL **73RD**
 LIVING ARRANGEMENTS **80TH**
 EMPLOYMENT/EDUCATION **12TH**
 TRANSPORTATION **28TH**
 COMMUNITY ENGAGEMENT **43RD**

NAILED IT: ✓

Broad access to health care

- The metro has many JCAHO-accredited hospitals, MRI clinics, and health-care providers, particularly physical therapists and orthopedic surgeons.

Active, mobile, and engaged population

- Many people walk to work.
- An abundance of libraries, golf courses, parks, etc., are available.
- The metro boasts high levels of college enrollment, thanks to community colleges and Syracuse University.

NEEDS WORK: ⚒

Medical shortcomings

- A limited number of hospitals have dialysis or Alzheimer's units.
- Nursing-home ratings are relatively low, and nursing rooms are expensive.

Limited convenience, expensive transit

- Fares are high.
- The metro needs more financial institutions and convenience stores to improve accessibility.

TAKE AWAY

A university town with quality health care, Syracuse enjoys the slower pace of a mid-size burg but with access to larger metros like Rochester, Albany, and New York. The metro's weaknesses include living arrangements, a high tax burden, and, of course, the weather.

Bridgeport-Stamford-Norwalk, CT

NO. 17 TIE FOR AGES 65-79
out of 100 NO. 22 FOR AGES 80+ NO. 29

- GENERAL **63RD**

- HEALTH CARE **50TH**

- WELLNESS **2ND**

- FINANCIAL **22ND**

- LIVING ARRANGEMENTS **99TH**

- EMPLOYMENT/EDUCATION **81ST**

- TRANSPORTATION **24TH**

- COMMUNITY ENGAGEMENT **1ST**

NAILED IT: ✓

Workouts and wellness

- The metro has many recreational centers and high levels of physical activity among seniors.
- Smoking and soda consumption are lower than all but a few of the metro's big-city peers.
- Residents have fewer health problems such as mental distress, diabetes, and obesity.

Culture and conveniences

- The area has plenty of banks, grocery stores, museums, etc.

Safe, secure, and engaged

- High levels of senior volunteerism.
- Low crime rates.

NEEDS WORK: ⚒

Living arrangements

- Housing, rentals, and assisted-living facilities are pricy.
- Nursing homes and continuing-care facilities are expensive.
- More long-term hospitals and hospital beds are needed.

TAKE AWAY

The metro is highly connected to New York City and is a global financial center. One of the safest places to live, the metro has educated residents who support all kinds of arts and culture. While residents are engaged and healthy, the metro ranks 99th in living arrangements due largely to cost and housing needs.

Scranton-Wilkes Barre, PA

NO. 19 FOR AGES 65-79
out of 100 NO. 24 FOR AGES 80+ NO. 23

- GENERAL **61ST**

- HEALTH CARE **49TH**

- WELLNESS **59TH**

- FINANCIAL **89TH**

- LIVING ARRANGEMENTS **4TH**

- EMPLOYMENT/EDUCATION **7TH**

- TRANSPORTATION **9TH**

- COMMUNITY ENGAGEMENT **19TH**

NAILED IT: ✓

Affordable housing and good connectivity

- Average commute time is low, and so is the fare.
- Ample opportunities for learning/education.
- Rental prices are relatively low.

Access to health care

- A large proportion of hospitals offer geriatric, hospice, and rehabilitation services.
- Long-term hospitals are abundant.

NEEDS WORK: ⚒

Cracks in health-care access

- The metro needs Magnet hospitals and Alzheimer's units.
- More orthopedic surgeons would be desirable.

Quality-of-life concerns

- High binge-drinking rates and the prevalence of fast-food outlets threaten public health.
- Poor nursing-home ratings suggest a lower quality of life for seniors in those institutions.

TAKE AWAY

Scranton offers a low cost of living, a large senior population, and a low crime rate. It benefits from its proximity to the services, cultural events, and markets of Philadelphia. Owing to educational/retraining opportunities, the metro ranks high in the employment category. However, its economy is struggling.

Honolulu, HI

NO.

20
out of 100

FOR AGES 65-79

NO. **11**

NO. **37**

FOR AGES 80+

GENERAL **16TH**

HEALTH CARE **55TH**

WELLNESS **22ND**

FINANCIAL **75TH**

LIVING ARRANGEMENTS **75TH**

EMPLOYMENT/EDUCATION **1ST**

TRANSPORTATION **91ST**

COMMUNITY ENGAGEMENT **75TH**

NAILED IT: ✓

Robust economy that invests in seniors

- High income growth coincides with low levels of unemployment and less inequality in income.
- Educational institutions offer career enrichment opportunities, and a relatively large service sector provides more job opportunities for seniors.

Quality of care

- The metro's nursing homes are highly rated.
- There are many university-affiliated hospitals and a large pool of mental-health professionals.
- Residents have a high life expectancy at age 65, implying superior quality of life.

NEEDS WORK: ⚙️

Housing challenges

- The availability of nursing rooms is limited.
- Housing, rentals, and assisted living are costly.

More health care

- The scarcity of caregivers and fitness facilities is problematic.
- Alzheimer's units and MRI clinics are sorely needed.

TAKE AWAY

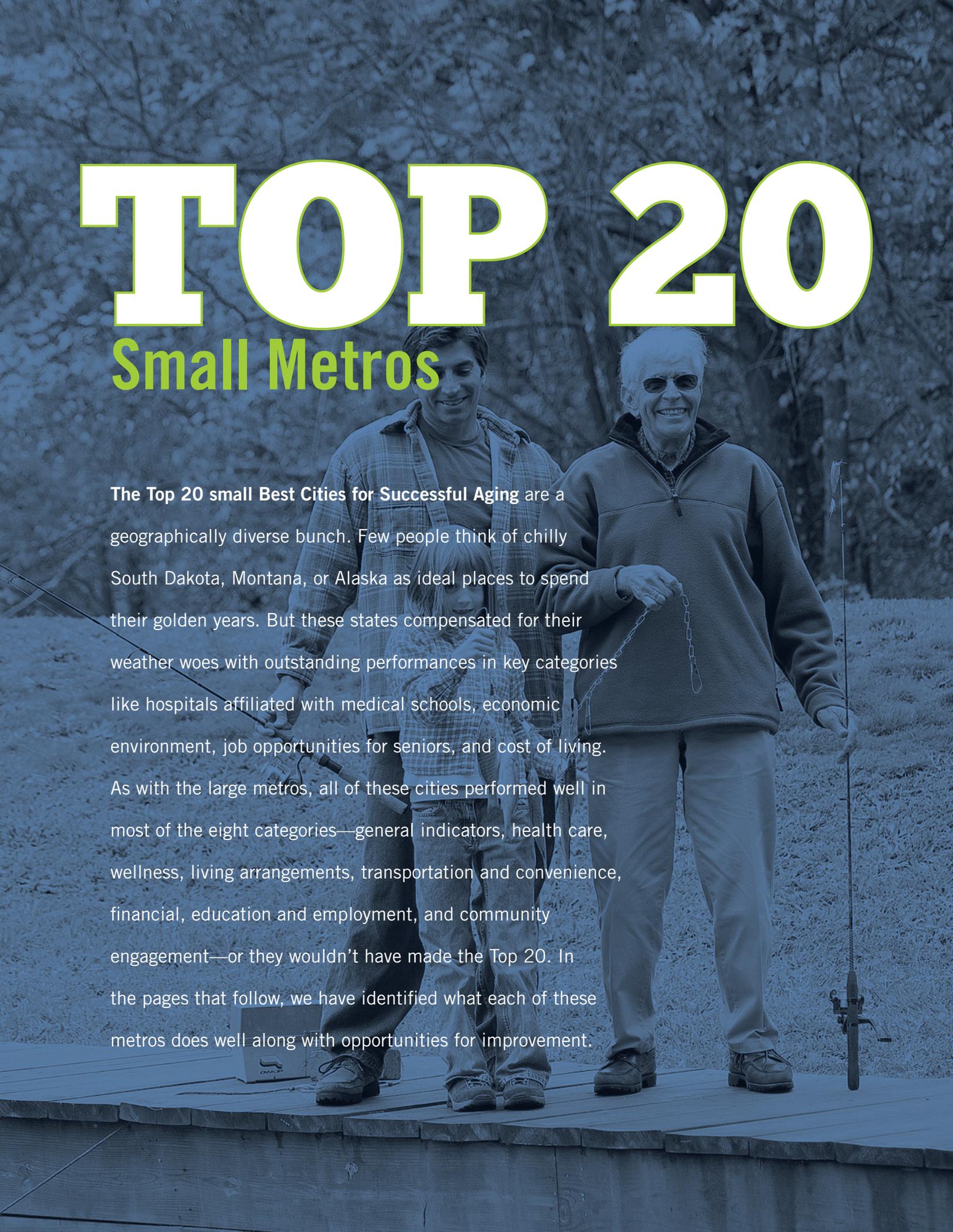
This prime tourist spot is an expensive place to live. But it offers an excellent quality of life, good health care, and many employment opportunities for seniors. The metro needs a more efficient transport system. Although ridership is high, fares are expensive. A long commute time adds to residents' transportation woes.

INTERACTIVE DATA

Infographics and data for each metro area as well as tools for policymakers can be found at www.milkeninstitute.org/successfulaging.

TOP 20

Small Metros



The **Top 20 small Best Cities for Successful Aging** are a geographically diverse bunch. Few people think of chilly South Dakota, Montana, or Alaska as ideal places to spend their golden years. But these states compensated for their weather woes with outstanding performances in key categories like hospitals affiliated with medical schools, economic environment, job opportunities for seniors, and cost of living. As with the large metros, all of these cities performed well in most of the eight categories—general indicators, health care, wellness, living arrangements, transportation and convenience, financial, education and employment, and community engagement—or they wouldn't have made the Top 20. In the pages that follow, we have identified what each of these metros does well along with opportunities for improvement.

Sioux Falls, SD

NO. 1
out of 259

FOR AGES 65-79

NO. 1

NO. 2

FOR AGES 80+



GENERAL **41ST**



HEALTH CARE **8TH**



WELLNESS **56TH**



FINANCIAL **1ST**



LIVING ARRANGEMENTS **167TH**



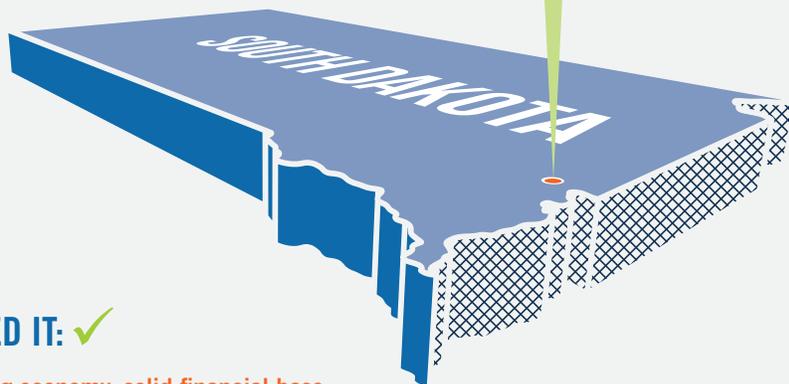
EMPLOYMENT/EDUCATION **4TH**



TRANSPORTATION **61ST**



COMMUNITY ENGAGEMENT **6TH**



NAILED IT: ✓

Booming economy, solid financial base

- Employment for those 65 and older is the highest among the 259 small metros.
- The metro has one of the lowest unemployment rates of the small metros.
- It ranks first for amount of bank deposits; the number of financial institutions ensures easy access.
- A relatively large service sector implies more job opportunities for seniors.
- Low commute time ensures a stress-free ride to work.

Senior-friendly state and local policies

- The metro has one of the strongest bases of seniors enrolled in Medicare.
- The state ranks high in investment in public transportation and state funding for seniors.
- Inpatient expenses are the lowest of the small metros.
- Many hospitals have rehabilitation services and hospice care.
- The metro has an ample number of physicians and nurses.
- Residents enjoy a decent quality of life.

NEEDS WORK: ⚙️

Affordability

- It ranks 124th among the 259 small metros in cost of living, and the variation in incomes is high.
- The metro ranks low in living arrangements due to high home and rental prices.

Ease of access

- Although the state invests heavily in senior transportation, overall ridership remains low.
- More neighborhood grocery stores and other conveniences are needed to improve accessibility.

Health-care providers

- Sioux Falls has a high incidence of Alzheimer's cases and needs more hospitals with Alzheimer's units to care for them.
- Home health-care providers and caregivers are in short supply.
- The metro needs quality nursing homes.



Courtesy of Sioux Falls Convention & Visitors Bureau



TAKEAWAY:

With a booming economy, low unemployment, and a rapidly growing financial infrastructure, Sioux Falls is a good place for seniors who want to work or start a second career. Its hospitals specialize in geriatric services, hospice, and rehabilitation, and the metro has recreation and an active lifestyle. But seniors might be turned off by the inclement weather and lack of contemporaries.

Iowa City, IA



- GENERAL **33RD**
- HEALTH CARE **2ND**
- WELLNESS **136TH**
- FINANCIAL **61ST**
- LIVING ARRANGEMENTS **146TH**
- EMPLOYMENT/EDUCATION **11TH**
- TRANSPORTATION **3RD**
- COMMUNITY ENGAGEMENT **51ST**

NAILED IT: ✓

Plenty of specialists

- Many hospitals have specialized units for geriatric services, hospice, and Alzheimer's patients.
- The pool of orthopedic surgeons and physical therapists is large.

Work, ride, and study

- Iowa City has one of the lowest unemployment rates among the small metros.
- It ranks high in the number of passenger trips on public transportation.
- College enrollment is high.

NEEDS WORK: ⚙️

Wellness and caregivers

- Iowa City has a large number of fast-food outlets per capita and high soda consumption, both threats to public health.
- A high incidence of Alzheimer's disease means residents may require more specialized care and caregivers, which are in short supply.

Pricy living and senior housing demand

- The cost of living is high.
- The metro needs continuing-care facilities and home health-care providers.

TAKE AWAY

Home to the University of Iowa and its medical school, Iowa City has excellent health care, little crime, and relatively few seniors below the poverty line. On the flip side, housing and rentals are pricier than the median for small metros. Although its population skews younger, the presence of a young working-age population implies a solid fiscal base.

Bismarck, ND



- GENERAL **26TH**
- HEALTH CARE **4TH**
- WELLNESS **141ST**
- FINANCIAL **27TH**
- LIVING ARRANGEMENTS **129TH**
- EMPLOYMENT/EDUCATION **55TH**
- TRANSPORTATION **74TH**
- COMMUNITY ENGAGEMENT **15TH**

NAILED IT: ✓

- Booming economy; employment growth over the past five years outpaces most other small metros.
- Impressive growth of small businesses over five years and strong income growth suggest an optimistic economic outlook.

Affordable, quality care

- It ranks first in the number of Magnet and JCAHO-accredited hospitals.
- Medical school affiliation ensures innovation and quality care.
- Assisted-living and inpatient costs are low.

Community engagement

- The state has the highest rate of senior volunteers among the small metros.
- Investment in senior transportation is significant.

NEEDS WORK: ⚙️

Affordability issues

- The price of housing is above the median for the small metros; however, rents are below the median.
- High income inequality and the number of seniors living below the poverty line are concerning.

TAKE AWAY

The capital city is reaping the benefits of North Dakota's oil and gas boom. It ranks high in senior employment, and the large service sector increases the chances of finding a job. If weather is not a high priority, Bismarck offers excellent opportunities for working seniors.

Columbia, MO

NO. **4** out of 259
 FOR AGES 65-79 NO. **4**
 FOR AGES 80+ NO. **5**

GENERAL **155TH**
 HEALTH CARE **3RD**
 WELLNESS **209TH**
 FINANCIAL **8TH**
 LIVING ARRANGEMENTS **45TH**
 EMPLOYMENT/EDUCATION **25TH**
 TRANSPORTATION **64TH**
 COMMUNITY ENGAGEMENT **184TH**

NAILED IT: ✓

Expert health care

- Many hospitals are affiliated with medical schools.
- The metro has abundant doctors, nurses, orthopedic surgeons, and hospital beds.
- It ranks first among the small metros for number of hospitals with geriatric services, rehabilitation services, and continuing-care facilities.

Strong tax base

- A large working-age population helps support services for seniors.
- The poverty rate is low among seniors.

NEEDS WORK: ⚙️

Specialized care, unhealthy behavior

- Columbia needs more long-term hospitals and hospitals with Alzheimer's units.
- The metro has many fast-food outlets and high soda consumption, making it no surprise that obesity rates are high as well.

Few chances for volunteering, recreation

- Columbia needs more museums, recreational facilities, YMCAs, etc.
- Parks, golf courses, etc., are in short supply.

TAKE AWAY

Thanks in part to a strong tax base, Columbia offers excellent educational facilities and health care. University-sponsored research is an incubator for innovation and new businesses, which gives seniors access to cutting-edge technology in health care and supports entrepreneurial activities. However, the metro is short on recreation and culture.

Rochester, MN

NO. **5** out of 259
 FOR AGES 65-79 NO. **12**
 FOR AGES 80+ NO. **4**

GENERAL **36TH**
 HEALTH CARE **1ST**
 WELLNESS **58TH**
 FINANCIAL **200TH**
 LIVING ARRANGEMENTS **107TH**
 EMPLOYMENT/EDUCATION **127TH**
 TRANSPORTATION **171ST**
 COMMUNITY ENGAGEMENT **36TH**

NAILED IT: ✓

A hub of health care

- The metro has a large pool of nurses, doctors, and orthopedic surgeons, giving seniors ready access to health-care professionals.
- Hospital beds, nursing beds, and continuing-care facilities are plentiful.

Active, safe, and engaged

- The quality of life in Rochester is excellent, with low crime rates and few fatal car crashes.
- Seniors volunteer at high rates.

NEEDS WORK: ⚙️

Economic struggle

- Small-business growth is slow.
- It has one of the highest tax burdens among small metros
- The metro needs more financial institutions and a stronger fiscal base.

More mobility

- Investment in public transportation is needed to help seniors get around.
- More convenience stores would be helpful.

TAKE AWAY

The Mayo Clinic, one of the best hospitals in the nation, is located here. Needless to say, this has attracted many health-care providers. Safe and secure neighborhoods offer a superior quality of life. But the sluggish economy and low college enrollment are definite weaknesses.

Gainesville, FL

NO. 6
out of 259

FOR AGES 65-79
NO. 5
FOR AGES 80+
NO. 6

- GENERAL **141ST**
- HEALTH CARE **6TH**
- WELLNESS **167TH**
- FINANCIAL **75TH**
- LIVING ARRANGEMENTS **225TH**
- EMPLOYMENT/EDUCATION **19TH**
- TRANSPORTATION **4TH**
- COMMUNITY ENGAGEMENT **177TH**

NAILED IT: ✓

Top-notch health care

- The metro has JCAHO-accredited hospitals and medical school affiliations that spur innovation.
- The pool of nurses, doctors, and physical therapists is large.

A financially stable learning environment

- The University of Florida contributes to a robust economy, supporting a large service sector and more job opportunities.
- It has a solid tax base in its young population and a high capital gains rate.

NEEDS WORK: ⚙️

Specialty care

- It needs long-term hospitals and facilities with hospice and rehabilitation services.
- Gainesville is short on nursing beds and continuing-care facilities.
- The metro needs more caregivers.

Activity and engagement

- Senior volunteerism is low, partly due to fewer seniors in the metro.
- Healthful behavior at home is essential along with more parks, etc.

TAKE AWAY

Home of the University of Florida, Gainesville is a vibrant town with great weather and a strong fiscal base. The university-affiliated Shands HealthCare system is one of the best in the nation. However, a slow economy and a small senior population in the metro might prevent seniors from relocating here.

Ann Arbor, MI

NO. 7
out of 259

FOR AGES 65-79
NO. 7
FOR AGES 80+
NO. 9

- GENERAL **226TH**
- HEALTH CARE **5TH**
- WELLNESS **89TH**
- FINANCIAL **34TH**
- LIVING ARRANGEMENTS **240TH**
- EMPLOYMENT/EDUCATION **52ND**
- TRANSPORTATION **7TH**
- COMMUNITY ENGAGEMENT **165TH**

NAILED IT: ✓

Plethora of health-care services

- The metro has a large pool of nurses, doctors, physical therapists, and orthopedic surgeons.
- Many young professionals reside here, providing a steady flow of resources to fund senior services.

Excels in transportation

- It has one of the highest rates of annual ridership on public transportation.

Learning environment

- College enrollment is high.

NEEDS WORK: ⚙️

Tough economy for seniors

- Income growth has been slow for the five-year period.
- Overall employment growth is slow, and the percentage of seniors employed is relatively small.
- Small-business growth has stalled in the past five years.

Unhealthy choices

- The metro has many fast-food outlets and high soda consumption.

TAKE AWAY

The University of Michigan at Ann Arbor is one of the best in the nation and offers a raft of cultural and educational opportunities for residents. But living arrangements are expensive, and the economic environment makes it less than ideal for seniors in the market for a second career.

Missoula, MT

NO. **8**
out of 259

FOR AGES 65-79
NO. **9**
NO. **16**
FOR AGES 80+

GENERAL **227TH**
HEALTH CARE **13TH**
WELLNESS **24TH**
FINANCIAL **25TH**
LIVING ARRANGEMENTS **199TH**
EMPLOYMENT/EDUCATION **32ND**
TRANSPORTATION **39TH**
COMMUNITY ENGAGEMENT **5TH**

NAILED IT: ✓

Healthy lifestyle and health-care system

- Diabetes and obesity rates are low.
- Hospitals are JCAHO-accredited.
- Missoula has hospitals affiliated with the University of Montana medical school.
- Although many fast-food outlets are available, soda consumption at home is low, which may explain low obesity and diabetes rates.

Cultural enrichment

- It's a hot spot for museums, religious institutions, and other cultural activities.

NEEDS WORK: ⚙️

Affordability and safety

- The metro has high income inequality.
- Its many fatal crashes may in part be a result of inclement weather.

Specialty services

- More hospitals with hospice, Alzheimer's units, and geriatric services are called for.
- Nursing beds are plentiful, but quality is lacking
- Home health-care providers and caregivers are in short supply.

TAKE AWAY

Missoula enjoys the cultural, educational, and financial benefits of being a university town. It has quality health care and many recreational facilities. However, it ranks near the bottom in income growth and inequality, weather, cost of living, and housing prices among the small metros.

Durham-Chapel Hill, NC

NO. **9**
out of 259

FOR AGES 65-79
NO. **11**
NO. **8**
FOR AGES 80+

GENERAL **144TH**
HEALTH CARE **7TH**
WELLNESS **106TH**
FINANCIAL **109TH**
LIVING ARRANGEMENTS **88TH**
EMPLOYMENT/EDUCATION **56TH**
TRANSPORTATION **14TH**
COMMUNITY ENGAGEMENT **197TH**

NAILED IT: ✓

Quality hospitals, pool of providers

- Nurses, doctors, orthopedic surgeons, and physical therapists are abundant.
- The metro has many Magnet and medical school-affiliated hospitals.
- Quality nursing homes are available.

Growing economy, good public transportation, and learning environment

- Moderate employment growth together with small-business growth is great for entrepreneurs.
- There has been considerable growth in industries that hire seniors, and unemployment among seniors is very low.
- Durham has one of the highest numbers of annual passenger trips among the small metros.
- High college enrollment signifies a learning environment.
- There is no dearth of recreational facilities.

NEEDS WORK: ⚙️

Safety and affordability

- The high crime rate is a concern.
- Cost of living and disparities in income are high.

TAKE AWAY

Home to Duke University and part of the famed Research Triangle, Durham is an excellent choice for overall access to health care and medical innovation and for enjoying all the benefits top-notch educational institutions have to offer. While home prices are expensive, rentals are not. However, the high crime rate makes safety a big concern.

Rapid City, SD

NO. **10** out of 259
 FOR AGES 65-79 NO. **10**
 FOR AGES 80+ NO. **12**

- GENERAL **61ST**
- HEALTH CARE **25TH**
- WELLNESS **83RD**
- FINANCIAL **38TH**
- LIVING ARRANGEMENTS **152ND**
- EMPLOYMENT/EDUCATION **20TH**
- TRANSPORTATION **71ST**
- COMMUNITY ENGAGEMENT **1ST**

NAILED IT: ✓

Strong economy for encore careers, volunteerism

- The metro has one of the highest employment rates for seniors and low unemployment rates overall.
- South Dakota boasts one of the highest funding rates for senior services, per capita.
- Seniors volunteer in high numbers and take advantage of the many museums and entertainment centers.

Health care geared toward seniors

- Inpatient hospitalization is relatively inexpensive.
- Life expectancy at 65 is high, implying good quality of life.

NEEDS WORK: ⚙️

Specialty care and outdoor activities

- Rapid City needs more long-term hospitals and hospitals with Alzheimer's units to respond to the high rates of Alzheimer's cases.
- Magnet hospitals are in short supply, as are quality nursing homes.
- It needs more home health-care providers and caregivers.
- More golf courses, parks, and trails would be helpful.

TAKE AWAY

Rapid City has a thriving economy with a major health-care center that serves the five-state region and an influx of tourism due to nearby Mount Rushmore. However, home health-care providers, continuing-care facilities, and quality nursing homes are in short supply.

Ames, IA

NO. **11** out of 259
 FOR AGES 65-79 NO. **6**
 FOR AGES 80+ NO. **10**

- GENERAL **20TH**
- HEALTH CARE **129TH**
- WELLNESS **55TH**
- FINANCIAL **65TH**
- LIVING ARRANGEMENTS **163RD**
- EMPLOYMENT/EDUCATION **2ND**
- TRANSPORTATION **2ND**
- COMMUNITY ENGAGEMENT **38TH**

NAILED IT: ✓

Strong economy, fiscal base, and senior engagement

- The overall unemployment rate is low.
- The metro ranks second among the small metros for college enrollment.
- Low dependency ratio implies the presence of a young workforce, which ensures strong fiscal support for senior services.
- Ames ranks high among the 259 small metros for employment of those 65 and older.
- Seniors are active and volunteer in the community.

NEEDS WORK: ⚙️

Health-care services for seniors

- Ames is short on long-term hospitals and hospitals with Alzheimer's units despite having a high number of Alzheimer's cases.
- Hospital and nursing room quality is less than desirable.

TAKE AWAY

Ames has an educated workforce, low unemployment, a strong fiscal base, and the amenities of a university town. Although it has high ridership in public transport, the commute time is long. Housing and rental prices are above the median, and residents need more continuing-care facilities and better-quality hospitals and nursing homes.

Anchorage, AK

NO. **12** out of 259
 FOR AGES 65-79 NO. 8
 FOR AGES 80+ NO. 67

GENERAL **244TH**
 HEALTH CARE **36TH**
 WELLNESS **51ST**
 FINANCIAL **41ST**
 LIVING ARRANGEMENTS **204TH**
 EMPLOYMENT/EDUCATION **1ST**
 TRANSPORTATION **44TH**
 COMMUNITY ENGAGEMENT **24TH**

NAILED IT: ✓

Public policy geared toward seniors

- The metro spends on public/senior transportation.
- Alaska invests in services for the aging population.
- The metro has a high number of continuing-care facilities.

Economic environment

- Many seniors are employed.
- Poverty among those 65+ is low.
- It has a high service-to-manufacturing base, suggesting more job opportunities for seniors.

NEEDS WORK: ⚠

High cost of living

- Rental housing is costly.
- Assisted living and nursing rooms are also expensive.

Health care falls short

- Inpatient hospitalization is expensive.
- Long-term hospitals and hospitals with Alzheimer's units are in short supply.

TAKE AWAY

Anchorage's older residents enjoy the benefits of senior-friendly employment opportunities and public policies. However, it ranks near the bottom in most of the indicators involving living arrangements, and it goes without saying that the severe weather is a bummer.

Morgantown, WV

NO. **13** out of 259
 FOR AGES 65-79 NO. 13
 FOR AGES 80+ NO. 18

GENERAL **121ST**
 HEALTH CARE **9TH**
 WELLNESS **115TH**
 FINANCIAL **57TH**
 LIVING ARRANGEMENTS **210TH**
 EMPLOYMENT/EDUCATION **22ND**
 TRANSPORTATION **120TH**
 COMMUNITY ENGAGEMENT **135TH**

NAILED IT: ✓

Excels in health care

- Abundance of nurses, doctors, and orthopedic surgeons means convenience for seniors.
- The cost of inpatient hospitalization is relatively low.

A growing economy

- Employment has increased over the five-year period.
- The metro has a strong pool of working-age residents to support services that benefit seniors.

NEEDS WORK: ⚠

Key health-care services

- The metro needs more long-term hospitals and hospitals with Alzheimer's units.
- Continuing-care facilities are limited.
- Nursing homes are pricy and lack quality.

Neighborhood concerns

- High income inequality with high poverty among seniors.
- Many fatal car crashes make driving riskier.

TAKE AWAY

Home to the University of West Virginia, Morgantown has employment, art and culture, education, and access to health-care services. Rentals are inexpensive, and homes are moderately priced. However, it ranks toward the bottom in living arrangements due largely to the expense and lack of facilities for the oldest, sickest population.

Dubuque, IA

NO. **14** out of 259
 FOR AGES 65-79 NO. **25**
 FOR AGES 80+ NO. **17**

- GENERAL **83RD**
- HEALTH CARE **18TH**
- WELLNESS **79TH**
- FINANCIAL **112TH**
- LIVING ARRANGEMENTS **76TH**
- EMPLOYMENT/EDUCATION **73RD**
- TRANSPORTATION **68TH**
- COMMUNITY ENGAGEMENT **18TH**

NAILED IT: ✓

Health-care services geared toward seniors

- Hospitals have geriatric services and rehabilitation facilities.
- Magnet hospitals are available.
- Inexpensive assisted-living facilities exist.

Ease of access, employment

- Bank deposits are high, and financial institutions are easily accessible.
- A large share of older residents are employed and volunteer in the community.

NEEDS WORK: ⚒

Specialized care for seniors

- More hospitals with hospice services would be desirable.
- High rates of Alzheimer's disease exist, so hospitals with Alzheimer's units are needed.
- The metro needs more long-term hospitals.
- High dependency ratio implies a smaller working-age population to support services for children and seniors.

TAKE AWAY

The metro's unique architecture and river location attract many tourists, and it is highly connected to nearby Chicago. It offers quality hospitals and specialized care for seniors. The 65+ population is large, and seniors actively volunteer. Many points of cultural enrichment also make this metro desirable for seniors.

Hattiesburg, MS

NO. **15** out of 259
 FOR AGES 65-79 NO. **18**
 FOR AGES 80+ NO. **7**

- GENERAL **2ND**
- HEALTH CARE **41ST**
- WELLNESS **159TH**
- FINANCIAL **49TH**
- LIVING ARRANGEMENTS **37TH**
- EMPLOYMENT/EDUCATION **110TH**
- TRANSPORTATION **58TH**
- COMMUNITY ENGAGEMENT **200TH**

NAILED IT: ✓

Neighborhood watch

- The metro has the lowest crime rate among the 259 small metros.
- Employment has grown in health, education, leisure, and hospitality sectors.
- It has a low tax burden.
- Mississippi has made significant investment in senior public transportation.

A strong pool of providers

- Many physicians, nurses, and orthopedic surgeons.
- Specialty-care hospitals with long-term units, rehabilitation services, hospice, and palliative care.
- Low inpatient care and assisted-living cost.
- Availability of quality nursing homes.

NEEDS WORK: ⚒

Specialized care, healthier lifestyles

- The metro needs more hospitals with Alzheimer's units and geriatric services.
- Magnet hospitals are in short supply.

TAKE AWAY

Located between Jackson, Miss., and New Orleans, Hattiesburg has many job opportunities in industries likely to hire seniors. The metro has a relatively low cost of living and the lowest crime rate. But it has high rates of obesity, diabetes, and Alzheimer's disease. Since the senior population is small, volunteer rates are low.

Lincoln, NE

NO. **16** out of 259
 FOR AGES 65-79 NO. **16**
 FOR AGES 80+ NO. **30**

GENERAL **53RD**
 HEALTH CARE **98TH**
 WELLNESS **63RD**
 FINANCIAL **45TH**
 LIVING ARRANGEMENTS **72ND**
 EMPLOYMENT/EDUCATION **10TH**
 TRANSPORTATION **112TH**
 COMMUNITY ENGAGEMENT **42ND**

NAILED IT: ✓

Employment and convenience

- Overall unemployment rate is low.
- Lincoln ranks high among the small metros for 65+ employment.
- Residents have easy access to groceries and financial institutions.
- The average commute time isn't bad.
- Not many seniors live below the poverty line.

NEEDS WORK: ⚠️

Health-care services fall short

- The metro has a high proportion of seniors with Alzheimer's, suggesting a need for more hospitals with Alzheimer's units.
- Lincoln would benefit from more caregivers.
- More quality hospitals with specialized care are needed.

Fiscal woes

- High tax burden.
- Income growth in the past five years has been low.
- Capital gains taxes that help support the metro are on the low side.

TAKE AWAY

This capital city provides ample opportunities for a second career. It has excellent amenities for its size, with good transportation infrastructure, many recreational facilities, and more than 100 parks. Although the metro has low unemployment, income growth has been sluggish. However, poverty among seniors is below the median.

Lubbock, TX

NO. **17** out of 259
 FOR AGES 65-79 NO. **17**
 FOR AGES 80+ NO. **13**

GENERAL **18TH**
 HEALTH CARE **73RD**
 WELLNESS **135TH**
 FINANCIAL **72ND**
 LIVING ARRANGEMENTS **8TH**
 EMPLOYMENT/EDUCATION **17TH**
 TRANSPORTATION **56TH**
 COMMUNITY ENGAGEMENT **217TH**

NAILED IT: ✓

Affordable living, convenient commutes

- The cost of living is low due to low house prices.
- Income growth is strong.
- Nursing rooms are affordable.
- Commute times are short.
- Home health-care providers and caregivers are plentiful.
- Fast-food outlets aren't as prevalent as in other places.

NEEDS WORK: ⚠️

Neighborhood watch and community services

- High crime rate and fatal car crashes are concerning.
- Lubbock needs more public libraries, YMCAs, convenience stores, and other facilities.

Hospitals fall short

- Long-term hospitals and hospitals with Alzheimer's units are needed.
- It has low quality of life partly due to unhealthy eating behavior at home.

TAKE AWAY

Nicknamed the "Hub City," Lubbock hosts a number of universities and a medical school. It has a low cost of living with strong income growth as well as abundant home health-care providers and caregivers. It has low commute time to work, but the number of fatal traffic accidents is significant.

Fargo, ND-MN

NO. **18**
out of 259

FOR AGES 65-79
NO. **20**

NO. **27**
FOR AGES 80+

GENERAL **80TH**

HEALTH CARE **85TH**

WELLNESS **125TH**

FINANCIAL **22ND**

LIVING ARRANGEMENTS **114TH**

EMPLOYMENT/EDUCATION **40TH**

TRANSPORTATION **35TH**

COMMUNITY ENGAGEMENT **10TH**

NAILED IT: ✓

A vibrant economy

- Low unemployment and high small-business growth make it a good place for working or starting a second career.

Easy to get around

- Commute times are short.
- The metro has easy access to many financial institutions and a strong financial base.
- Grocery stores are accessible.

Community engagement

- There are many museums, houses of worship, and other cultural venues.
- Many seniors volunteer.
- Fargo boasts high state funding rates for senior services.

NEEDS WORK: ⚒

Senior-friendly care

- The metro needs long-term hospitals.
- Caregivers are in short supply.
- A high number of seniors have Alzheimer's, but hospitals with Alzheimer's units are lacking.

TAKE AWAY

Fargo is reaping the benefits of North Dakota's oil and gas boom. With a robust economy and a relatively low cost of living, employment and entrepreneurship opportunities are plentiful. The metro has a relatively small population of seniors, but they are active volunteers. Now about the weather....

Boulder, CO

NO. **19**
out of 259

FOR AGES 65-79
NO. **15**

NO. **60**
FOR AGES 80+

GENERAL **211TH**

HEALTH CARE **38TH**

WELLNESS **1ST**

FINANCIAL **4TH**

LIVING ARRANGEMENTS **255TH**

EMPLOYMENT/EDUCATION **75TH**

TRANSPORTATION **186TH**

COMMUNITY ENGAGEMENT **39TH**

NAILED IT: ✓

Healthy lifestyle

- The metro has one of the lowest rates of obesity and diabetes.
- Abundance of fitness and recreational centers encourages exercise.

Plenty of care providers

- It has a large pool of physical therapists, psychologists, and caregivers.

Financial well-being

- The poverty rate for seniors is low.

Easy access to conveniences

- A high number of financial institutions, grocery stores, and other conveniences means most people have easy access.
- Museums, religious centers, and other cultural venues are abundant.

NEEDS WORK: ⚒

Pricy place to live

- The metro ranks 256th out of 259 in the cost of living.
- High income inequality.
- Low income growth as well as signs of financial distress.

TAKE AWAY

Boulder is known as a liberal college town, home to the University of Colorado at Boulder. It has great health care, a healthy population, arts and culture, and a strong fiscal base. But it's an expensive place to live, and income growth is near the bottom of the rankings.

Burlington-South Burlington, VT

NO.

20

FOR AGES 65-79

NO. 18

NO. 48

FOR AGES 80+

GENERAL 224TH

HEALTH CARE 17TH

WELLNESS 78TH

FINANCIAL 84TH

LIVING ARRANGEMENTS 245TH

EMPLOYMENT/EDUCATION 23RD

TRANSPORTATION 17TH

COMMUNITY ENGAGEMENT 14TH

NAILED IT: ✓

Quality health care and active lifestyle

- It has a good supply of doctors, orthopedic surgeons, physical therapists, and caregivers.
- Many JCAHO-accredited hospitals.
- Many golf, skiing, fitness and recreational facilities are present.

Senior-friendly economy

- A high percentage of older residents is employed.
- It has a high level of funding for programs that benefit the 65+ population.
- There's high investment in public/senior transportation.
- Many museums, libraries, and cultural enrichment centers are available.

NEEDS WORK: ⚒

Shortcomings in health care

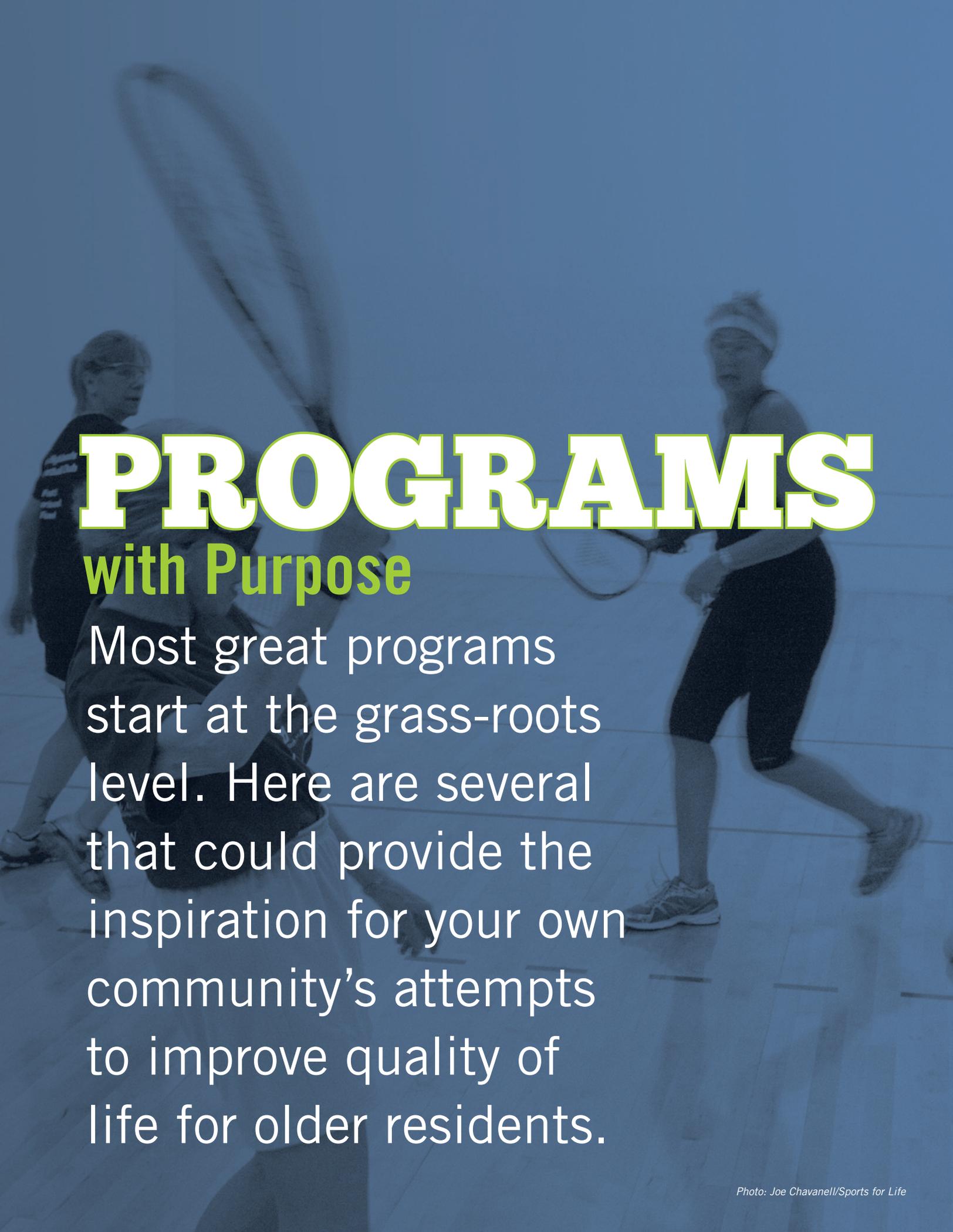
- The metro needs more long-term hospitals and hospitals with hospice services.
- Assisted living is pricy.
- Nursing rooms are expensive but lack quality.
- Cost of living is high, as is the crime rate.

TAKE AWAY

Burlington has quality health care, an excellent university, and job opportunities for the 65+ population. But the cost of living is high; home prices, rentals, and assisted living are expensive; and weather might be a factor for some.

INTERACTIVE DATA

Infographics and data for each metro area as well as tools for policymakers can be found at www.milkeninstitute.org/successfulaging.



PROGRAMS

with Purpose

Most great programs start at the grass-roots level. Here are several that could provide the inspiration for your own community's attempts to improve quality of life for older residents.



Dan Burden/www.pedbikemages.org

COMPLETE STREETS



Joe ChavaneII/Sports for Life

SPORTS FOR LIFE



Courtesy of Senior Connects

SENIOR CONNECTS

 **BEACON HILL VILLAGE:** As social networks bring young people together on the Internet, seniors are building social networks to meet their needs and stay in their own homes. Beacon Hill Village in Boston pioneered this virtual village movement, which has spread across the United States. These associations of individuals and families don't typically deliver services directly but coordinate access to transportation, health care, home repairs, etc., eliminating the need for a structured assisted-living environment. It's membership-driven, creating community and preserving autonomy at the same time. Many say it fits well with baby boomers' attachment to the full, involved lives they've led and don't plan to surrender just because they need some help. Membership costs \$400 a year on average plus fees for some services—an economical alternative to other forms of care.

 **COMPLETE STREETS:** It's the automobile's world; pedestrians and cyclists just live in it. In an effort to change that equation, the seven-year-old National Complete Streets Coalition—in partnership with AARP, America Bikes, the National Association of City Transportation Officials and others—presses for measures to make walking and biking safer, more convenient and more appealing. Among the goals: less obesity and fewer fatalities. Overrepresented in traffic deaths, older people face challenges as drivers and walkers. Signs are often inadequate; walk signals are too short and traffic too fast for them to cross wide streets safely; and bus stops often lack seating. Unfriendly streets can also discourage seniors from going out and add to their isolation. To date, more than 350 regional and local jurisdictions, 26 states, Puerto Rico and the District of Columbia have adopted or otherwise committed to Complete Street policies.

 **EISNER PRIZE:** The de facto segregation of children and elderly people in America represents a loss to us all. That's the view of Michael Eisner, the former Walt Disney Co. chairman who is investing some of his fortune in solutions. His Eisner Foundation seeks to bring those precious populations together and uplift both. Last year, the foundation launched the Eisner Prize for Intergenerational Excellence, celebrating people and organizations across the country that devise innovative ways to get young and old to collaborate in learning and friendship. The award comes with a \$100,000 grant. Among the seven finalists in 2012 are Canoga Park, Calif.-based Grandparents as Parents, a group that provides support services to relatives raising at-risk kids, and DOROT Inc. of New York, which eases social isolation among the elderly. The prize will be presented Oct. 25 in Cleveland, Ohio.

 **GREEN HOUSES:** Dr. William Thomas was troubled by the loss of spirit and waste of ability he witnessed in nursing homes. From that frustration grew the Green House vision, made real with funding from the Robert Wood Johnson Foundation. Connection and conviviality are key principles of Green Houses. So is privacy. Each elder has a bedroom and bath, but the homes feature large common rooms and dining tables to seat all residents and staff. It's less like a nursing facility and more like a home. Caregivers are trained to support a fuller life for residents and cultivate relationships of mutual learning. Since the first project in Tupelo, Miss., more than 130 Green Houses have welcomed elders, and more are planned. Research shows that the model benefits clients' quality of life and clinical condition. For instance, they generally suffer less depression and enjoy a greater sense of dignity.

 **LIFE BY DESIGN NW:** Life by Design NW helps baby boomers navigate the way forward. The nonprofit engages clients in exercises that reveal values and skills that could become the basis of a fresh career. For instance, a client may be asked to analyze her or his happiest experiences. Did they involve creativity? Charity? The outdoors? The answers provide clues to a satisfying second half of life. Another emphasis is connecting clients with volunteer gigs in leadership posts, providing an opportunity for self-discovery and growth as well as community service. There is also a full complement of affinity groups and salons in which participants write, talk, and reflect on difficult life/work transitions and job seeking. LBD is attached to the CLIMB Center at Portland Community College in Oregon and funded by the Atlantic Philanthropies.

 **PRIMETIME LAUSD:** Frank Damon, a semiretired attorney and sophisticated amateur photographer, shares his digital media know-how as a volunteer at University High School in West Los Angeles. Former Broadway thespian Justin Ross volunteers to train students in stage skills at storied Hollywood High. They're both part of PrimeTime LAUSD, a program of The Sherry Lansing Foundation, led by the movie business pioneer. The foundation sends experienced hands to plug gaps in instruction caused by budget cuts at the Los Angeles Unified School District. Right now, more than 50 volunteers in their 60s and beyond are enriching the curriculum on 17 campuses. Despite Lansing's entertainment background, PrimeTime LAUSD's focus is reading and math tutoring and helping students with college application essays. Lansing's emissaries also coach high-achieving Academic Decathlon competitors in making their public-speaking performances boffo.

 **PURPOSE PRIZE:** Capital for jobs and investment has fled Detroit, along with much of the population. Randal Charlton has channeled his talents into rebuilding that capital through home-grown entrepreneurship. A serial entrepreneur (and former agriculture journalist) now in his early 70s, Charlton took over TechTown, a business incubator at Wayne State University, in 2007. In four years, TechTown nurtured 250 companies and trained 2,200 aspiring industrialists with partners and donors such as GM and the Department of Housing and Urban Development. Last fall, the think tank Civic Ventures honored Charlton with the Purpose Prize, an award of up to \$100,000 bestowed on innovative members of the over-60 set whose second (or third or fourth) careers focus on new ways to solve social challenges. Like the Purpose Prize, Charlton is now hoping to inspire other baby boomers in their encore careers through the TechTown-affiliated organization Boom! The New Economy.

 **SENIOR CONNECTS:** Seniors are typically eager to share the benefit of their experience with the young, but Daniel Kent has made teaching a two-way street. Kent was 14—an eighth-grader—in 2003 when he saw that seniors were being shut out of the Internet revolution. Dismayed that aging people often let go of their pursuits, as they exit their careers, perhaps, or lose their mobility, Kent wanted to help them expand their world. So the Indianapolis computer whiz launched Senior Connects, which sends teenagers into retirement homes to help residents get a digital life. They mentor with more patience and less jargon. Seniors get to learn, shop, play, and keep in touch online, and the kids meet great people on the other end of the age spectrum. Senior Connects is going strong under the umbrella of Net Literacy, which is involved in a gamut of tech-related public-interest work. Organizations from the U.S. Broadband Coalition to the European Union have lauded its principles for digital inclusiveness.

 **SPORTS FOR LIFE:** Fancy yourself a 50-plus decathlete? You can test your mettle in the Deca-Challenge at the annual San Antonio Senior Games. Henry Cisneros, the former four-term mayor, is among the sturdy seniors who compete. The games begat Sports for Life, an organization that brings the benefits of fitness and the joy of athletics to seniors year-round. SFL now promotes and organizes a wide range of play, from swimming to pickleball. And Texans can use a workout; everything's bigger there, especially waistlines, as metro obesity rankings unflinchingly show. San Antonio has been trimming its profile of late, though, and SFL takes some credit for that. Getting the program up and running wasn't done from behind a desk. It took lots of pavement pounding and influential backers like Cisneros to get buy-in from donors and access the many local resources that now welcome seniors to get physical.

Rankings for All 359 Metros

100 LARGE METRO RANKINGS

METRO	OVERALL	65-79	80+
Akron, OH	68	73	63
Albany-Schenectady-Troy, NY	33	29	46
Albuquerque, NM	67	49	83
Allentown-Bethlehem-Easton, PA-NJ	88	84	89
Atlanta-Sandy Springs-Marietta, GA	70	53	64
Augusta-Richmond County, GA-SC	51	82	32
Austin-Round Rock, TX	41	28	44
Bakersfield, CA	100	100	99
Baltimore-Towson, MD	13	14	19
Baton Rouge, LA	14	9	16
Birmingham-Hoover, AL	53	69	39
Boise City-Nampa, ID	31	23	45
Boston-Cambridge-Quincy, MA-NH	4	6	1
Bridgeport-Stamford-Norwalk, CT	17	22	29
Buffalo-Niagara Falls, NY	59	65	57
Cape Coral-Fort Myers, FL	46	34	40
Charleston-North Charleston-Summersville, SC	27	25	31
Charlotte-Gastonia-Concord, NC-SC	60	50	74
Chattanooga, TN-GA	86	84	91
Chicago-Naperville-Joliet, IL-IN-WI	64	57	71
Cincinnati-Middletown, OH-KY-IN	72	75	78
Cleveland-Elyria-Mentor, OH	35	46	22
Colorado Springs, CO	54	39	88
Columbia, SC	49	45	54
Columbus, OH	80	79	83
Dallas-Fort Worth-Arlington, TX	73	66	62
Dayton, OH	36	36	52
Denver-Aurora-Broomfield, CO	22	20	36
Des Moines-West Des Moines, IA	6	8	6
Detroit-Warren-Livonia, MI	94	96	98
El Paso, TX	91	90	85
Fresno, CA	96	97	96
Grand Rapids-Wyoming, MI	93	93	93
Greensboro-High Point, NC	84	89	81
Greenville-Mauldin-Easley, SC	78	79	87
Harrisburg-Carlisle, PA	23	21	34

100 LARGE METRO RANKINGS

METRO	OVERALL	65-79	80+
Hartford-West Hartford-East Hartford, CT	29	30	43
Honolulu, HI	20	11	37
Houston-Sugar Land-Baytown, TX	83	81	47
Indianapolis-Carmel, IN	42	58	49
Jackson, MS	12	16	9
Jacksonville, FL	40	41	34
Kansas City, MO-KS	52	63	65
Knoxville, TN	63	72	50
Lakeland-Winter Haven, FL	97	95	95
Lancaster, PA	55	48	37
Las Vegas-Paradise, NV	87	46	91
Little Rock-North Little Rock-Conway, AR	15	17	17
Los Angeles-Long Beach-Santa Ana, CA	30	27	15
Louisville-Jefferson County, KY-IN	69	83	69
Madison, WI	2	5	4
McAllen-Edinburg-Mission, TX	44	71	28
Memphis, TN-MS-AR	85	87	80
Miami-Fort Lauderdale-Pompano Beach, FL	38	35	41
Milwaukee-Waukesha-West Allis, WI	32	43	59
Minneapolis-St. Paul-Bloomington, MN-WI	21	31	26
Modesto, CA	95	94	94
Nashville-Davidson-Murfreesboro-Franklin, TN	48	59	68
New Haven-Milford, CT	56	74	76
New Orleans-Metairie-Kenner, LA	34	42	10
New York-Northern New Jersey-Long Island, NY-NJ-PA	5	3	2
Ogden-Clearfield, UT	50	31	65
Oklahoma City, OK	39	40	42
Omaha-Council Bluffs, NE-IA	3	7	3
Orlando-Kissimmee, FL	77	44	79
Oxnard-Thousand Oaks-Ventura, CA	75	67	21
Palm Bay-Melbourne-Titusville, FL	89	91	61
Philadelphia-Camden-Wilmington, PA-NJ-DE-MD	16	15	17
Phoenix-Mesa-Scottsdale, AZ	73	61	56
Pittsburgh, PA	10	10	13
Portland-Vancouver-Beaverton, OR-WA	24	38	29
Poughkeepsie-Newburgh-Middletown, NY	90	88	82

100 LARGE METRO RANKINGS			
METRO	OVERALL	65-79	80+
Providence-New Bedford-Fall River, RI-MA	66	78	77
Provo-Orem, UT	1	1	7
Raleigh-Cary, NC	79	64	72
Richmond, VA	45	51	51
Riverside-San Bernardino-Ontario, CA	98	98	97
Rochester, NY	28	33	24
Sacramento-Arden-Arcade-Roseville, CA	81	62	67
Salt Lake City, UT	6	2	14
San Antonio, TX	76	70	70
San Diego-Carlsbad-San Marcos, CA	25	19	11
San Francisco-Oakland-Fremont, CA	11	13	5
San Jose-Sunnyvale-Santa Clara, CA	71	54	33
Sarasota-Bradenton-Venice, FL	47	56	60
Scranton-Wilkes-Barre, PA	19	24	23

100 LARGE METRO RANKINGS			
METRO	OVERALL	65-79	80+
Seattle-Tacoma-Bellevue, WA	58	67	75
Springfield, MA	81	84	86
St.Louis, MO-IL	26	25	25
Stockton, CA	99	99	100
Syracuse, NY	17	18	27
Tampa-St. Petersburg-Clearwater, FL	65	52	54
Toledo, OH	8	12	8
Tucson, AZ	37	37	20
Tulsa, OK	92	92	90
Virginia Beach-Norfolk-Newport News, VA-NC	61	60	73
Washington-Arlington-Alexandria, DC-VA-MD-WV	9	4	12
Wichita, KS	43	55	58
Worcester, MA	62	77	53
Youngstown-Warren-Boardman, OH-PA	57	76	48

259 SMALL METRO RANKINGS			
METRO	OVERALL	65-79	80+
Abilene, TX	95	92	71
Albany, GA	129	141	87
Alexandria, LA	28	36	11
Altoona, PA	85	126	57
Amarillo, TX	104	110	102
Ames, IA	11	6	10
Anchorage, AK	12	8	67
Anderson, IN	224	236	231
Anderson, SC	127	145	127
Ann Arbor, MI	7	7	9
Anniston-Oxford, AL	218	226	187
Appleton, WI	138	149	139
Asheville, NC	165	159	168
Athens-Clarke County, GA	61	46	45
Atlantic City-Hammonton, NJ	208	186	248
Auburn-Opelika, AL	174	119	183
Bangor, ME	55	64	82
Barnstable Town, MA	51	54	111
Battle Creek, MI	211	225	218
Bay City, MI	240	248	226

259 SMALL METRO RANKINGS			
METRO	OVERALL	65-79	80+
Beaumont-Port Arthur, TX	159	167	148
Bellingham, WA	161	147	192
Bend, OR	50	49	99
Billings, MT	21	40	29
Binghamton, NY	192	177	188
Bismarck, ND	3	3	3
Blacksburg-Christiansburg-Radford, VA	67	45	94
Bloomington, IN	125	76	170
Bloomington-Normal, IL	32	21	54
Boulder, CO	19	15	60
Bowling Green, KY	91	78	93
Bremerton-Silverdale, WA	167	153	179
Brownsville-Harlingen, TX	88	124	80
Brunswick, GA	221	212	210
Burlington, NC	233	243	234
Burlington-South Burlington, VT	20	18	48
Canton-Massillon, OH	120	107	138
Carson City, NV	66	58	33
Casper, WY	92	83	96
Cedar Rapids, IA	60	66	90

259 SMALL METRO RANKINGS

METRO	OVERALL	65-79	80+
Champaign-Urbana, IL	29	22	28
Charleston, WV	64	51	106
Charlottesville, VA	25	24	26
Cheyenne, WY	52	59	35
Chico, CA	231	206	244
Clarksville, TN-KY	241	224	235
Cleveland, TN	204	190	216
Coeur d'Alene, ID	142	124	195
College Station-Bryan, TX	52	27	81
Columbia, MO	4	4	5
Columbus, GA-AL	199	184	176
Columbus, IN	113	136	109
Corpus Christi, TX	170	168	162
Corvallis, OR	82	70	112
Cumberland, MD-WV	180	201	167
Dalton, GA	254	256	243
Danville, IL	111	165	65
Danville, VA	213	232	190
Davenport-Moline-Rock Island, IA-IL	56	62	92
Decatur, AL	184	199	145
Decatur, IL	116	139	74
Deltona-Daytona Beach-Ormond Beach, FL	148	121	184
Dothan, AL	125	127	70
Dover, DE	245	240	245
Dubuque, IA	14	25	17
Duluth, MN-WI	47	61	114
Durham-Chapel Hill, NC	9	11	8
Eau Claire, WI	34	52	41
El Centro, CA	97	82	14
Elizabethtown, KY	187	182	130
Elkhart-Goshen, IN	244	246	237
Elmira, NY	197	205	182
Erie, PA	182	187	193
Eugene-Springfield, OR	174	162	201
Evansville, IN-KY	44	38	38
Fairbanks, AK	79	63	172
Fargo, ND-MN	18	20	27
Farmington, NM	250	244	250

259 SMALL METRO RANKINGS

METRO	OVERALL	65-79	80+
Fayetteville, NC	219	203	205
Fayetteville-Springdale-Rogers, AR-MO	193	172	188
Flagstaff, AZ	188	174	206
Flint, MI	163	170	177
Florence, SC	70	80	62
Fond du Lac, WI	183	200	173
Fort Collins-Loveland, CO	42	41	83
Fort Smith, AR-OK	176	185	134
Fort Walton Beach-Crestview-Destin, FL	178	181	156
Fort Wayne, IN	26	26	43
Gadsden, AL	212	222	164
Gainesville, FL	6	5	6
Gainesville, GA	202	210	163
Glens Falls, NY	144	173	132
Goldsboro, NC	239	245	222
Grand Forks, ND-MN	24	29	21
Grand Junction, CO	108	100	141
Great Falls, MT	23	43	25
Greeley, CO	232	234	246
Green Bay, WI	209	204	235
Greenville, NC	89	88	76
Gulfport-Biloxi, MS	186	180	153
Hagerstown-Martinsburg, MD-WV	222	213	240
Hanford-Corcoran, CA	248	239	215
Harrisonburg, VA	124	90	108
Hattiesburg, MS	15	18	7
Hickory-Lenoir-Morganton, NC	207	222	211
Hinesville-Fort Stewart, GA	225	217	180
Holland-Grand Haven, MI	145	102	194
Hot Springs, AR	75	107	71
Houma-Bayou Cane-Thibodaux, LA	160	143	88
Huntington-Ashland, WV-KY-OH	119	120	143
Huntsville, AL	152	113	154
Idaho Falls, ID	149	166	146
Iowa City, IA	2	2	1
Ithaca, NY	27	14	50
Jackson, MI	248	250	252
Jackson, TN	99	129	73

259 SMALL METRO RANKINGS

METRO	OVERALL	65-79	80+
Jacksonville, NC	246	220	229
Janesville, WI	228	231	249
Jefferson City, MO	79	86	75
Johnson City, TN	132	130	117
Johnstown, PA	87	114	95
Jonesboro, AR	188	196	118
Joplin, MO	121	131	122
Kalamazoo-Portage, MI	100	92	133
Kankakee-Bradley, IL	135	158	152
Kennewick-Pasco-Richland, WA	222	208	198
Killeen-Temple-Fort Hood, TX	48	50	31
Kingsport-Bristol-Bristol, TN-VA	166	149	180
Kingston, NY	236	229	247
Kokomo, IN	196	198	209
La Crosse, WI-MN	35	48	49
Lafayette, IN	172	111	213
Lafayette, LA	37	39	15
Lake Charles, LA	109	94	52
Lansing-East Lansing, MI	96	74	104
Laredo, TX	106	109	115
Las Cruces, NM	173	163	155
Lawrence, KS	57	33	123
Lawton, OK	104	105	53
Lebanon, PA	128	161	107
Lewiston, ID-WA	72	96	67
Lewiston-Auburn, ME	121	135	119
Lexington-Fayette, KY	33	46	44
Lima, OH	78	97	84
Lincoln, NE	16	16	30
Logan, UT-ID	40	37	42
Longview, TX	152	160	121
Longview, WA	257	257	256
Lubbock, TX	17	17	13
Lynchburg, VA	68	73	56
Macon, GA	139	141	100
Madera-Chowchilla, CA	235	241	200
Manchester-Nashua, NH	41	28	69
Mansfield, OH	169	176	171

259 SMALL METRO RANKINGS

METRO	OVERALL	65-79	80+
Medford, OR	118	137	98
Merced, CA	253	254	241
Michigan City-La Porte, IN	213	226	228
Midland, TX	52	53	24
Missoula, MT	8	9	16
Mobile, AL	162	164	149
Monroe, LA	110	112	51
Monroe, MI	251	253	255
Montgomery, AL	205	197	197
Morgantown, WV	13	13	18
Morristown, TN	259	258	259
Mount Vernon-Anacortes, WA	191	207	212
Muncie, IN	31	44	37
Muskegon-Norton Shores, MI	256	259	258
Myrtle Beach-North Myrtle Beach-Conway, SC	84	68	169
Napa, CA	93	106	46
Naples-Marco Island, FL	89	65	156
Niles-Benton Harbor, MI	215	230	223
Norwich-New London, CT	203	215	214
Ocala, FL	216	209	221
Ocean City, NJ	146	131	227
Odessa, TX	106	122	60
Olympia, WA	114	95	142
Oshkosh-Neenah, WI	151	174	158
Owensboro, KY	114	138	63
Panama City-Lynn Haven-Panama City Beach, FL	193	188	175
Parkersburg-Marietta-Vienna, WV-OH	154	156	166
Pascagoula, MS	225	219	191
Pensacola-Ferry Pass-Brent, FL	168	146	184
Peoria, IL	149	151	160
Pine Bluff, AR	234	251	195
Pittsfield, MA	155	179	164
Pocatello, ID	185	152	216
Port St. Lucie-Fort Pierce, FL	137	99	159
Portland-South Portland-Biddeford, ME	81	71	127
Prescott, AZ	220	211	239
Pueblo, CO	130	153	116
Punta Gorda, FL	36	33	78

259 SMALL METRO RANKINGS

METRO	OVERALL	65-79	80+
Racine, WI	229	238	238
Rapid City, SD	10	10	12
Reading, PA	195	183	225
Redding, CA	227	218	232
Reno-Sparks, NV	59	35	113
Roanoke, VA	77	79	54
Rochester, MN	5	12	4
Rockford, IL	237	237	254
Rocky Mount, NC	237	247	219
Rome, GA	62	97	35
Saginaw-Saginaw Township North, MI	98	133	66
Salem, OR	209	214	230
Salinas, CA	230	216	203
Salisbury, MD	190	193	199
San Angelo, TX	68	81	32
San Luis Obispo-Paso Robles, CA	63	69	39
Sandusky, OH	140	194	144
Santa Barbara-Santa Maria-Goleta, CA	58	55	19
Santa Cruz-Watsonville, CA	171	118	160
Santa Fe, NM	43	31	105
Santa Rosa-Petaluma, CA	136	123	120
Savannah, GA	147	133	124
Sheboygan, WI	181	191	177
Sherman-Denison, TX	101	117	91
Shreveport-Bossier City, LA	117	101	96
Sioux City, IA-NE-SD	22	30	20
Sioux Falls, SD	1	1	2
South Bend-Mishawaka, IN-MI	158	157	174
Spartanburg, SC	198	195	202
Spokane, WA	83	83	126
Springfield, IL	86	89	103
Springfield, MO	103	87	150
Springfield, OH	217	232	220
St. Cloud, MN	45	67	77

259 SMALL METRO RANKINGS

METRO	OVERALL	65-79	80+
St. George, UT	64	60	88
St. Joseph, MO-KS	141	155	129
State College, PA	49	22	64
Sumter, SC	200	202	186
Tallahassee, FL	133	77	147
Terre Haute, IN	123	115	151
Texarkana, TX-AR	76	103	34
Topeka, KS	93	103	110
Trenton-Ewing, NJ	39	31	40
Tuscaloosa, AL	143	128	135
Tyler, TX	46	55	47
Utica-Rome, NY	112	91	137
Valdosta, GA	176	177	136
Vallejo-Fairfield, CA	243	228	232
Victoria, TX	131	148	85
Vineland-Millville-Bridgeton, NJ	247	242	242
Visalia-Porterville, CA	255	252	250
Waco, TX	74	75	59
Warner Robins, GA	164	144	101
Waterloo-Cedar Falls, IA	38	42	58
Wausau, WI	134	168	125
Weirton-Steubenville, WV-OH	102	116	86
Wenatchee-East Wenatchee, WA	206	220	224
Wheeling, WV-OH	29	57	22
Wichita Falls, TX	73	85	23
Williamsport, PA	156	191	130
Wilmington, NC	178	140	204
Winchester, VA-WV	157	170	140
Winston-Salem, NC	71	72	78
Yakima, WA	252	255	253
York-Hanover, PA	201	189	207
Yuba City, CA	242	235	207
Yuma, AZ	258	249	256



INTERACTIVE DATA

Infographics and data for each metro area as well as tools for policymakers can be found at www.milkeninstitute.org/successfulaging.

Methodology

Best Cities for Successful Aging is a comprehensive index that generates a composite ranking for each metro area. The composite ranking is based on eight subcomponents (general indicators, health care, wellness, living arrangements, transportation/convenience, financial well-being, employment/education, and community engagement). Each of the eight subcomponents is composed of multiple individual indicators—78 individual indicators in all.

Note that our methodology is based on publicly available data, not surveys of households or consumers. (However, we have included a list of relevant indexes on topics related to aging on page 55, most of which use survey data.) In our index, each metro is benchmarked against the top-performing location for every indicator in each subcomponent. This creates a normalized scoring system that could be consistently compared across each measure. (Please refer to the tables in the following pages for the indicators included in the subcomponents and how they were weighted.)

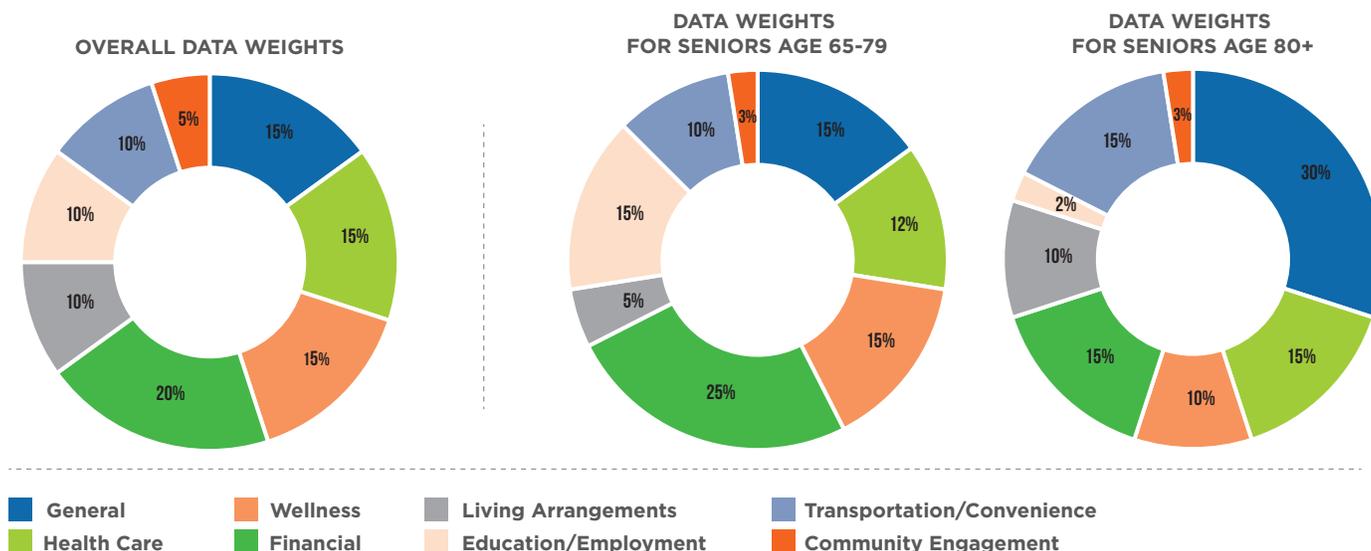
At the same time, we recognize that a 65-year-old's needs likely differ from an 80-year-old's. By using the same data but weighting the indicators differently, we created two subindexes, one for ages 65 through 79 and another for age 80 and up.

Determining Weights for the Overall Composite Index

How did we determine the weighting? In a recent AARP survey, 41 percent of Americans 50 and older identified health care as their top problem or challenge. Thirty-five percent cited economic issues such as unemployment and financial stability as their top concern. And 20 percent put issues such as transportation, how to spend their time, family values, politics, and government at the top of their priority list.

Another survey by Sunlife Financial revealed that 43 percent of Americans are “not at all confident” about meeting retirement health-care costs. Approximately 53 percent had made healthy changes in lifestyle out of concern for future health-care costs. Nine percent had already tapped retirement savings, sold assets, or borrowed to pay for an illness or medical procedure; more than half believed they would never replace what they spent.

Based on these two surveys, our literature review, and recommendations from our advisors, we are comfortable concluding that health care and wellness top the priority list, followed by financial security, safety, and security (included in the general indicators), and the rest. We assigned the weights below to arrive at the composite index score and ranking and to arrive at the subindexes for the two age ranges:



Data Creation and Resolving Data Issues

The index uses publicly available data at the metropolitan statistical area (MSA) level. (Population statistics are used to normalize measures on a per-capita or per-population 65+ basis where appropriate.) The methodology faces some challenges that we addressed this way:

- » **Missing/inadequate data:** For many indicators, data are not available for all metros. But in a number of cases, data were available at the state or even national level. The first step was to come up with proxy measures for the indicators. Example: Life expectancy at age 65 is available at the state level. But we estimated the measure at the metro level using shift shares. Even at the MSA level, many small metros do not have public-use data. To utilize as much data as possible, we divided the sample into the 100 large metros and 259 small metros, with the latter category including fewer indicators.
- » **Using state-level data:** In many cases we could not find a proxy measure to break down to the metro level. However, state-level indicators were assigned a lower weight.

Certainly, there are thousands of innovative programs that operate locally or regionally. The index cannot take these initiatives into account because no standardized data exist by which to measure them, but a section in the main report highlights a few examples that could be replicated on a wider scale.

We considered two sets of indicators:

- » General indicators influence decisions about where to live regardless of age. Examples include the cost of living, crime and safety, overall economic prosperity, and weather.
- » Specific indicators focus explicitly on the needs of older Americans although they might affect the general population as well. These include access to high-quality health-care and wellness programs, the availability of specialized housing and living arrangements, financial factors, transportation and convenience, continuing education and job training programs, and community engagement.

In the pages that follow, we will describe the rationale for the indicators we selected.



GENERAL INDICATORS

A key factor in a region's affordability is its cost of living. We computed the ratio of median home price to personal income in the MSA and compared it to the national ratio.

Everyone, regardless of age, wants to live in a safe and secure community. The index looked at each area's relative crime rate, the proportion of binge drinkers, and the number of traffic fatalities to assess the probability of car accidents, domestic violence, and similar offenses.

It is also important to live in a place with a vibrant economy as measured by job growth, unemployment, and income inequality. A vibrant economy suggests job opportunities not only for older residents but also for their children and grandchildren, which might keep the younger generation nearby.

Last but not least, weather is an important factor for any age group. We developed a composite weather index that includes the number of heating degree days, number of cooling degree days, level of humidity, average days of sunshine per year, and average snowfall (including sleet) per year.

General Indicators				
INDICATOR	METHODOLOGY	YEAR	WEIGHTS **	
			100 Large	259 Small
Cost of living	Median housing price/per capita personal income; divided by corresponding U.S. value <i>The lowest value receives a score of 100</i> Data Sources: National Association of Realtors, Moody's Analytics	2009	0.15	0.15
Crime rate	Violent and property crimes per 100,000 population <i>The lowest value receives a score of 100</i> Data Sources: Federal Bureau of Investigation, Illinois State Police Department	2009	0.15	0.15
% binge drinkers*	Men (at least 5 drinks), Women (at least 4 drinks) <i>The lowest value receives a score of 100</i> Data Sources: Centers for Disease Control and Prevention, Milken Institute	2010	0.05	-
Employment growth	Indexed growth (2005-2010) <i>The highest value receives a score of 100</i> Data Source: Bureau of Labor Statistics	2005; 2010	0.15	0.15
Unemployment rate	<i>The lowest value receives a score of 100</i> Data Source: Bureau of Labor Statistics	2010	0.10	0.10
Income distribution	Gini coefficient <i>The lowest value receives a score of 100</i> Data Source: U.S. Census Bureau	2009	0.05	0.05
Weather	Composite score using heating degree days, cooling degree days, humidity, sunshine, and snowfall/sleet <i>The highest value receives a score of 100</i> Data Sources: U.S. Department of Energy, National Oceanic and Atmospheric Administration, Milken Institute	2009	0.30	0.35
Fatal car crashes	Number of crashes involving a fatality, per capita <i>The lowest value receives a score of 100</i> Data Source: National Highway Traffic Safety Administration	2010	0.05	0.05

*Used only for large metros. ** Figures may not add up to one due to rounding.

Source: Milken Institute

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HEALTH-CARE INDICATORS

Access to health-care services is a paramount concern. Understanding the scope and quality of local health-care services is especially crucial as we face a national shortage of doctors, nurses, hospitals, and specialists. To measure access to care in a given region, we used indicators such as the number of doctors and hospital beds as well as the presence of hospitals with specialist units that can address the unique needs of older Americans.

To determine which specialist units are most relevant, we considered the following:

- » More than 70 million Americans age 50 and older—four in five older adults—suffer from at least one chronic condition.
- » One in eight older Americans has Alzheimer’s disease.
- » More than one in four seniors had diabetes in 2010—a 77 percent increase from 1997.
- » The prevalence of mental illness increased almost 70 percent between 1997 and 2006.
- » Falls account for 10 percent of emergency room visits and 6 percent of hospitalizations among people over 65.

Based on these factors, we included hospitals with geriatric services, hospitals with Alzheimer’s units, availability of hospice services, number of dialysis centers, number of orthopedic surgeons, number of MRI centers, etc., in the health-care indicator.

Quality of care is just as important as access to care. To capture this, we included hospitals with Joint Commission on Accreditation of Healthcare Organizations accreditation, Magnet hospitals with nursing quality programs, etc. Ideally, hospitals with Centers of Excellence for Aging would be included, but data are currently unavailable.

Health-Care Indicators				
INDICATOR	METHODOLOGY	YEAR	WEIGHTS **	
			100 Large	259 Small
ACCESS TO CARE				
Number of doctors	Normalized by composite score from average per capita and per pop 65+ calculations <i>The highest value receives a score of 100</i> Data Source: U.S. Department of Health and Human Services	2008	0.10	0.10
Number of hospital beds	Normalized by composite score from average per capita and per pop 65+ calculations <i>The highest value receives a score of 100</i> Data Source: U.S. Department of Health and Human Services	2007	0.15	0.15
Number of long-term hospitals	Normalized by composite score from average per capita and per pop 65+ calculations <i>The highest value receives a score of 100</i> Data Source: U.S. Department of Health and Human Services	2007	0.02	0.04
Number of hospitals with geriatric services	Normalized by composite score from average per capita and per pop 65+ calculations <i>The highest value receives a score of 100</i> Data Sources: U.S. Department of Health and Human Services, city websites	2007	0.03	0.04
Number of hospitals with rehabilitation services	Normalized by composite score from average per capita and per pop 65+ calculations <i>The highest value receives a score of 100</i> Data Sources: U.S. Department of Health and Human Services, city websites	2007	0.03	0.03
Number of hospitals with Alzheimer's units	Normalized by composite score from average per capita and per pop 65+ calculations <i>The highest value receives a score of 100</i> Data Source: U.S. Department of Health and Human Services	2007	0.03	0.05
Number of hospitals with hospice services	Normalized by composite score from average per capita and per pop 65+ calculations <i>The highest value receives a score of 100</i> Data Source: U.S. Department of Health and Human Services	2007	0.03	0.03

Health-Care Indicators				
INDICATOR	METHODOLOGY	YEAR	WEIGHTS **	
			100 Large	259 Small
Number of orthopedic surgeons	Normalized by composite score from average per capita and per pop 65+ calculations <i>The highest value receives a score of 100</i> Data Source: U.S. Department of Health and Human Services	2008	0.05	0.05
Number of psychologists	Normalized by composite score from average per capita and per pop 65+ calculations <i>The highest value receives a score of 100</i> Data Sources: Bureau of Labor Statistics, U.S. Department of Health and Human Services, Milken Institute	2010	0.05	0.05
Number of dialysis centers*	Normalized by composite score from average per capita and per pop 65+ calculations, NAICS code: 621492 <i>The highest value receives a score of 100</i> Data Sources: U.S. Census Bureau, U.S. Department of Health and Human Services, city websites	2010	0.06	-
Number of medical and diagnostic centers (including X-ray, MRI, and ultrasound imaging)*	Normalized by composite score from average per capita and per pop 65+ calculations, NAICS code: 6215 <i>The highest value receives a score of 100</i> Data Source: U.S. Census Bureau	2009	0.06	-
Number of nurses	Normalized by composite score from average per capita and per pop 65+ calculations <i>The highest value receives a score of 100</i> Data Sources: Bureau of Labor Statistics, Milken Institute	2010	0.10	0.13
Number of physical therapists	Normalized by composite score from average per capita and per pop 65+ calculations <i>The highest value receives a score of 100</i> Data Sources: U.S. Department of Health and Human Services, Bureau of Labor Statistics	2008	0.05	0.08
COST OF CARE				
Expenses per inpatient day	Average expenses per inpatient day divided by U.S. value (state-level data) <i>The lowest value receives a score of 100</i> Data Source: Kaiser Family Foundation	2009	0.02	0.02
QUALITY OF CARE				
% of hospitals with JCAHO accreditation	<i>The highest value receives a score of 100</i> Data Sources: U.S. Department of Health and Human Services, city websites	2007	0.08	0.08
% of hospitals with medical school affiliation	<i>The highest value receives a score of 100</i> Data Source: U.S. Department of Health and Human Services	2007	0.07	0.07
% of Magnet hospitals	<i>The highest value receives a score of 100</i> Data Source: American Nurses Credentialing Center	2010	0.08	0.09

*Used only for large metros. ** Figures may not add up to one due to rounding.

Source: Milken Institute



WELLNESS INDICATORS

Access to medical care isn't the only factor determining well-being. Older Americans can take charge of their own health, improve their quality of life, and lower their costs by emphasizing physical activity and prevention. Our index gauges which locations encourage an active lifestyle.

Advances in medicine and health awareness efforts are leading to a longer life expectancy. We used life expectancy at 65 as a proxy measure for quality of life.

It's well-established that obesity leads to many chronic conditions. In 2008, the highest rates of obesity were found among "early" baby boomers (age 52-61), followed closely by "late" boomers (age 42-51). Obesity rates among the elderly are expected to rise sharply over the next two decades as the boomers enter their retirement years. Higher rates of obesity and greater numbers of people with all types of chronic conditions will undoubtedly strain local health-care systems. To reflect this in the index, we included measures such as obesity rates, the number of diabetes cases, and the number of people eligible for Medicare and Medicaid.

Research shows that a nutritious diet, physical activity, social engagement, and mentally stimulating pursuits can all help people stay healthy. New studies also suggest these factors might reduce the risk of cognitive decline and Alzheimer's disease. We included indicators that address recreational facilities and food choices.

Although wellness programs for older Americans are plentiful, data are not readily available for each of them, and many do not operate nationally. Consequently, we included the existing number of fitness facilities in the area instead of measuring each unique program in detail. (The number of YMCAs in the metro was also included in the index but as a social engagement indicator.)

It would also be desirable to measure support networks for caregivers. But no quantifiable comprehensive measure could be found at this time, so that was not included as an indicator.

Wellness Indicators				
INDICATOR	METHODOLOGY	YEAR	WEIGHTS **	
			100 Large	259 Small
Medicare enrollment	Number enrolled in Medicare divided by pop 65+ <i>The highest value receives a score of 100</i> <i>Data Source: U.S. Department of Health and Human Services</i>	2007	0.06	0.08
Medicaid eligibility	Number eligible divided by pop 65+ <i>The lowest value receives a score of 100</i> <i>Data Source: U.S. Department of Health and Human Services</i>	2005	0.06	0.08
Obesity rate	Per capita <i>The lowest value receives a score of 100</i> <i>Data Source: Centers for Disease Control and Prevention</i>	2008	0.06	0.08
Smoking rate*	Normalized by composite score from average per capita and per pop 65+ calculations <i>The lowest value receives a score of 100</i> <i>Data Sources: Centers for Disease Control and Prevention, Milken Institute</i>	2010	0.06	-
Diabetes rate	Normalized by composite score from average per capita and per pop 65+ calculations <i>The lowest value receives a score of 100</i> <i>Data Source: Centers for Disease Control and Prevention</i>	2008	0.06	0.08
Alzheimer's cases	Per pop 65+ <i>The lowest value receives a score of 100</i> <i>Data Sources: Alzheimer's Association, Milken Institute</i>	2010	0.05	0.08

Wellness Indicators				
INDICATOR	METHODOLOGY	YEAR	WEIGHTS **	
			100 Large	259 Small
Number of caregivers	Normalized by composite score from average per capita and per pop 65+ calculations (state-level data) <i>The highest value receives a score of 100</i> Data Source: AARP	2008	0.04	0.06
Life expectancy at 65	Divided by corresponding U.S. value <i>The highest value receives a score of 100</i> Data Source: Centers for Disease Control and Prevention	2007	0.07	0.09
% of seniors living in family households	Number 65+ living in family households divided by pop 65+ <i>The highest value receives a score of 100</i> Data Source: U.S. Census Bureau	2010	0.06	0.08
% of seniors with frequent mental distress*	<i>The lowest value receives a score of 100</i> Data Sources: Centers for Disease Control and Prevention, Milken Institute	2009	0.06	-
% of seniors with no physical activity*	<i>The lowest value receives a score of 100</i> Data Sources: Centers for Disease Control and Prevention, Milken Institute	2009	0.09	-
% of commuters who walk to work*	<i>The highest value receives a score of 100</i> Data Source: U.S. Census Bureau	2010	0.09	-
Number of fitness and recreational sports centers	Per capita, NAICS code: 71394 <i>The highest value receives a score of 100</i> Data Source: U.S. Census Bureau	2009	0.06	0.08
Number of fast-food outlets	Per 1,000 population <i>The lowest value receives a score of 100</i> Data Source: U.S. Department of Agriculture	2008	0.07	0.09
Soda consumption	Consumption at home, gallons per capita <i>The lowest value receives a score of 100</i> Data Source: U.S. Department of Agriculture	2006	0.07	0.09
Number of golf courses, skiing resorts, marinas, bowling alleys, etc.	Normalized by composite score from average per capita and per pop 65+ calculations, NAICS codes: 71391, 71392, 71393, 71395 <i>The highest value receives a score of 100</i> Data Source: U.S. Census Bureau	2010	0.05	0.07

*Used only for large metros. ** Figures may not add up to one due to rounding.

Source: Milken Institute

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LIVING ARRANGEMENT INDICATORS

Older Americans have unique housing needs that can be crucial to maintaining independence as well as financial and physical well-being.

The index includes a few general indicators attuned to “aging in place,” such as mean housing price, average rental prices, availability of home health-care services, etc. The number of households with at least one member 65 or older provides a measure of how well the overall housing stock is geared toward the specific needs of this age group.

Living Arrangement Indicators				
INDICATOR	METHODOLOGY	YEAR	WEIGHTS **	
			100 Large	259 Small
Median house price	Divided by corresponding U.S. value <i>The lowest value receives a score of 100</i> Data Sources: National Association of Realtors, Moody's Analytics	2009	0.13	0.13
Median rental price	Divided by corresponding U.S. value <i>The lowest value receives a score of 100</i> Data Source: U.S. Census Bureau	2009	0.13	0.13
% of households with 65+ residents	<i>The highest value receives a score of 100</i> Data Sources: U.S. Census Bureau, Milken Institute	2010	0.10	0.10
Number of nursing beds	Per population 65+ <i>The highest value receives a score of 100</i> Data Source: Kaiser Family Foundation	2010	0.10	0.10
Cost of semi-private nursing room	Median value, divided by corresponding U.S. value (state-level data) <i>The lowest value receives a score of 100</i> Data Sources: Metlife Mature Market Institute, Milken Institute	2009	0.05	0.05
Home health-care service providers	Per population 65+, NAICS code 6216 <i>The highest value receives a score of 100</i> Data Source: Bureau of Labor Statistics	2009	0.20	0.20
Continuing-care facilities	Number of facilities per 65+ person <i>The highest value receives a score of 100</i> Data Source: U.S. Census Bureau	2010	0.10	0.10
Cost of assisted living	Median value, divided by corresponding U.S. value (state-level data) <i>The lowest value receives a score of 100</i> Data Sources: Metlife Mature Market Institute, Milken Institute	2010	0.05	0.05
Nursing-home rating	Percent with 5-star rating <i>The highest value receives a score of 100</i> Data Source: Centers for Medicare and Medicaid Services	2008	0.15	0.15

*Used only for large metros. ** Figures may not add up to one due to rounding.

Source: Milken Institute

In addition, many older Americans need services such as landscape maintenance, shopping, and housekeeping. It is difficult to measure the presence of these services, and we are unable to include them in the index at this time.

Among the alternative living arrangements included as indicators are:

- » Nursing homes: The number of nursing beds available as well as the average cost of nursing-home care. Quality is measured by Medicare’s nursing home provider ratings.

- » Continuing-care retirement communities: These developments offer a progressive continuum of care on a single campus. Over the course of years, residents may move from independent living to assisted living (with additional household services) to facilities with specialized nursing care or rehabilitation services. CCRCs generally charge a sizable entrance fee and ongoing monthly charges. These communities offer an independent lifestyle for as long as possible but also provide the reassurance of having greater care at hand as needed.
- » College-linked retirement communities: These communities have a connection to a college or university and can be located on or off campus. Residents enjoy lifelong learning opportunities. Some of these developments include assisted living and continuing care. Unfortunately, data are limited, so we could not use this as an indicator. However, the number of universities, included as an employment/education indicator, can act as a proxy for this.

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TRANSPORTATION/CONVENIENCE INDICATORS

Mobility can determine the extent of independence and engagement that older Americans enjoy. But many communities across the U.S. can only be navigated by driving. As the population ages, the need for better public transit options will be vast.

A recent survey concluded that older Americans would consider using public transportation more regularly if:

- » it were convenient and easily accessible (80 percent)
- » services were more comfortable and took them to many of their regular destinations (75 percent)
- » it stopped at locations that offered senior discounts (68 percent)

Transit use by people 65 and older as a share of all the trips taken increased by a remarkable 40 percent from 2001 to 2009. In 2009, older adults took more than 1 billion trips on public transportation (a 55 percent increase over trips recorded in 2001). Fifteen percent of those 65-plus reported having used public transportation in the past month, and those respondents averaged approximately two trips per week.

To address transportation in the index, we included the mean commute time to work, number of passenger trips in public transportation, and mean fare for senior riders.

Transportation/Convenience Indicators				
INDICATOR	METHODOLOGY	YEAR	WEIGHTS **	
			100 Large	259 Small
Average commute time to work	<i>The lowest value receives a score of 100</i> Data Source: U.S. Census Bureau	2010	0.10	0.11
Number of passenger trips	Composite score from average per capita and per pop 65+ calculations <i>The highest value receives a score of 100</i> Data Sources: American Public Transportation Association, Milken Institute	2010	0.25	0.26
Mean fare in public transport*	65+ or people with disabilities <i>The lowest value receives a score of 100</i> Data Sources: American Public Transportation Association, city websites	2009	0.05	-
Investment in public/senior transportation	Section 5310 state spending per 65+ population, divided by the corresponding U.S. value <i>The highest value receives a score of 100</i> Data Sources: Federal Transit Administration, U.S. Census Bureau, Milken Institute	2011	0.15	0.16
Number of grocery, convenience stores, etc.	Per capita, NAICS codes: 4451, 4461, 8123 <i>The highest value receives a score of 100</i> Data Source: Bureau of Labor Statistics	2008	0.25	0.26
% of households near grocery	Percent nearer than one mile, divided by the corresponding U.S. value <i>The highest value receives a score of 100</i> Data Source: U.S. Department of Agriculture	2010	0.20	0.21

*Used only for large metros. ** Figures may not add up to one due to rounding.

Source: Milken Institute

Two major government programs are worth mentioning here:

Transportation for Elderly Persons and Persons with Disabilities

- » Section 5310 under the U.S. Department of Transportation was created in 1975 to provide funding to states for the purpose of helping private nonprofit groups that serve the elderly and disabled.
- » Each state’s funding is based on the number of elderly and disabled residents.

New Freedom Grants

- » These grants seek to expand the available transportation options beyond the requirements of the Americans with Disabilities Act.
- » The Federal Transit Administration apportions 60 percent of the grants to designated recipients in large urbanized areas, 20 percent to the states for small urbanized areas, and 20 percent to the states for rural and small urban areas.

We also included number of grocery stores, drugstores, and dry-cleaning and laundry services available to indicate the convenience of daily life. A higher concentration of these establishments offsets decreased mobility because the stores are more likely to be a brief walk or short drive away. With this objective in mind, we also included the percentage of grocery stores within a mile range.

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FINANCIAL INDICATORS

As most Americans consider life after 65, financial security looms large. This issue will be pivotal as the baby boomers enter retirement, many without pensions or adequate retirement savings.

Our index cannot delve into all the issues surrounding retirement planning, but it can provide a snapshot of which places provide an environment that is conducive to financial well-being. Among these factors are:

1. Overall prosperity:

- » Total bank deposits, per capita income, percentage of the 65-plus population below the poverty level, and growth in income level.
- » Dependency ratio (proportion of those younger than 16 and older than 64 to the rest of the population). A lower ratio implies there are more working-age people in a location, providing a solid tax base that can support services for seniors.

2. State and local government policies: Tax burden (total state and local taxes paid per capita including property and sales taxes). A higher tax burden implies more financial stress for seniors.

3. Factors directly affecting older Americans: Many seniors seize the opportunity to launch small businesses, so we measured the growth of small businesses in each area. We also looked at reverse mortgages; a higher amount of reverse mortgage principal in a metro signals financial distress among the 65-plus population.

Beyond that, there are many unique financial issues that demand advisory services and a high level of financial literacy to navigate: estate planning, insurance issues, philanthropy, assistance in drawing up living wills and medical directives, etc. However, it is difficult to quantify these measures at the metro level.

Financial Indicators				
INDICATOR	METHODOLOGY	YEAR	WEIGHTS **	
			100 Large	259 Small
Number of banks, financial institutions, etc.	Per capita, NAICS codes: 522 and 523 <i>The highest value receives a score of 100</i> Data Source: Bureau of Labor Statistics	2009	0.10	0.10
Total bank deposits	Per capita, divided by corresponding U.S. value <i>The highest value receives a score of 100</i> Data Source: Federal Deposit Insurance Corporation	2010	0.10	0.10
Tax burden	State and local taxes paid, per capita (state-level data); divided by corresponding U.S. value <i>The lowest value receives a score of 100</i> Data Source: Tax Foundation	2009	0.15	0.15
Dependency ratio	Population (<18 and 65+) divided by population 18-64 <i>The lowest value receives a score of 100</i> Data Sources: U.S. Census Bureau, Milken Institute	2010	0.10	0.10
Indexed growth of small businesses	Indexed growth of number of businesses (<50 employees), divided by corresponding U.S. value <i>The highest value receives a score of 100</i> Data Source: U.S. Census Bureau	2004; 2009	0.15	0.15
% of 65+ population below poverty line	<i>The lowest value receives a score of 100</i> Data Source: U.S. Census Bureau	2009	0.10	0.10

Financial Indicators

INDICATOR	METHODOLOGY	YEAR	WEIGHTS **	
			100 Large	259 Small
Capital gains as % of adjusted gross income	Net capital gains divided by adjusted gross income (state-level data) <i>The highest value receives a score of 100</i> Data Sources: Internal Revenue Service, Milken Institute	2009	0.05	0.05
Income growth	Indexed income growth (2005-2010), divided by corresponding U.S. value <i>The highest value receives a score of 100</i> Data Source: Bureau of Economic Analysis	2005; 2010	0.10	0.10
Amount of reverse mortgages	Initial principal limit/population 65+, divided by corresponding U.S. value <i>The lowest value receives a score of 100</i> Data Source: U.S. Department of Housing and Urban Development	2011	0.15	0.15

*Used only for large metros. ** Figures may not add up to one due to rounding.

Source: Milken Institute

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EMPLOYMENT/EDUCATION INDICATORS

Many baby boomers are embarking on so-called encore careers. Their reasons are varied: They may be fulfilling long-held dreams, trying to stay productive and engaged, or seeking work out of necessity as they realize their Social Security or retirement income is inadequate.

Approximately 6 percent to 9.5 percent of 44- to 70-year-old Americans (5.3 million to 8.4 million people) have already started second careers. Many of them have turned to education, entrepreneurship, or social causes. One example is the EnCorps Teachers Program, which mobilizes retired science and math professionals who want to work in a teaching environment.

The challenge for the index is to find consistent data to measure the presence of encore career opportunities. We have included employment for those 65 and older and overall growth rates in key industries that are attracting older workers, such as health care, education, and leisure and hospitality industries. Similarly, a larger service-based economy (as opposed to a larger manufacturing economy) implies more opportunities for a senior to secure a job.

However, those who have already found their chosen second career still make up a relatively small group. A broader question focuses on retraining those who would like to seek new careers. Many retraining and educational programs are being offered to allow baby boomers to develop new job skills. Many older Americans find intellectual stimulation, fulfillment, and social engagement through lifelong learning and enrichment programs. But since it is difficult to account for all of these varied educational programs, we are using college enrollment, number of universities, and number of community colleges as a proxy measure. Approximately 84 percent of colleges report having offerings targeted to students over age 50.

Employment/Education Indicators				
INDICATOR	METHODOLOGY	YEAR	WEIGHTS **	
			100 Large	259 Small
Percent of 65+ employed	Divided by corresponding U.S. value <i>The highest value receives a score of 100</i> Data Sources: Bureau of Labor Statistics, Milken Institute	2010	0.15	0.20
65+ unemployment rate	<i>The lowest value receives a score of 100</i> Data Sources: Bureau of Labor Statistics, Milken Institute	2010	0.10	0.15
Employment growth (health, education, leisure, and hospitality)	Indexed growth 2005-2010, divided by corresponding U.S. value <i>The highest value receives a score of 100</i> Data Sources: Bureau of Labor Statistics, Milken Institute	2005; 2010	0.15	0.20
Output of service sector/ manufacturing	Divided by corresponding U.S. value <i>The highest value receives a score of 100</i> Data Sources: Bureau of Economic Analysis, Milken Institute	2010	0.20	0.20
College enrollment	Per capita <i>The highest value receives a score of 100</i> Data Source: U.S. Census Bureau	2010	0.20	0.25
Number of community colleges*	Per 100,000 population <i>The highest value receives a score of 100</i> Data Sources: U.S. Census Bureau, city websites	2010	0.15	-
Number of universities*	Per 100,000 population <i>The highest value receives a score of 100</i> Data Source: U.S. Census Bureau	2010	0.05	-

*Used only for large metros. ** Figures may not add up to one due to rounding.

Source: Milken Institute

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COMMUNITY ENGAGEMENT INDICATORS

The quality and degree of social and community engagement mean the difference between retirees feeling isolated and marginalized or enjoying a sense of connection and fulfillment. To reflect this in the index, we determined the relative number of museums, cultural institutions, entertainment venues, religious organizations, and public libraries in a given area. In addition, it is hard to overstate the importance of YMCAs as an integral part of the community because they provide both wellness and enrichment programs.

Many seniors want to live in a place with a larger proportion of older people so they can connect socially, so we included the percentage of a city's population that is 65 and older.

According to the Administration on Aging, more older Americans are enriching their communities and their own lives through volunteerism. A study from the Corporation for National and Community Service found that 7.7 million seniors volunteered in 2002 compared with 9.1 million in 2009. That represents 24 percent of older Americans.

One funding source for states is the Older Americans Act Title III, which was allocated \$1.19 billion in 2011. Title III provides grants for state agencies on aging to develop community-based systems that serve older people, including support services and senior activity programs. Measuring this funding will act as a proxy for the availability of such programs.

Ideally, we would measure a host of lifestyle factors such as the availability of senior discounts or the presence of seniors in the local artistic and cultural community. But because these can't be quantified, we can't include them as indicators.

Community Engagement Indicators				
INDICATOR	METHODOLOGY	YEAR	WEIGHTS **	
			100 Large	259 Small
% of population 65+	<i>The highest value receives a score of 100</i> Data Source: U.S. Census Bureau	2010	0.30	0.30
Number of arts, entertainment, and recreation facilities	Museums, places of worship, gambling halls, etc. (NAICS code: 71) Composite score from average per capita and per pop 65+ calculations <i>The highest value receives a score of 100</i> Data Source: Bureau of Labor Statistics	2010	0.25	0.25
Senior volunteer rates	Number of 65+ volunteers divided by pop 65+ (state-level data) <i>The highest value receives a score of 100</i> Data Sources: Corporation for National & Community Service, Milken Institute	2009	0.25	0.25
Number of public libraries	Composite score from average per capita and per pop 65+ calculations <i>The highest value receives a score of 100</i> Data Source: Institute of Museum and Library Services	2008	0.05	0.05
Number of YMCAs	Composite score from average per capita and per pop 65+ calculations <i>The highest value receives a score of 100</i> Data Source: YMCA	2011	0.10	0.10
Funding for seniors	State funding (Title III) for seniors per pop 65+, divided by U.S. value <i>The highest value receives a score of 100</i> Data Source: U.S. Administration on Aging	2010	0.05	0.05

** Figures may not add up to one due to rounding.

Source: Milken Institute

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