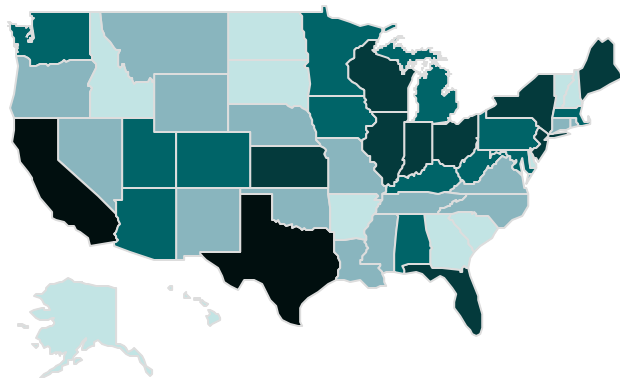# The Value of Aging Well: The Older Americans Act Creates Real Returns Through Community-Based Care

The Older Americans Act funds essential services allowing older adults to remain independent and thrive in their communities, thereby saving taxpayers billions of dollars in institutional care costs. Without these programs, one in five American seniors would face food insecurity, isolation, and premature placement in nursing homes. This infographic captures the impact, backed by data from SPR 2023.

# of Clients Served

- 18,000-49,999
- 50,000-149,999
- 150,000-399,999
- 400,000-799,999
- 800,000-Over 1M

12,503,033
Clients served

$ 4,217,290,409
Funds expended

296,640,212
Services Delivered

23.3%
of the U.S. population is over age 60

Nutrition

237,695,352 meals provided
For many older adults, the meal they receive is the only meal they can rely on each day

Transportation

14,279,323 trips completed
Allowing older adults to attend medical appointments, shop for groceries, visit family, and participate in community events

Information & Referral

10,961,651 contacts made
Connecting older adults to preventive support resources, timely referrals, and life-saving programs
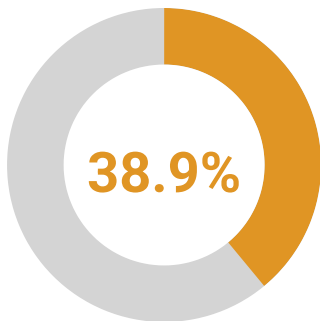
Personal Care

11,305,505 hours of personal care
Helping older adults with everyday tasks, such as bathing and dressing, to ensure their safety and dignity at home

Powered by ADVANCING STATES MonAmi
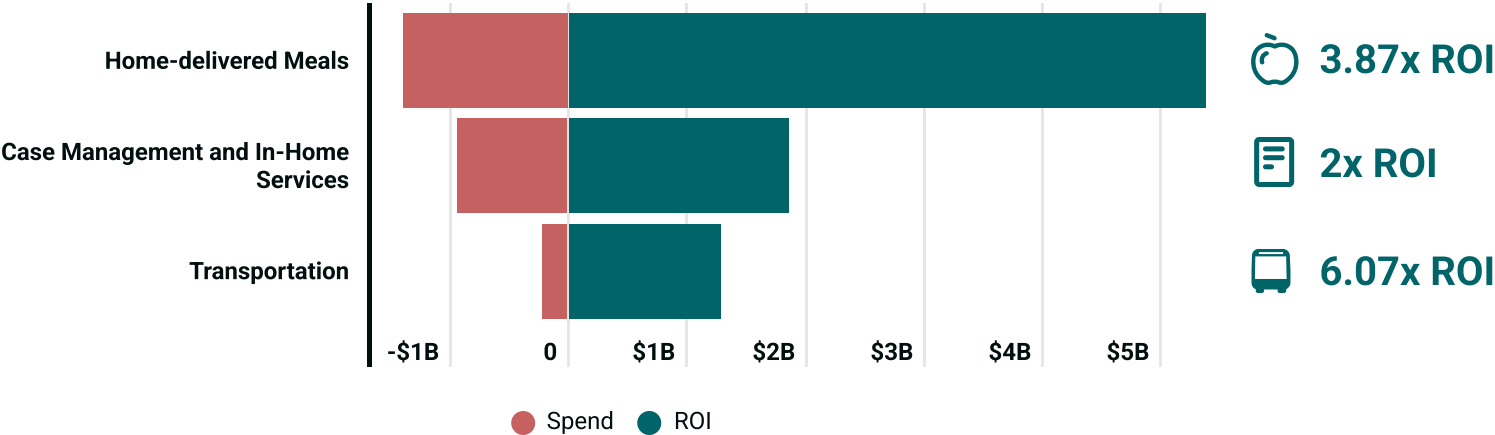
Estimated ROI of Aging Services

Every dollar invested in aging services through the Older Americans Act generates $1.90 in community value and taxpayer savings

38.9% of clients served are at or below the poverty level

1.9x ROI [1]

With **$2,521,789,150** in spending on key home and community-based services, Older Americans Act Programs achieved an estimated **$4,789,051,497** in cost savings by reducing the need for institutional care

Service	
Home-delivered Meals	3.87x ROI
Case Management and In-Home Services	2x ROI
Transportation	6.07x ROI

-$1B   0 $1B $2B $3B $4B $5B

● Spend   ● ROI

1,951,902 Extra Days [2]

living in community and avoiding hospital stays and institutional care

Appendix: Data Sources & Calculations

Older Americans Act - State Performance Report (SPR) FFY2023
Clients served, units of service, and total expenditures reported to the Administration for Community Living via the Older Americans Act Performance System (HHS, 2024).

% of Population over 60
Percentage of population over 60 is based on the 5-year estimate from 2019-2023 (U.S. Census Bureau, 2023).

(1) Return on Investment

1-1. ROI for home-delivered meals is calculated as $3.87 for every $1 spent. In a study of providing home-delivered meals to high-risk Medicare patients, researchers found that every $1 spent on home-delivered meals reduced the cost of hospital readmission by $3.87 (Martin et al., 2018).

1-2. ROI for transportation is calculated as $6.07 for every $1 spent. In a study of non-emergency medical transportation for Medicaid beneficiaries, researchers found that the total savings associated with chronic conditions and preventative care was 6.07 times the amount that was spent on non-emergency medical transportation (Rochlin et al., 2019).

1-3. Return for case management and home services is calculated as $2.00 for every $1 spent. A study of the effect of care coordination on long-term outcomes found that care coordination and associated services resulted in $7,920.24 savings per client over 5 years compared to those that did not receive care coordination (Shehu et al., 2025). The average cost of care coordination and associated services was $3,969.57 per client in this study. We divide the savings by the cost to determine the ROI of 2.0. The study and resulting ROI applies to case management as well as direct services obtained as a result. Because home delivered meals and transportation have more precise ROI estimates, we exclude those from this category, combining case management, personal care, homemaker, and chore services into the case management and home services spend.

(2) Days of Long Term Care Avoided

Given that 15% of older adults spend more than 2 years in a nursing home (Johnson et al., 2019), we assume that 15% of the clients served who are over age 60 are at risk of needing nursing home care – likely a substantial underestimate given our population. Additionally, a study of the relationship between home care service and residential care entry found that every hour of service provided per client per week results in a 6% decrease in the risk of entering residential care (Jorgensen et al., 2018). Therefore, the Days of Long Term Care Avoided is calculated as follows: (Total hours of service provided / Total clients over 60 / 52 weeks/year) * (.06 percentage decrease in risk per hour/client/week) * (Total clients over 60 * .15 percentage at risk) * 365 days/year

Johnson, R. W., Dey, J., & Drabek, J. (2019). What is the lifetime risk of needing and receiving long-term services and supports? U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation. https://aspe.hhs.gov/reports/what-lifetime-risk-needing-receiving-long-term-services-supports-0

Jorgensen, M., Siette, J., Georgiou, A., Warland, A., & Westbrook, J. (2018). Modeling the Association Between Home Care Service Use and Entry Into Residential Aged Care: A Cohort Study Using Routinely Collected Data. Journal of the American Medical Directors Association, 19(2), 117–121.e3. https://doi.org/10.1016/j.jamda.2017.08.004

Martin, S. L., Connelly, N., Parsons, C., & Blackstone, K. (2018). Simply delivered meals: A tale of collaboration. The American Journal of Managed Care, 24(6), 301–304. https://pubmed.ncbi.nlm.nih.gov/29939505/

Rochlin, D. H., Lee, C. M., Scheuter, C., Milstein, A., & Kaplan, R. M. (2019). Economic Benefit of "Modern" Nonemergency Medical Transportation That Utilizes Digital Transportation Networks. American journal of public health, 109(3), 472–474. https://doi.org/10.2105/AJPH.2018.304857

Shehu, E., Kaskie, B., Ohms, K., Liebzeit, D., Ashida, S., Buck, H. G., & Shane, D. M. (2025). Estimating Cost Savings of Care Coordination for Older Adults: Evidence from the Iowa Return to Community Program. Population health management, 28(1), 22–30. https://doi.org/10.1089/pop.2024.0192

U.S. Census Bureau. (2023). Population 60 years and over in the United States (American Community Survey 5-Year Estimates Subject Tables, Table S0102). https://data.census.gov/table/ACSST5Y2023.S0102?g=040XX00US21