

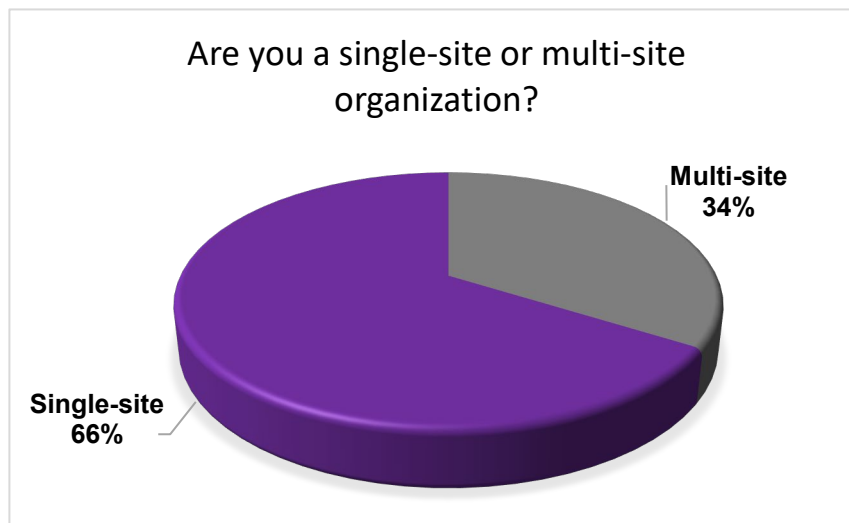
Healthspan

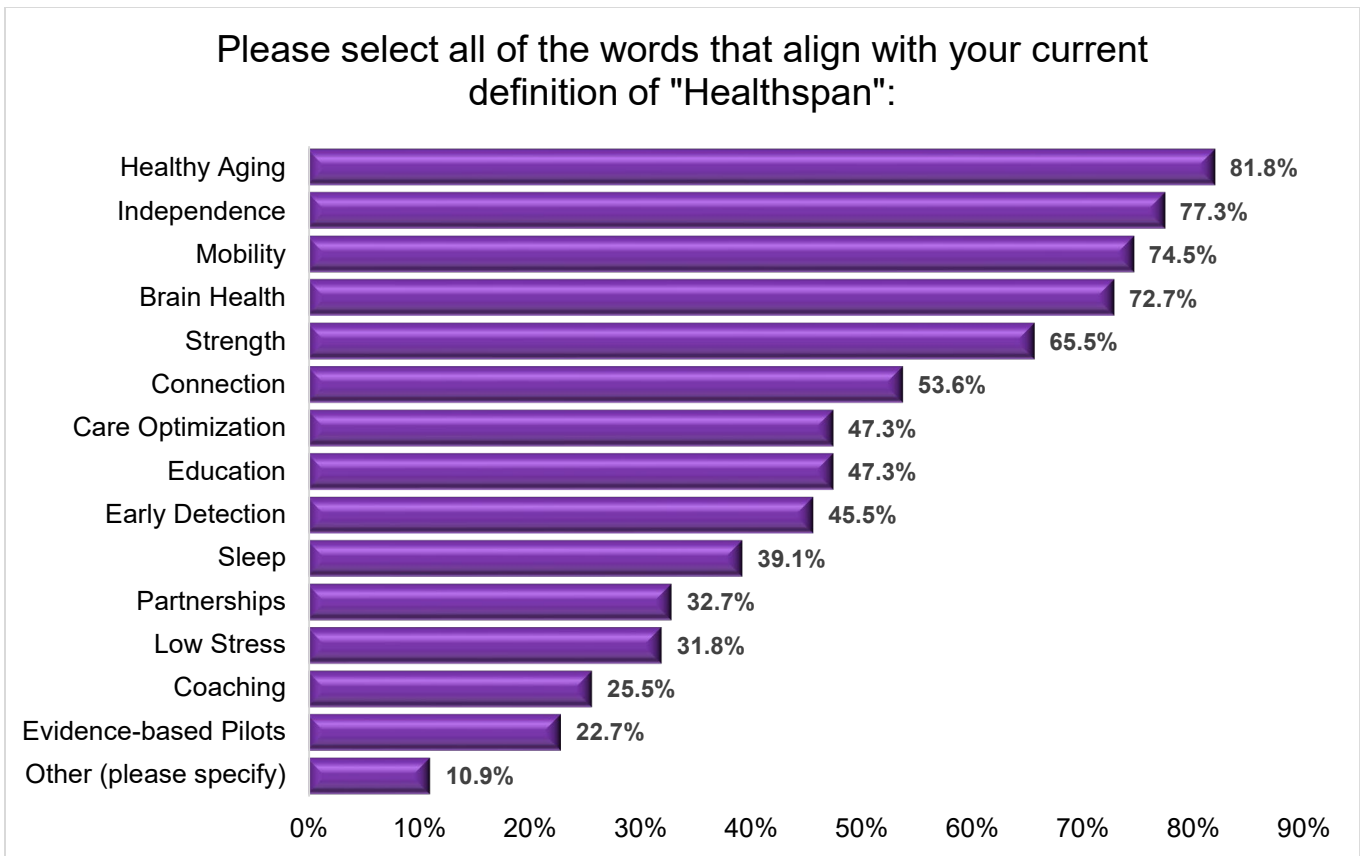
ZIEGLER CFO HOTLINESM

The purpose of the most recent Ziegler CFO HotlineSM was to understand how senior living organizations define, implement and invest in Healthspan initiatives. It's a term that's widely used, but not always clearly defined, and we wanted to better understand how organizations are thinking about it from an operating and financial standpoint. The survey was meant to help inform our broader research and upcoming discussions around how Healthspan can move from a broad concept to something more actionable for operators and boards. For the purposes of this survey, Ziegler framed Healthspan across five practical categories:

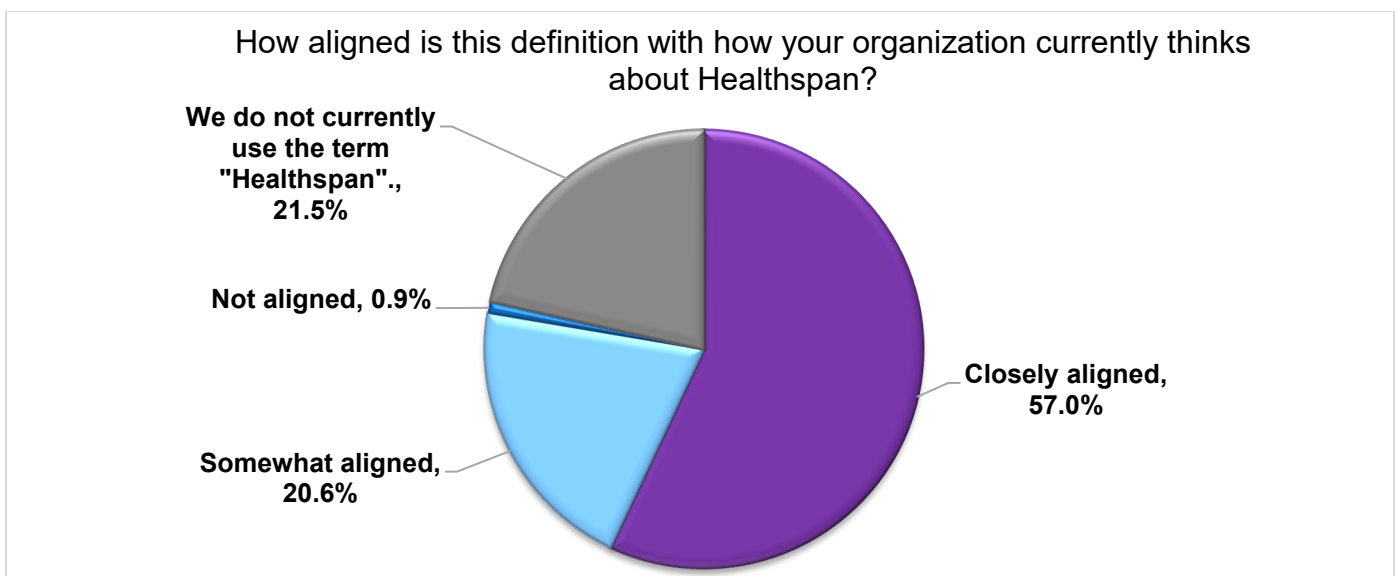
- Physical and Functional Longevity - strength, mobility, and independence
- Cognitive and Emotional Resilience – brain health, sleep, stress, and connection
- Preventive and Personalized Health – early detection, coaching, and care optimization
- Longevity Science and Innovation – education, partnerships, and evidence-based pilots
- Purpose, Environment, and Lifestyle Design – how daily life, design, and meaning support healthy aging.

Over 110, primarily not-for-profit, senior living CFOs and financial professionals from around the country responded to the survey, with 66% representing single-site organizations and 34% multi-site organizations.

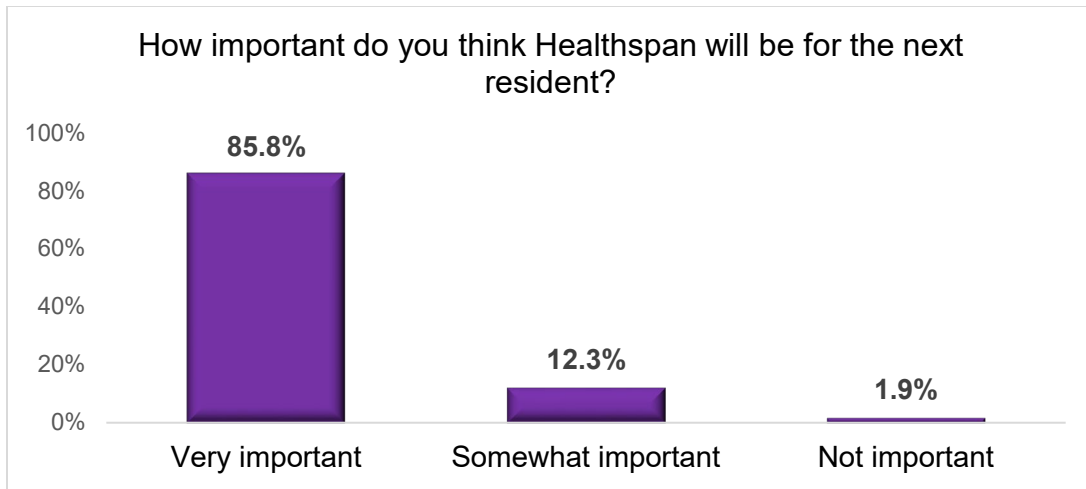




A majority of respondents indicated that the proposed definition of Healthspan, emphasizing independence, vitality, cognitive function, and purpose, is closely aligned with how their organizations currently think about the concept. Another meaningful segment reported that the definition was somewhat aligned, suggesting broad conceptual agreement even as organizations continue to refine their approach to Healthspan programming and strategy. At the same time, a notable share of respondents indicated that they do not currently use the term “Healthspan,” reinforcing that while the concept is gaining momentum across senior living, adoption of the terminology itself is still emerging.



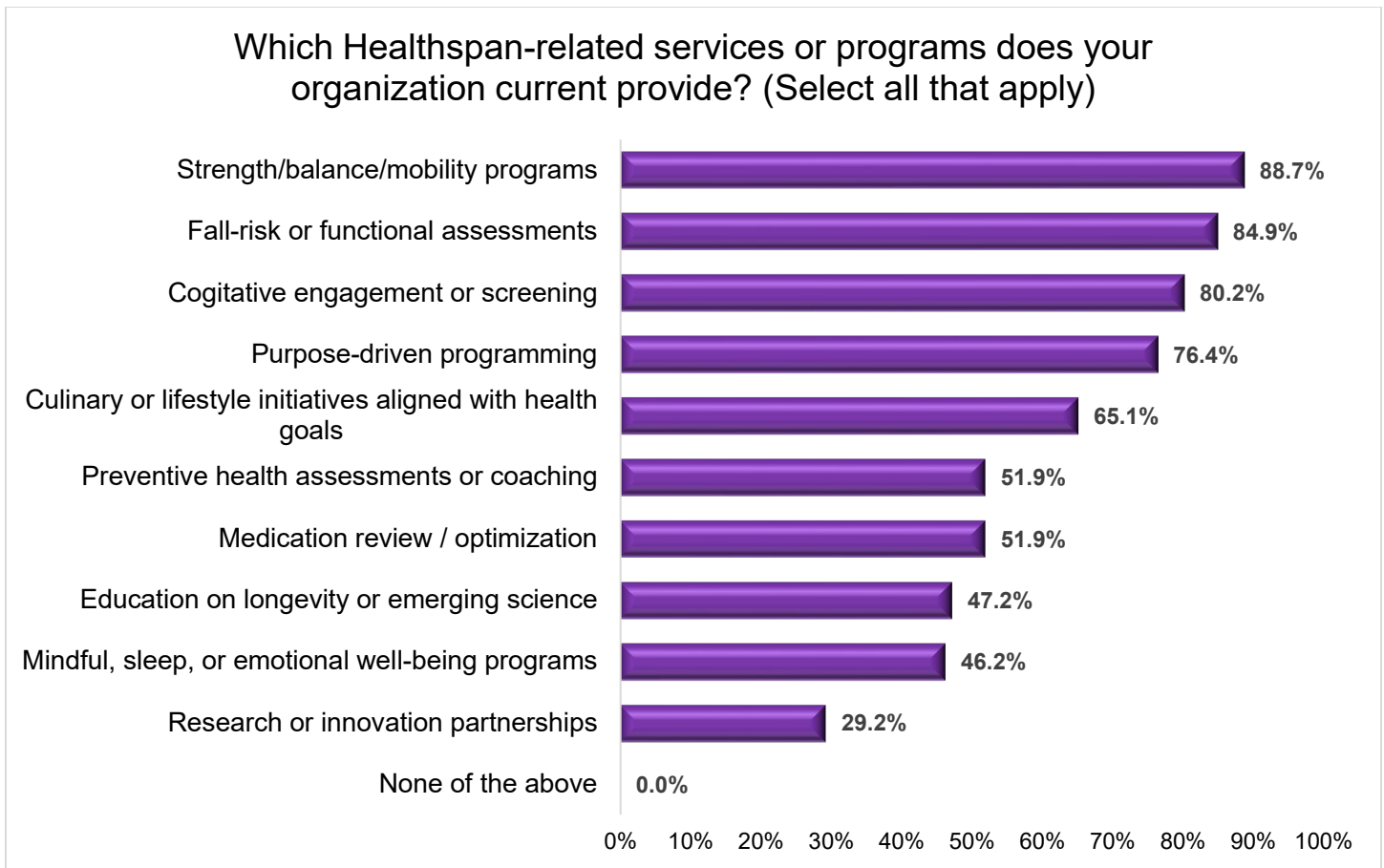
Responses overwhelmingly indicate that organizations believe Healthspan will be highly important to the next generation of senior living residents. The vast majority of respondents selected “Very important,” with only a small number indicating that Healthspan would be “Somewhat important” or “Not important.” These findings suggest that operators increasingly view Healthspan not as a niche wellness concept, but as a core expectation of future residents, particularly as consumer demand shifts toward maintaining independence, vitality, cognitive wellness, and overall quality of life as people age.



Survey responses suggest that many organizations are already offering a broad range of programs and services aligned with healthspan principles. The most common offerings focused on maintaining physical function and independence, including strength, balance, and mobility programs (88.7%), fall-risk or functional assessments (84.9%), and cognitive engagement or screening initiatives (80.2%).

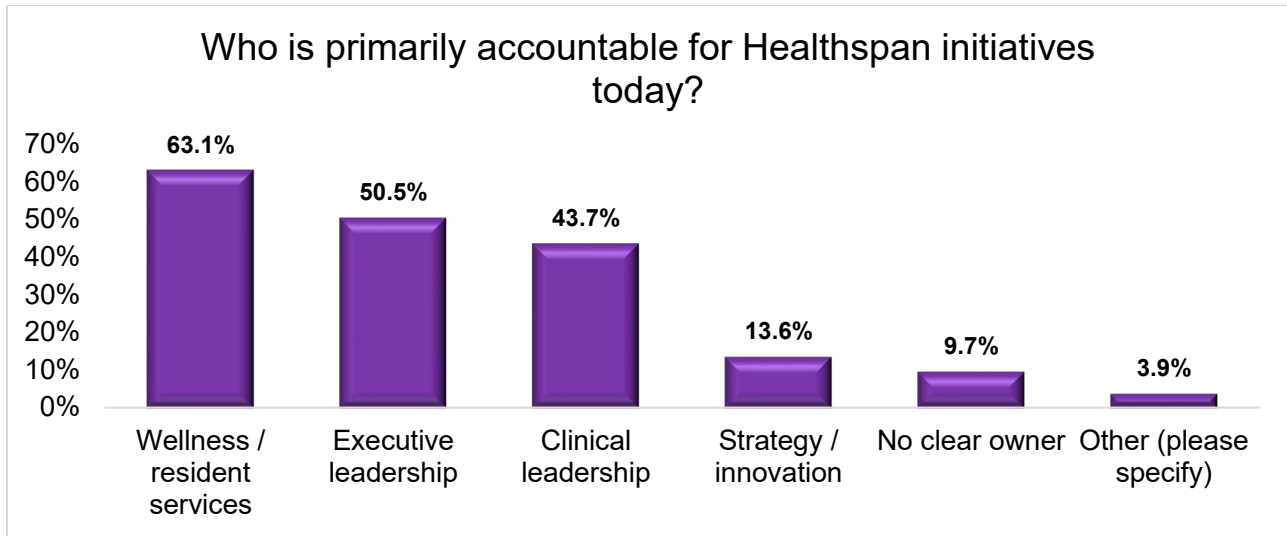
Purpose-driven programming, such as resident engagement, volunteerism, lifelong learning, and social connection initiatives, also ranked highly (76.4%), reinforcing the growing emphasis on emotional and social well-being alongside physical health.

More than half of respondents indicated that they provide culinary or lifestyle initiatives aligned with health goals, preventive health assessments or coaching, and medication review or optimization programs, demonstrating a broader shift toward proactive and holistic wellness strategies. Meanwhile, fewer respondents indicated involvement in research or innovation partnerships, potentially reflecting both the early-stage nature of some advanced Healthspan initiatives and the tendency for senior living organizations to rely on external healthcare, academic, or technology partners for these efforts.



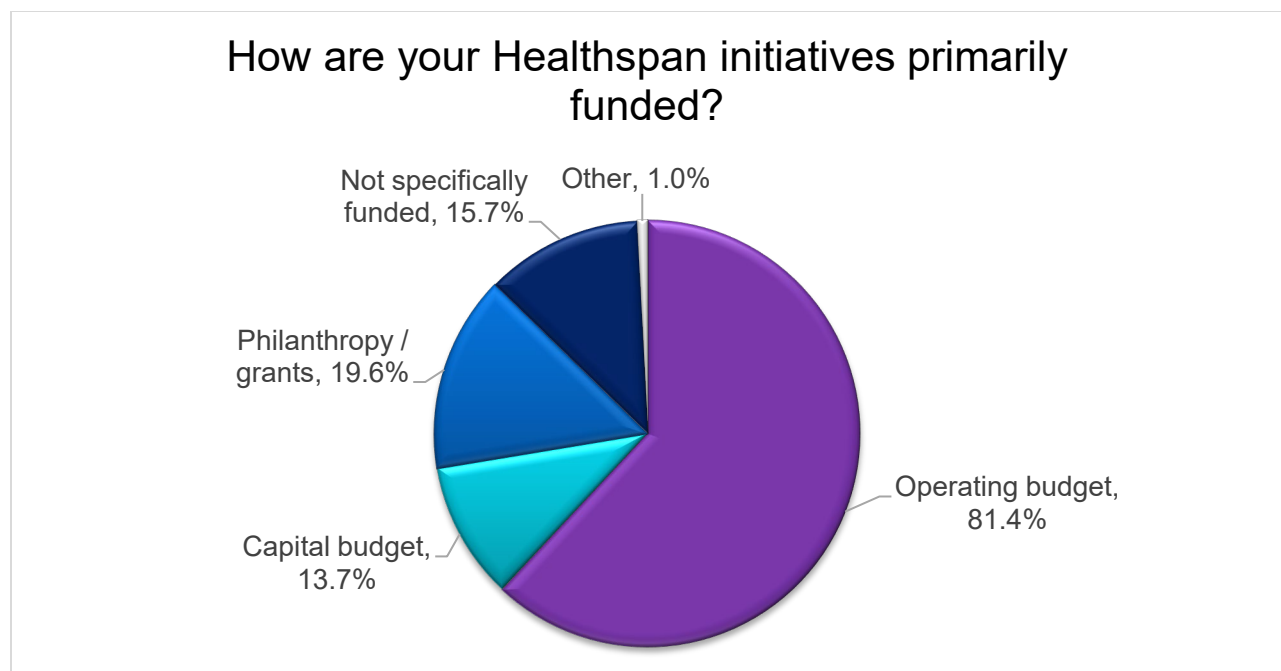
Survey results also reveal that accountability for Healthspan initiatives is currently shared across multiple functional areas rather than centralized within a single department. Executive leadership, clinical leadership, and wellness/resident services teams were most frequently identified as having responsibility for Healthspan-related efforts, reinforcing the cross-functional nature of wellness, engagement, and care coordination strategies within senior living organizations.

At the same time, several respondents indicated there is currently “no clear owner” for Healthspan initiatives, while open-ended responses pointed to a variety of emerging leadership structures, including strategy teams, wellness leaders, experience officers, and medical practice groups. These findings suggest that while Healthspan is becoming a growing strategic focus across the sector, many organizations are still determining where these initiatives should ultimately reside organizationally.



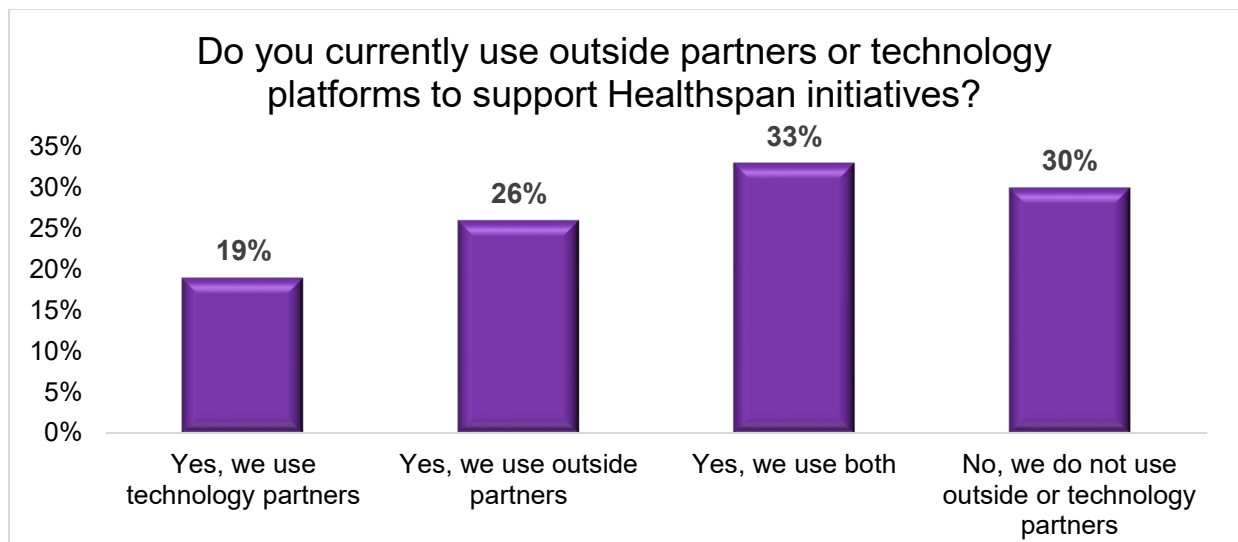
Survey responses indicate that most organizations are currently funding Healthspan initiatives through their operating budgets, suggesting these efforts are increasingly viewed as part of core operations rather than supplemental programming. A smaller, but still meaningful, share of respondents also reported utilizing capital budgets and philanthropy or grant funding to support Healthspan-related initiatives.

At the same time, several organizations indicated that Healthspan initiatives are “not specifically funded,” which may reflect the fragmented and cross-functional nature of many existing programs such as clinical, wellness, engagement, and dining. These findings suggest that while many organizations are already investing in components of Healthspan, those efforts may not yet be formally centralized under a dedicated Healthspan strategy, leadership structure, or budget. One respondent also highlighted the use of private-pay and Medicare-supported services, pointing to the potential for alternative reimbursement and revenue-supported models as Healthspan strategies continue to evolve across the sector.



Responses suggest that both single-site and multi-site organizations are actively leveraging outside partners and technology platforms to support Healthspan initiatives, though adoption patterns vary somewhat by organizational structure. Multi-site organizations appeared somewhat more likely to report using both outside partners and technology platforms together, potentially reflecting greater scale, access to resources, and the operational need for more coordinated and technology-enabled approaches across larger portfolios.

Single-site organizations, meanwhile, showed a wider mix of approaches, including relying solely on outside partners, solely on technology partners, utilizing both, or not currently using either. The findings may suggest that while many organizations recognize the value of partnerships and technology in supporting Healthspan strategies, adoption remains influenced by organizational scale, internal capabilities, and the maturity of Healthspan initiatives within the organization.

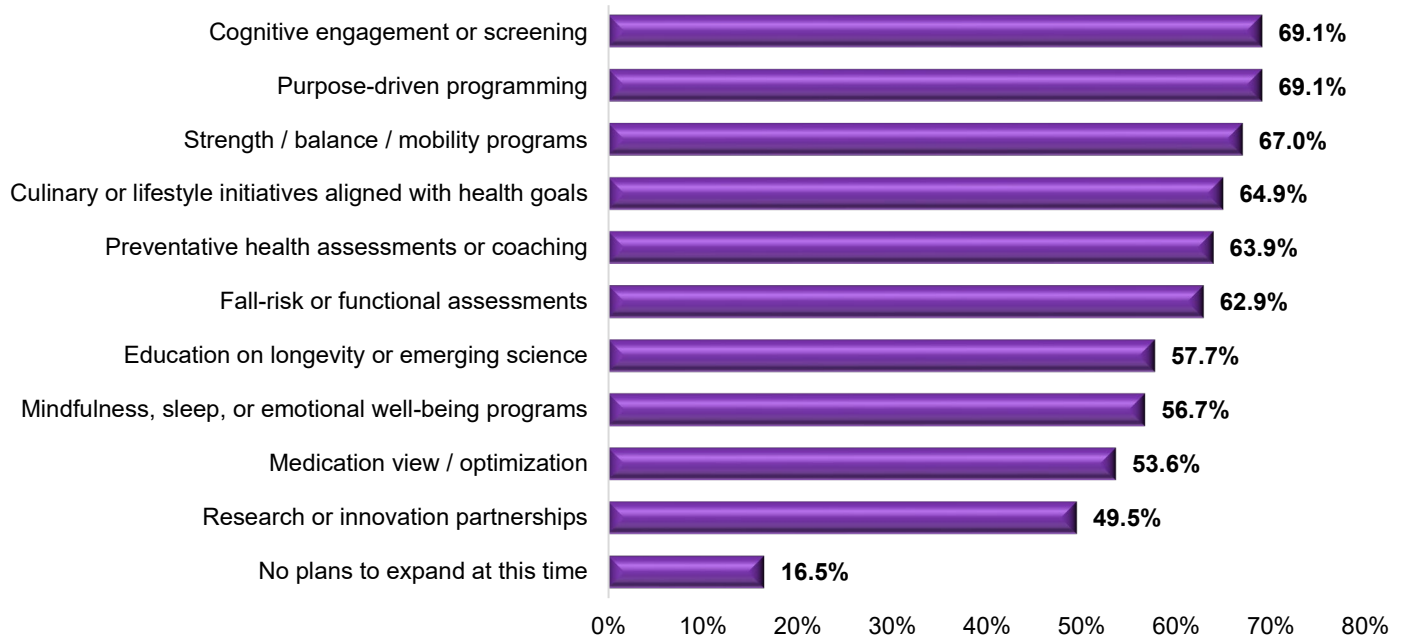


Open-ended responses highlight a diverse and expanding ecosystem of partners and platforms supporting Healthspan initiatives across senior living organizations. Respondents frequently cited collaborations with healthcare providers, therapy and rehabilitation groups, universities, wellness organizations, and technology companies focused on areas such as remote patient monitoring, fall prevention, cognitive engagement, wellness programming, and social connection. Commonly referenced partners and platforms included MatrixCare, LifeLoop, VirtuSense, Wellzesta, Amba, Java Group Programs, Curana, and ICAA.

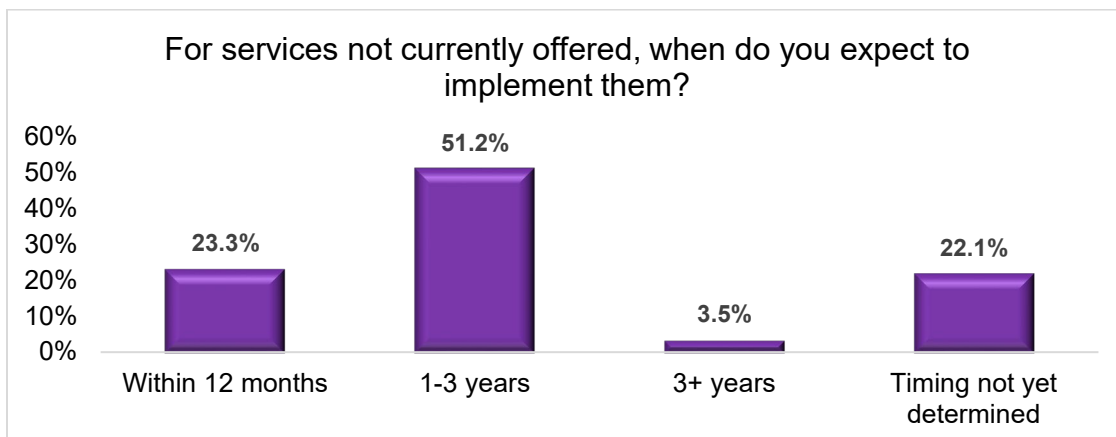
Partnership models span both clinical and technology-driven approaches. On the clinical side, organizations often engage home health agencies, therapy providers, and primary care groups, while technology adoption includes engagement platforms, remote monitoring tools, cognitive and fitness solutions, and broader EHR systems. Academic and research partnerships also emerged as a notable theme, signaling increased interest in evidence-based programming and longevity-focused initiatives.

Differences also emerge by organization type. Single-site providers tend to be more variable, either opting out of partnerships or building highly customized, locally driven models. In contrast, multi-site organizations demonstrate greater consistency and scale, with more standardized platforms and structured partner strategies, often deployed through pilots across portfolios. Across both groups, the market remains in an early stage of maturity, with ongoing experimentation and a lack of fully integrated solutions, pointing to continued fragmentation and opportunity ahead.

Which Healthspan-related services or programs does your organization plan to offer in the future?



When asked when respondents will be implementing services not currently offered, most indicate a measured implementation timeline, targeting a 1–3 year window for new Healthspan services, suggesting a steadier, phased expansion rather than rapid rollout. A smaller group plans to act within a year, while a notable share report that the timing is not yet determined, potentially reflecting ongoing strategy development. Only a limited number of respondents indicated a 3+ year horizon, reinforcing that most view these initiatives as a near- to mid-term priority. Overall, the sector appears committed to advancing Healthspan, but with varying levels of readiness and a deliberate pace.



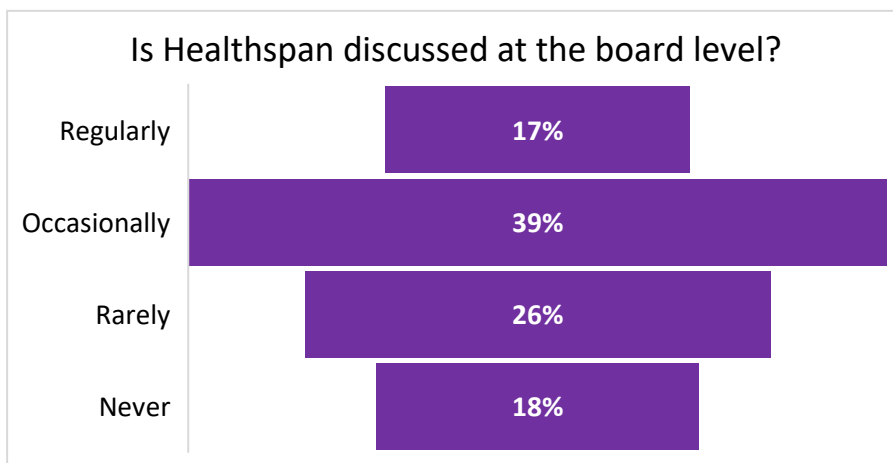
Healthspan efforts across the sector are still largely in the early to mid-stage of development, with most organizations describing their approach as ad hoc or program based. Once again, this suggests that while

Healthspan is an active focus area, initiatives are often delivered through individual programs rather than as part of a fully integrated strategy.

That said, momentum appears to be building toward greater alignment, as a good share of organizations report efforts that are coordinated across departments or strategically defined with leadership oversight. However, fewer have reached the point where Healthspan is fully embedded into operating and capital planning, indicating that true enterprise-wide integration remains limited. Overall, there appears to be just a minor subset of organizations achieving full integration into core operations.

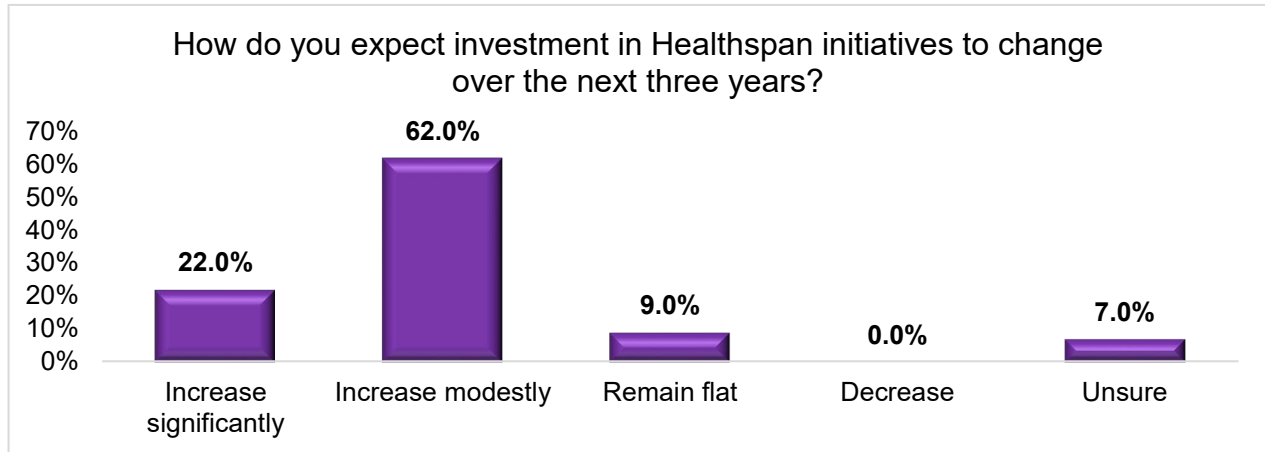


Board-level engagement around Healthspan remains inconsistent and generally limited. Most organizations report that the topic is discussed only occasionally or rarely, suggesting it has not yet become a priority at the governance level. A meaningful portion indicate that Healthspan is never discussed at the board level, reinforcing that many organizations are still treating these efforts as operational or programmatic rather than strategic. At the same time, a smaller but notable group reports regular board-level discussion, signaling a subset of organizations where Healthspan is emerging as a more central, strategic focus.



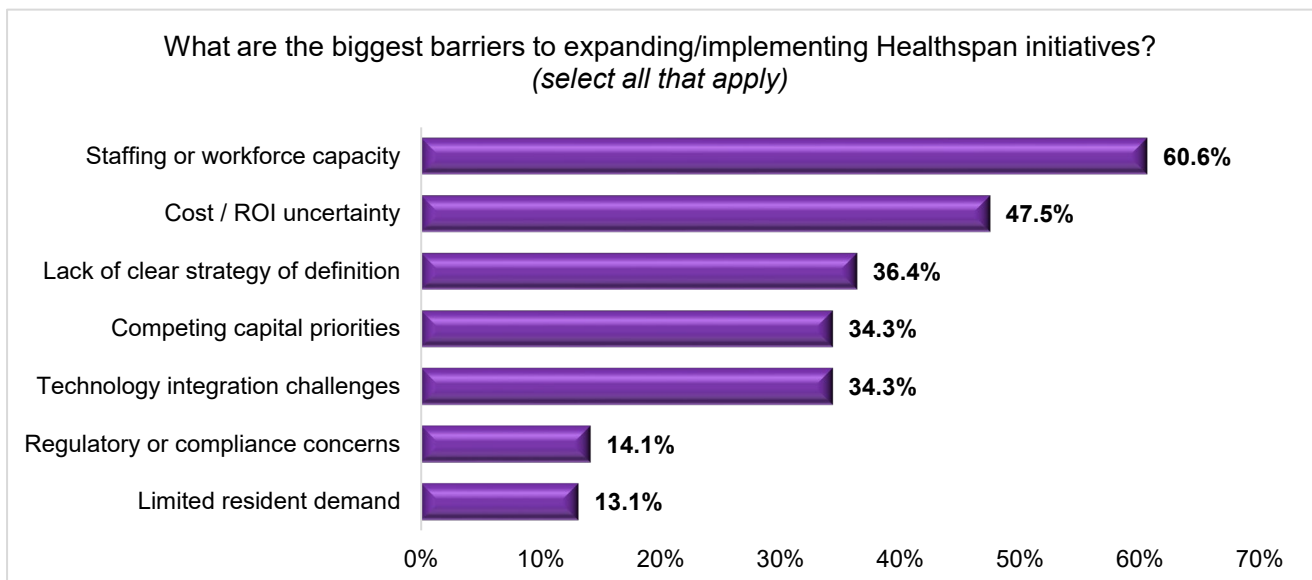
Investment expectations point to steady, but measured growth in Healthspan initiatives over the next three years. The majority of organizations (62%) anticipate modest increases, suggesting continued commitment while maintaining a careful approach to capital deployment.

Another 22% expect to increase investment significantly, indicating a group of more aggressive adopters positioning Healthspan as a strategic priority. At the same time, some respondents plan to remain flat or are unsure, reflecting variability in financial capacity, strategic clarity, or confidence in near-term ROI. Overall, the outlook suggests broad alignment around growth, but with varying levels of conviction and pace, reinforcing that the sector is still balancing opportunity with execution and investment risk.



The survey shows that barriers to advancing Healthspan initiatives are largely operational and financial, with cost/ROI uncertainty and staffing or workforce capacity emerging as the most consistent challenges. Organizations also frequently cite lack of clear strategy and technology integration challenges, along with competing capital priorities, reinforcing that Healthspan efforts are still evolving and must compete with other pressing needs.

Differences by organization type are more about how these barriers manifest. Single-site providers tend to face more acute challenges around resources and strategic clarity, while multi-site organizations more often contend with integration, scale, and capital allocation complexity. Overall, the findings point to a sector navigating a mix of financial pressure, workforce constraints, and strategic ambiguity, shaping the pace and scope of Healthspan adoption.



Organizations are largely clustered in the middle stages of Healthspan maturity, with the greatest concentration indicating they are experimenting and learning. This suggests a sector actively testing programs, building internal knowledge, and exploring what works before fully committing to scaled strategies. A meaningful share (21.2%) reported that they are actively scaling initiatives or broader Healthspan strategies, signaling momentum among some operators moving beyond pilots into more deliberate execution. Additionally, a notable 12.1% indicated that they are ready to formalize a strategy, reinforcing that many organizations are approaching an inflection point toward more structured, enterprise-level planning.

At the same time, a smaller but important segment still view Healthspan as not a current priority, highlighting variability in adoption. Overall, the findings reflect a sector progressing from experimentation toward formalization and scale, with increasing strategic alignment but uneven levels of maturity across organizations.



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