As life expectancy for people living with HIV (PLWH) improves, the number of older HIV-infected persons continues to increase. We examined data from the Georgia HIV/AIDS Surveillance database to compare the HIV Care Continuum for PLWH aged 55+ years to those aged 13-54 years, stratified by sex, race/ethnicity and transmission risk category. Among the 9,312 PLWH aged 55+ in Georgia as of 12/31/2012, half (50%) were engaged in HIV care, 37% were retained in care, and 40% were virally suppressed (VS); this is similar to the 55% engaged, 38% retained, and 38% VS among the 37,183 PLWH aged 13-54 years. Among those aged 55+ who were retained in care, however, VS was higher than among PLWH aged 13-54 years for males (87% vs 76%), females (83% vs 72%), black MSM (84% vs 62%), Hispanic/Latino MSM (91% vs 77%) and white MSM (92% vs 83%), respectively. PLWH in Georgia aged 55+ who were retained in HIV care were more likely to achieve viral suppression than younger age groups. However, increased longevity and better HIV control will be offset by the increased non-HIV-related mortality associated with aging. Identifying and providing for the future social support and medical care needs of increasing numbers of older Georgians living with HIV to ensure life-long retention in care in the absence of a cure presents challenges and opportunities for clinical and public health providers, and the community alike. More research is needed to identify services required to maintain quality of life for this aging HIV population.