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Position Statement:

Increase United States Health Plan Coverage for Exercise Programming in Community Mental Health Programs for People with Serious Mental Illness

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The Society of Behavioral Medicine and the American College of Sports Medicine encourage legislation and policies for Medicare, Medicaid, and private insurers to reimburse exercise programming for people with serious mental illness treated in community mental health programs.

An Ounce of Prevention is Worth a Pound of Cure

Exercise improves both mental and physical health while reducing health care costs. However, these benefits often do not reach adult consumers of community mental health programs who need them the most. Specifically, consumers with serious mental illness have lower fitness and physical activity levels than the general U.S. population. Reduction in health risks are greatest for those who move from a sedentary to modestly active lifestyle. Thus, policy changes are needed to support wellness services offered in community mental health programs to include exercise programs for people with serious mental illness.

The Health Inequities of Serious Mental Illness in the United States

Serious mental illnesses such as bipolar disorder and schizophrenia affect one in 20 Americans.⁵ Broader definitions of serious mental illness also include major depressive, anxiety, and personality disorders. Notably, people with serious mental illness die 10 years earlier than most Americans.⁶

- * This disparity in premature death is largely due to the high prevalence of preventable diseases such as cardiovascular disease and diabetes.⁷
- * Medications prescribed for serious mental illness contribute to epidemic levels of obesity, which occurs in more than 50% of adults diagnosed with these disorders.⁷⁻⁸
- * Many people with these chronic and debilitating serious mental illnesses receive most of their care in community mental health programs where preventive and medical care services are lacking.

- People with these mental disorders often struggle with persistent psychiatric symptoms as well as impairments in memory, executive function, or motor coordination that make it difficult to adopt and sustain positive health behaviors without professional support.9
- Fewer than 20% of adults with serious mental illness engage in regular physical activity that is sufficient to provide health benefits. 10

Exercise in Community Mental Health Programs to Improve Health

Studies based in community mental health programs show that exercise can significantly reduce health risks in people with serious mental illness¹⁰⁻¹³ by

- supporting healthy weight and managing chronic disease risk factors;^{9, 14-16}
- * increasing fitness and helping to prevent costly, diseaserelated disability;10,12-13
- reducing psychiatric symptoms, supporting brain health, and providing a healthy lifestyle alternative for people with co-occurring nicotine and substance use disorders;^{11, 17} and
- * enhancing social reintegration as part of a psychosocial rehabilitation program. 9-10

Exercise Can Reduce the Public Health Burden of Serious Mental Illness on Society

Exercise is a key preventive strategy to reduce the public health burden of the medical conditions of individuals who are treated primarily in community mental health programs.

- People with serious mental illness are among the most costly users of health services in the United States across health settings.¹⁸
- Exercise helps manage psychiatric symptoms that can contribute to unhealthy behaviors and reduce compliance with mental health and medical treatments.¹⁹
- Inadequate preventive and medical care for people with serious mental illness results in higher health care costs.²⁰⁻²¹

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Current Barriers to Offering Exercise Services

Despite the availability of a number of evidence-based programs to improve physical health and wellness behaviors among people with serious mental illness, ^{10, 12} there are multiple policy and funding barriers that make it difficult for community mental health programs to offer these programs to consumers. ^{20, 22}

- * Health care policies typically "carve out" mental health funds from physical health funds, denying community mental health programs the financial ability to offer exercise programming.^{20, 22}
- * Few funds are set aside for community mental health programs to train staff to deliver preventive health services like exercise programs.²⁰⁻²¹
- * Billing rules set by the Centers for Medicare & Medicaid Services (CMS) and private insurers prohibit most allied health professionals from receiving reimbursement for providing exercise programming.²²⁻²⁵

Policy Recommendations

The Society of Behavioral Medicine and the American College of Sports Medicine offer the following policy recommendations to support the use of exercise programming in conjunction with community mental health services as a first-line medical treatment to improve health outcomes and reduce health care costs in the long run.

Define evidenced-based exercise programming for people with serious mental illness by

- establishing a registry of evidence-based lifestyle programs that are eligible for reimbursement by regional and national health care providers; and
- * ensuring that treatment programs maintain effectiveness through sufficient duration (>4 months) and adequate frequency of face-to-face contact.

Expand health care services for people with serious mental illness to specify exercise programming as a reimbursable service through mechanisms in the Affordable Care Act for health promotion including the Medicaid 1915i State Plan and Community Based Services Program and adaptations of the Specialty Health Home Program.

Clearly specify standards of professional accreditation or competency to deliver exercise programming to people with serious mental illness by

- establishing minimum training competencies for the health professionals who deliver exercise programming for people with serious mental illness; and
- allocating funding to support training health professionals to deliver exercise programming in community mental health settings.

Increase the range of disciplines of licensed/certified allied and mental health professionals who are eligible for reimbursement to deliver exercise programming in mental health settings.

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