Insurance should pay for exercise programs to cut health costs, UF expert says

By Linda Shrieve, Orlando Sentinel  
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Health insurance companies should pay for exercise classes, which would in turn reduce healthcare costs, especially among high-risk groups, such as diabetics, says a University of Florida researcher.

In an editorial in the Journal of the American Medical Association, Dr. Marco Pahor, director of the University of Florida Institute on Aging, says health insurers—particularly federal programs such as Medicare—ought to pay for structured exercise classes because the health benefits and cost-savings outweigh the expense.

“Cumulative work over the past few decades provides solid evidence for public policymakers to consider structured physical activity and exercise programs as worthy of insurance reimbursement,” Pahor said.

Although exercise is beneficial for everyone, “the greatest benefits of physical exercise are achieved in those who are highest risk, such as those with diabetes,” Pahor said. Studies show, he added, that among patients with type 2 diabetes, structured physical exercise is effective in controlling blood sugar, and those types of exercise programs are cost-effective.

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Pahor’s paper, which was published Tuesday, May 3, accompanies an analysis of many clinical trials that examined the effect of exercise and physical activity on the control of blood glucose levels.

A number of studies have linked exercise programs with better health indicators, including blood pressure, lipid levels—such as cholesterol and triglycerides—cardiovascular events, cognition, physical performance, premature death and quality of life.

In JAMA, Pahor’s editorial accompanied a study conducted by Dr. Daniel Umpierre of the Hospital de Clínicas de Porto Alegre, Brazil. Umpierre and his colleagues compared the link between advice on physical activity, structured exercise programs and markers of
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Researchers found that exercise programs are cost-effective and have the potential to improve survival rates and health-related quality of life. To get the greatest benefit from exercise, patients should perform both aerobic exercise and resistance training, such as lifting weights, the report said.

Some insurance providers already include a fitness benefit for members, such as monthly membership at certain fitness centers or access to personal trainers or exercise classes at reduced cost. Older adults who use these health plan-sponsored club benefits have typically seen slower increases in their health-care costs, according to the research.

For example, in one study, older adults who visited a health club two or more times a week during the course of two years incurred $1,252 less in health-care costs during the second year — compared to those who visited a health club less than once a week.

Still, providing exercise opportunities doesn’t have to be expensive. Researchers found that group training or walking programs, for example, can be cost-effective forms of physical activity that don’t require more expensive health-care professionals or equipment.

And a more expensive program, such as a health-club membership, isn’t necessarily better. “It is unlikely that simply offering a gym benefit will entice people who are sedentary to start exercising,” Pahor said.

With respect to type 2 diabetes, Medicare currently reimburses patients for medical nutrition therapy and what it calls “approved self-management education,” training that includes blood glucose management, nutrition, physical activity and preventing and treating complications of diabetes. But no specific reimbursement is given for any physical activity or exercise program, despite evidence that such programs can help improve health and cut costs.

Researchers and scientists still need to figure out what type of exercise and physical activity programs would work best, what population group should be targeted and at what stage of life or health status would be most cost-effective.

Various studies, including one from the UF Institute on Aging Lifestyle Interventions and Independence for Elders (LIFE), are aimed at answering those questions. Funded by the National Institute on Aging, the LIFE study is the largest of its kind to examine physical activity and health education as a way to prevent mobility disability among older adults, and accounts for the largest federal award to the University of Florida.

UF’s Institute on Aging will break ground on May 26 for a 40,000-square-foot complex within UF’s new $45 million, 120,000-square-foot Clinical and Translational Research Building at Lake Nona.

The Lake Nona site does not have funding for any physical exercise studies yet, but Pahor said he looks forward to having them in the future.

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