

UNITED STATES NATIONAL EXERCISE REFERRAL FRAMEWORK

U.S. NERF

ROADMAP



**Transforming Healthcare
Through Exercise Integration**

CREP

Coalition for the Registration
of Exercise Professionals™

EXECUTIVE SUMMARY

The United States National Exercise Referral Framework (U.S. NERF) represents a groundbreaking initiative aimed at identifying measured competency and addressing the confidence gap that exists regarding which exercise professionals, education, and training best align with the participant's/patient's conditions, health status, and goals. It also aims to bridge the gap between healthcare and healthspan by integrating physical activity and exercise into patient care. This technical paper outlines the strategic milestones necessary for successfully implementing the U.S. NERF across various sectors.

The U.S. NERF references established credentialing program standards—as defined and assessed by the NCCA (National Commission for Certifying Agencies) and ISO (International Organization for Standardization)—to identify which professionals, in qualified job roles, represent the most appropriate provider of services based on the current conditions and health status of the patient/participant. By implementing structured referral systems for physicians and advocating for policy reforms, the U.S. NERF aims to enhance healthcare delivery. Its approach emphasizes evidence-based programming to support physical activity interventions, improve patient outcomes, and reduce healthcare costs – rather than solely emphasizing prevention. Qualifying credentials are aggregated in the United States Registry of Exercise Professionals® (USREPS®).

THE IMPORTANCE OF EXERCISE IN HEALTHCARE

Physical activity and exercise have long been recognized as key components of preventive health and management of numerous acute and chronic conditions, yet they have historically been underutilized in mainstream healthcare. Chronic conditions like heart disease, diabetes, obesity, and certain cancers, affecting millions globally, can often be better managed, physiologically and financially, or even prevented through regular physical activity. However, integrating exercise into patient care has been challenging due to the lack of standardized measures for physical activity within electronic medical records, the absence of a structured referral system, limited professional recognition, and insufficient policy support.

The U.S. NERF aims to address one of the gaps by establishing a standardized approach to identify appropriately qualified exercise professionals for referrals based on the level of medical oversight each patient requires. Through a series of strategic milestones, the U.S. NERF aims to facilitate the assessment, prescription, and referral of patients to evidence-based physical activity programs and interventions – benefiting patients, medical professionals, and exercise professionals alike.



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ABOUT THE AUTHOR

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Graham Melstrand is a distinguished leader in the health and fitness industry, bringing over 35 years of expertise in advancing the exercise profession. His career has been dedicated to improving access to and participation in physical activity programs and interventions, with a strong focus on professional standards, credentialing, and health advocacy.

Throughout his career, Graham has held leadership positions at the American Council on Exercise and has actively contributed to multiple industry and health advocacy organizations. His extensive work includes serving on the boards of the Coalition for the Registration of Exercise Professionals (CREP), the Physical Activity Alliance (PAA), and the Committee on Accreditation of Exercise Science (CoAES). He has also contributed to the Medical Fitness Association (MFA) Facility Standards and Outcomes Committees, the Special Olympics Fitness Advisory Committee, and various working groups with NSF International and World Active.

A former nationally ranked endurance track cyclist, Graham competed in the 1984 and 1988 Olympic Trials, demonstrating his lifelong commitment to fitness and performance. He holds a degree in Physical Education/Athletic Training from California State University, Long Beach. His expertise in government relations and policy development has played a pivotal role in shaping best practices for the education, professional credentialing, and employment of exercise professionals both domestically and internationally.

As the Founder and CEO of ActivSport Advisory, Graham continues to drive strategic initiatives that bridge the gap between healthcare and physical activity, ensuring that exercise professionals are recognized as key contributors to patient health and well-being. He is the principal author of this report. With a strong commitment to advancing healthcare and exercise integration, he has been instrumental in shaping the U.S. NERF, advocating for policy changes, and fostering collaboration between healthcare and exercise professionals. Graham's leadership and vision continue to drive efforts to improve patient outcomes and incorporate structured physical activity into mainstream healthcare.



MILESTONE 1

DEVELOPMENT AND LAUNCH OF THE U.S. NERF

Background

The development of the U.S. NERF was driven by a need for a more structured approach to integrating expert providers of physical activity and exercise programs into healthcare for the prevention or management of diagnosed health conditions. Key stakeholders in the U.S. NERF include patients, healthcare providers, payers, policymakers, exercise professionals, and the for-profit and nonprofit facilities that employ them. The utility, function, and implications of the U.S. NERF are the result of collaborative efforts by several health advocacy coalitions, which worked to create a framework that would standardize the collection of physical activity data for health, exercise prescription, and referral as a standard of care.

Strategic Partnerships

The U.S. NERF is a product of the collaboration between the Physical Activity Alliance (PAA), CREP's member organizations, and the United States Registry of Exercise Professionals® (USREPS®), developed as part of the "It's Time to Move" initiative. This initiative emphasizes the promotion of physical activity as a core component of health and wellness by integrating exercise into healthcare practices. By leveraging a broad network of stakeholders committed to advancing public health, the partnership strengthens U.S. NERF's reach and impact, promoting increased physical activity and comprehensive exercise integration across healthcare systems.

Impact on Healthcare

The introduction of the U.S. NERF is anticipated to significantly increase the frequency of referrals for physical activity, exercise prescription, and therapeutic interventions. By enhancing providers' confidence in evidence-based programs and treatments into their care plans, the U.S. NERF facilitates the referral of patients to registered exercise professionals who are qualified for safe and effective implementation of these interventions. This shift will not only improve patient outcomes but will also foster new opportunities for collaboration between healthcare providers and registered exercise professionals, specifically vetted for their roles in the healthcare system.



		TYPE								
		LICENSED	REGISTERED	CERTIFIED						
HIGH LEVEL PATIENT/CLIENT SUPERVISION	SUPERVISION	JOB ROLE			ACADEMIC	PRACTICE / SETTING	PHYSICIAN SUPERVISED	PHYSICIAN CLEARED	PHYSICIAN REFERRED	NO CLEARANCE REQ.
		PHYSICAL THERAPIST	L		DOCTORATE	CLINICAL	Y	Y	Y	Y
		ATHLETIC TRAINER	L		MASTER'S	CLINICAL / SPORTS PERFORMANCE	Y	Y	Y	D
		CLINICAL EXERCISE PHYSIOLOGIST	L*	R	MASTER'S	CLINICAL	Y	Y	Y	Y
		REGISTERED KINESIOTHERAPIST		R	BACHELOR'S	CLINICAL	Y	Y	Y	
MEDIUM LEVEL OF CLIENT SUPERVISION		MEDICAL EXERCISE SPECIALIST		R	BACHELOR'S	CLINICAL	D	Y	Y	Y
		STRENGTH & CONDITIONING COACH		R	MASTER'S	SPORTS PERFORMANCE		Y	Y	D
		PERSONAL TRAINER		R	MASTER'S	HEALTH / FITNESS		Y	Y	Y
		EXERCISE PHYSIOLOGIST		R	BACHELOR'S	CLINICAL		Y	Y	Y
		STRENGTH & CONDITIONING COACH		R	BACHELOR'S	SPORTS PERFORMANCE		Y	Y	Y
		PILATES TEACHER		R	BACHELOR'S	HEALTH / FITNESS		Y	Y	Y
LOW LEVEL OF CLIENT SUPERVISION		PERSONAL TRAINER		R	BACHELOR'S	HEALTH / FITNESS		Y	Y	Y
		HEALTH COACH**				HEALTH	D	Y	Y	
		STRENGTH & CONDITIONING COACH		R		SPORTS PERFORMANCE		Y	Y	Y
		PILATES TEACHER		R		HEALTH / FITNESS		Y	Y	Y
		PERSONAL TRAINER		R		HEALTH / FITNESS		Y	Y	Y
		GROUP EXERCISE INSTRUCTOR		R		HEALTH / FITNESS		Y	Y	Y

* LICENSED ONLY IN LOUISIANA
** PHYSICAL ACTIVITY PROMOTION AND COACHING IS ONLY A SMALL PORTION OF THE HEALTH COACH SCOPE OF PRACTICE
D DEPENDS ON SETTING

MILESTONE 2

PROMOTING CREDENTIALING STANDARDS FOR EXERCISE PROFESSIONALS

Professionalization of Exercise

Third-party accredited certification is a critical component of the U.S. NERF, ensuring that exercise professionals meet recognized competency and practice standards for credentialing, which are on par with those of other health and medical professionals. These credentials indicate that the exercise professional can provide safe and effective exercise programs and therapeutic interventions for patients. However, a gap persists between the requirement of high-quality credentials and the current hiring practices of employers, as industry standards for employment within the fitness sector remain woefully inadequate. USREPS® plays a key role in this process by providing a registry of exercise professionals with recognized credentials, signifying the qualifications necessary for specific job roles.

By supporting recognized credentialing standards, the U.S. NERF helps elevate the professional status of qualified and registered exercise professionals, positioning them as integral contributors to patient care. Credible registration through USREPS® not only opens new job opportunities for exercise professionals but also helps professionalize the field. This advancement makes healthcare providers more likely to refer patients to exercise professionals who hold current certifications from third-party accredited programs, further integrating appropriate levels of physical activity into mainstream healthcare.

Why Credentialing Matters

As with the broader healthcare workforce, credible professional credentials are essential for establishing trust between healthcare providers and their referring professionals. When physicians refer patients to registered exercise professionals, they can be confident that their patients will receive high-quality care. This trust is critical for the success of the U.S. NERF and for advancing the integration of therapeutic physical activity and exercise programs into mainstream healthcare.

	ATHLETIC TRAINER	CLINICAL EXERCISE PHYSIOLOGIST	STRENGTH & CONDITIONING COACH	PERSONAL TRAINER	GROUP EXERCISE INSTRUCTOR
PROGRAMMATIC ACCREDITATION	Y	Y*	Y**	N	N
ACCREDITED NATIONAL BOARD CERTIFICATION	Y	Y	Y	Y	Y
STATE LICENSURE	Y	N	N	N	N
PROFESSIONAL REGISTRATION	Y	Y	Y	Y	Y
CEC'S, CME	Y	Y	Y	Y	Y

* 2027 - CAAHEP EXERCISE PHYSIOLOGY
** 2030 - CASCE

MILESTONE 3

EMPOWERING PHYSICIANS WITH A STRUCTURED REFERRAL SYSTEM

Physician Engagement

Physicians play a foundational role in the assessment, prescription, and referral of patients to evidence-based programs that are delivered by qualified registered exercise professionals. The U.S. NERF provides a structured referral framework designed to make it easier for physicians to integrate exercise into their treatment plans. This system includes clear guidance for patient referrals based on the patient's health status and the level of physician oversight necessary to ensure safety and positive health outcomes. To support this process, USREPS® provides a free, comprehensive, user-friendly verification system to identify registered exercise professionals aligned with the U.S. NERF framework.

This framework is structured around four tiers of physician oversight and corresponding levels of client supervision:

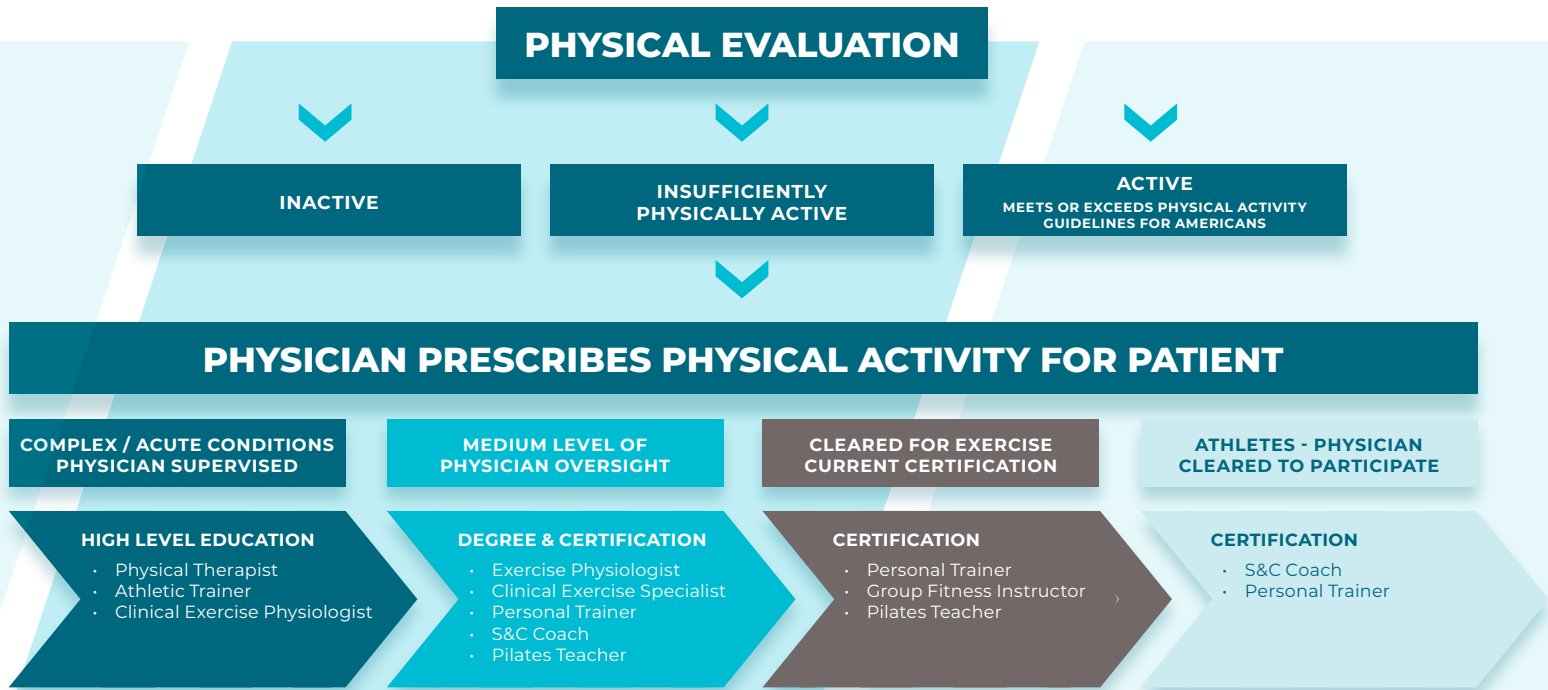
- **Physician supervised:** For patients in cardiac rehabilitation, pulmonary rehabilitation, cancer treatment or physical therapy requiring a **high level of physician oversight**. Care is typically provided by licensed or registered professionals such as nurses, physical therapists, or exercise physiologists in clinical settings.
- **Physician referred:** For individuals with chronic or acute health conditions and/or physical limitations requiring either **high or medium levels of physician oversight**. Services are typically delivered by professionals such as registered kinesiotherapists, medical exercise specialists, or exercise physiologists in clinical or health/fitness settings.
- **Physician cleared:** For athletes pursuing sports performance goals, where **the athlete has completed a sports physical and has been cleared to participate**. Conditioning programs are led by certified strength and conditioning coaches or personal trainers in sports performance or fitness settings.
- **Physician recommended:** For individuals seeking to improve physical activity and adopt healthy lifestyle behaviors typically require **low to no physician oversight**. Guidance is provided by certified professionals such as group exercise instructors or personal trainers in health/fitness environments.

This structured approach ensures that exercise interventions are tailored to the client's health status, professional credentialing, and specific practice settings, ultimately promoting safer and more effective outcomes.

Addressing Physician Concerns

Physicians may be concerned about referring patients to exercise professionals, particularly if they are unfamiliar with their education, credentials, or expertise. To address and support these concerns, the USREPS® verification system will assist in identifying and positively verifying the credentials of the most qualified exercise professionals eligible to receive referrals from healthcare providers.

MILESTONE 3 (CONT.)



MILESTONE 4

INTEGRATING USREPS® AND ADVOCATING FOR POLICY CHANGE

Policy Advocacy

Policy change is essential for the widespread adoption of the U.S. NERF. Decision-makers and payers play a crucial role in advocating for policies that support the integration of physical activity and exercise into healthcare as a standard of care. Such policies should provide coverage determinations and reimbursement for physical activity programs and incentivize healthcare providers to incorporate physical activity assessment, prescription, and referral into their patient treatment plans.

Economic Benefits

Integrating therapeutic exercise into healthcare has the potential to generate significant cost savings. Decision-makers are encouraged to view the U.S. NERF as a valuable tool that aligns with their goals of promoting healthy lifestyle behaviors. By advocating for policy changes and ensuring that exercise professionals are properly credentialed, they can leverage the U.S. NERF to support these objectives and contribute to the broader goal of transforming healthcare through physical activity and exercise integration.



MILESTONE 5

DEMONSTRATING SUCCESS THROUGH PILOT PROGRAMS

Pilot Program Design

Pilot programs are vital in implementing physical activity assessment, prescription, and referral as standard care within healthcare networks. These programs test the framework in real-world settings, gather patient outcome data, and identify opportunities for improvements in process and efficiency. The referral framework and provision of exercise programs and interventions must align with current reimbursement pathways, reflecting existing realities while envisioning future pathways that include a broader range of providers and settings where programs and services can be fulfilled. Acknowledging these challenges in this foundational document is essential, with plans for detailed follow-ups addressing reimbursement mechanisms, value-based care models, and healthcare financing gaps.

KPIs for these programs should include patient health outcomes, referrals to exercise professionals, adherence to exercise regimens, patient satisfaction, healthcare cost impact, and the incidences of integration of exercise professionals into care teams.

Scaling Up

After the results of the pilot programs have been evaluated, the lessons learned will be applied. The next steps will be to scale them to larger networks, requiring additional funding, training, and support. The reimbursement discussion should consider integrating exercise professionals into care teams to ensure that each professional can work at the highest and best use of their credentials while balancing current pathway constraints with long-term coverage advocacy. Physician oversight is crucial for reimbursement, and program-level reimbursement structures should be emphasized. Expanding pilot programs will require strategic funding and stakeholder engagement, focusing on value-based care models.

Collaboration and Stakeholder Engagement

Collaboration between organizations like the Physical Activity Alliance (PAA) and USREPS® is essential to realize the opportunity to integrate exercise professionals into healthcare systems. Electronic medical records can streamline the referral process, improve communication between clinicians and exercise professionals, and provide the data capture necessary to assess impact continually. A coordinated advocacy strategy is critical, with initiatives like the North Carolina Collaborative providing practical insights into the integration process.

The North Carolina Collaborative aims to connect clinicians, healthcare systems, and exercise professionals in a coordinated effort to enhance patient care through structured physical activity programs and interventions. The collaborative focuses on developing standardized referral processes, training programs for exercise professionals, and creating a sustainable model for integrating these roles into healthcare teams. Preliminary results have shown improved patient engagement in physical activity, better health outcomes, and enhanced communication between healthcare providers and exercise professionals. This initiative demonstrates the practical application of the referral framework and offers valuable lessons for scalability and adaptability in other regions.

Community-Based Programs and Step-Down Options

Community-based programs are key for transitioning individuals from structured treatment and rehabilitation programs. Securing reimbursement for these programs is challenging, particularly for those at moderate risk post-intervention. Expanding HSA and FSA coverage for these programs is a potential avenue, though not equivalent to formal reimbursement. Advocacy efforts should focus on demonstrating the cost-effectiveness and health benefits of reasonably designed and evidence-based programs to encourage broader insurance coverage, with programs like the Diabetes Prevention Program as a best practice model to serve as a roadmap for future programs and interventions.



MILESTONE 6

CONTINUOUS TRAINING AND SUPPORT FOR PROFESSIONALS

Ongoing Education

Continuous training is vital to ensure that both exercise professionals and medical providers stay up to date with the best practices. The U.S. NERF offers a structured framework for identifying the most appropriately qualified exercise professional based on the level of supervision required for each patient or client. Additionally, it provides an opportunity to educate medical and exercise professionals on the U.S. NERF framework and its application in the referral process. These educational initiatives help keep professionals informed about new developments and offer practical guidance on integrating physical activity assessment, prescription, and referral into their practice, making it a standard of care.



Professional Development

In addition to improving patient care, continuous training supports the professional development of exercise professionals. Staying current with the latest research and techniques enables exercise professionals to expand their skill sets and advance their careers.

Earning a certification is just the beginning of a long-term career journey. To maintain their certification, exercise professionals are required to engage in continuing education (CE), ensuring they stay aligned with evolving standards and meet the changing needs of their clients. CE programs are tailored in scope and depth to match specific professional roles and take various forms—workshops, online courses, peer-reviewed journals, etc. This flexibility accommodates different learning styles and schedules, while ongoing education ensures that professionals demonstrate continued competence, meet client expectations, and stay effective in a dynamically changing healthcare environment.

Beyond simply maintaining certification, professionals are encouraged to further invest in their career development by pursuing specialized training or additional credentials. By planning their career paths, setting clear goals, and committing to continuous learning, they can achieve greater professional growth and fulfillment and contribute more effectively to healthcare outcomes.

MILESTONE 7

TRANSFORMING PATIENT CARE AND DRIVING HEALTHCARE INNOVATION

Shaping the Future of Healthcare with the U.S. NERF

The U.S. NERF provides a forward-thinking solution to the challenge of integrating physical activity into healthcare. The U.S. NERF addresses critical gaps in the current healthcare system by embedding physical activity plans into patient care, establishing high credentialing standards, expanding the qualified workforce and advocating for supportive policy changes. Through strategic milestones, it is building a unified framework that benefits patients, healthcare providers, and exercise professionals alike.

As the U.S. NERF evolves, it has the potential to unlock the full benefits of exercise prescription, significantly enhancing overall health and well-being across the country and reaching a broader population. Embracing U.S. NERF offers a practical pathway to improving health outcomes, reducing costs, expanding access, and fostering a more sustainable healthcare system. The journey toward a healthier future is illuminated by the U.S. NERF's commitment to innovation and patient-centric excellence. The time to act is now – together, we can make exercise a fundamental part of healthcare.





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