



Annual Report 2021

Committee on Certification and Registry Boards (CCRB)



**AMERICAN COLLEGE
of SPORTS MEDICINE**
LEADING THE WAY



acsm
CERTIFICATION



Annual Report 2021

Committee on
Certification and
Registry Boards
(CCRB)

CCRB Executive Council



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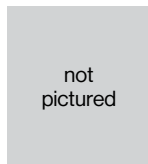
CPT

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Plus One Health Management Inc.
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Continuing Professional Education (CPE) Subcommittee

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CCRB Chair Report



Christie Ward-Ritacco, Ph.D., FACSM,
ACSM-EP



The year 2021 was one of reflection and response for the ACSM Committee on Certification and Registry Boards (CCRB). Over the course of the year, the CCRB used data provided by ACSM certified professionals and aspiring certified professionals to get a full sense of what certified professionals need to flourish in their careers and how new professionals need to feel confident when sitting for certification exams. The information collected over the past year allowed the CCRB to strategically respond with data-driven, short- and long-term goals. It's clear that ACSM professionals and ACSM as an organization are recognized as leaders in understanding and generating exceptional research and science-based practices, respectively. It's now our goal as a certification board to ensure that ACSM certified professionals have the resources they need to take evidence-based practices and apply them in the field.

2021 Goals

1. Enhance exam candidates' user experience.
2. Provide comprehensive preparation resources for exam candidates.
3. Spearhead employer engagement opportunities.

ACSM staff and volunteer leaders worked tirelessly to make the process of becoming an ACSM certified professional more transparent for aspiring candidates by enhancing navigation within the ACSM website, updating the ACSM Candidate Handbook for ease of use, preparing practice exams to help candidates gauge their readiness and increasing outreach with employers to ensure they are aware of the high standard and quality that ACSM certified professionals bring to the workplace.

As the CCRB looks beyond 2021 to the future of ACSM certification, it's more important than ever that ACSM provides certified professionals a home that supports them over the course of their career and provides them with resources and opportunities for professional growth and development. The certification board is taking steps to ensure that ACSM is the organization that certified professionals can count on for career exploration and opportunities for continuing education, skill development and refinement and career growth. The CCRB aims to create certification resources and education programs that support our certified professionals at every stage of their career.

2021 Highlights

- The first ACSM Certified Professional of the Year was recognized at this year's ACSM International Health and Fitness Summit.
- The board welcomed many new subject matter experts (SMEs) to the talented and dedicated CCRB subcommittees, and the board welcomed the revival of the Continuing Professional Education (CPE) Subcommittee.
- Members of the CCRB worked, and continue to work, with ACSM leadership on a task force pursuing recognition and reimbursement for exercise professionals as qualified health care providers (QHPs), an important step in moving the profession forward.
- Beginning in 2027, to be eligible to take the ACSM EP and CEP exams, candidates must graduate from an academic program that is programmatically accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP). To support this change, the CCRB worked with representatives from the Committee on Accreditation for the Exercise Sciences (CoAES) to ensure that academic programs and their representatives have the information and resources they need to prepare for programmatic accreditation.

ACSM certification could not flourish without the dedicated staff and incredible slate of volunteers who are involved each year. It is a professional honor to collaborate with the members of this group to continue to improve and grow ACSM certification efforts and help ACSM certified professionals represent the gold standard of professional excellence in the industry. Thank you for all that you do on behalf of ACSM certification.

In health,

Christie Ward-Ritacco, Ph.D., ACSM-EP, FACSM
Chair, Committee on Certification and Registry Boards

National Director Report



Francis Neric, M.S., MBA
National Certification Director



To support the CCRB's vision to position ACSM as an invaluable resource for certified professionals across their entire career, ACSM staff have implemented processes to increase the frequency of gathering candidate, certificant and market sentiment. This gives ACSM stakeholders the opportunity to provide guidance to the CCRB about their unique needs, wants and concerns.

The 2021 ACSM certification stakeholder analyses yielded the following insights, stakeholders want: (1) a simpler-to-navigate ACSM website, (2) expanded and enhanced ACSM exam-preparation resources, (3) educational resources that improve an exercise professional's ability to practice and (4) expanded employer and faculty engagement. Key activities planned for 2022 that began in 2021 include, but are not limited to, the following:

- Fund and develop an ACSM Career and Salary Guide
- Fund and develop practice exams for the ACSM-CPT, ACSM-EP and ACSM-CEP programs, respectively, that simulate the real exams
- Apply educational best practices to ACSM preparatory resources
- Transition specialty certifications into robust, educational certificate programs
- Streamline website navigation to reduce the number of clicks to important information (specifically, the number of unique certification pages was reduced from 200+ to 30)
- Expand learning and engagement opportunities with strategic partners

As part of the CCRB's commitment to continuing process improvement, CCRB credentialing subcommittees now balance subject matter experts by area of practice and content domain (see below). It should be noted that motor behavior and behavior-change subject matter experts have been added across all certification programs. The revised structure allows the CCRB credentialing committees to intentionally shift from theory into real-world application of science.

ACSM-GEI Credentialing Committee Structure

1. Academician — fitness generalist
2. Academician — motor behavior
3. Group fitness director/manager
4. Practitioner — inclusive exercise
5. Practitioner — small fitness studio, boutique
6. Practitioner — large fitness center and/or corporate fitness center
7. Practitioner — large fitness center and/or college recreation center
8. Practitioner — community fitness center

ACSM-CPT Credentialing Committee Structure

1. Academician — exercise science generalist
2. Academician — fitness generalist
3. Academician — motor behavior
4. Academician — behavior change, exercise psychology
5. Fitness director/manager or fitness entrepreneur
6. Practitioner — inclusive exercise
7. Practitioner — small fitness studio, boutique
8. Practitioner — large fitness center
9. Practitioner — large fitness center and/or college recreation center

ACSM-EP Credentialing Committee Members

1. Academician — exercise science generalist
2. Academician — fitness generalist
3. Academician — motor behavior
4. Academician — behavior change, exercise psychology
5. Fitness director/manager
6. Practitioner — medical fitness specialist or corporate wellness
7. Practitioner — small fitness studio, boutique
8. Practitioner — large fitness center
9. Practitioner — large fitness center and/or college recreation center

ACSM-CEP Credentialing Committee Members

1. Academician — clinical exercise testing and prescription
2. Academician — clinical exercise physiology/pathophysiology
3. Academician — motor behavior
4. Academician — behavior change, exercise psychology
5. Clinical exercise director/manager
6. Practitioner — cardiac rehab exercise specialist
7. Practitioner — obesity/metabolic exercise specialist
8. Practitioner (x2) — orthopedic/musculoskeletal, neuromuscular, neoplastic, pulmonary, cancer or frailty exercise specialist exercise specialist

Operations Report

ACSM Certification, as led by the CCRB and ACSM certification staff, announced several operational changes and updates in 2021.

NCCA Reaccreditation

• Accreditation is a process in which a third party independently verifies that, among others, a program or organization can uphold its obligations to adequately support its stakeholders and/or keep the public safe. In general, there are two main accreditation types that are germane to the exercise and fitness industry: (1) programmatic accreditation and (2) personnel accreditation. Each accreditation type uniquely contributes to the development, assessment and growth of exercise professionals. ACSM believes that formalized exercise science education and continuing professional development are cornerstones of competent exercise professionals.

Personnel accreditation provides impartial, third-party validation that a certification program has met recognized international credentialing standards for development, implementation and maintenance of certification programs. Professional competency is validated through written and/or performance assessments, and it is independent of formalized education or training. National Commission for Certifying Agencies (NCCA) is an independent nongovernmental agency that accredits certification programs in a variety of professions to ensure the health, welfare and safety of the public. The NCCA reviews the certification organization's procedures, protocols and operations and determines if the certification properly discriminates between those who are qualified and those who are not qualified to be awarded the respective credential. The ACSM Certified Personal Trainer® (ACSM-CPT), ACSM Certified Exercise Pathologist® (ACSM-EP) and ACSM Clinical Exercise Physiologist® (ACSM-CEP) certification programs earned initial accreditation by the NCCA between 2006 and 2007. ACSM is currently in the process of earning NCCA accreditation for the Certified Group Exercise Instructor® (ACSM-GEI) program.

In 2021, ACSM achieved reaccreditation for the ACSM-CEP, ACSM-EP, ACSM-CEP and ACSM-CPT programs. Accreditation lasts five years.

Retest Policy

• The CCRB has updated the retest policy, and the new policy will go into effect July 1, 2022. Candidates must wait at least 15 days to retake an exam from the most recent date the exam was taken. Retest candidates will receive a retest voucher code on the score report from Pearson VUE. Candidates may retake the exam at a discounted rate of \$175. Candidates may take the exam up to four times in a 12-month period. If a passing score is not achieved in four exam attempts in 12 months, the candidate must wait 12 months after the fourth attempt to retake the exam. Candidates do not need to resubmit eligibility documentation unless their CPR/AED certification has lapsed. All candidates begin with zero attempts.

Recertification Fees

• Recertifying your ACSM certification signifies that you are staying current with industry standards and practice, allowing you to continue practicing in the profession. The CCRB is responsible for oversight of ACSM's certification programs. ACSM's growing continuing education and career-development resources, as well

as general costs of business, necessitate periodic fee changes. The CCRB operating codes stipulate that all certification fees be reviewed annually. CCRB last changed recertification fees in 2015. Certificants who have a recertification deadline of Dec. 31, 2021, and fail to complete the process on time are subject to the increased recertification fee and late or reinstatement fees.

- Fees increased as of Jan. 1, 2022.

Certification Level	CECs Required	On-Time Recertification Fee (Before Dec. 31, 2021)	On-Time Recertification Fee (Starting Jan. 1, 2022)
ACSM Certified Group Exercise Instructor	45	\$45	\$55
ACSM Certified Personal Trainer	45	\$45	\$55
ACSM Certified Exercise Physiologist	60	\$65	\$65
ACSM Certified Clinical Exercise Physiologist	60	\$65	\$65
ACSM/NCS-PAD Certified Inclusive Fitness Trainer*	15	\$35	\$45
ACSM/ACS Certified Cancer Exercise Trainer*	15	\$35	\$45
ACSM/NPAS Physical Activity in Public Health Specialist	45	\$35	\$45

*Must maintain NCCA accredited certification for renewal

Exam Content Outlines and GETP Changes

- The updated exam content outlines have been published and will go into effect on July 1, 2022.
- ACSM's *Guidelines for Exercise Testing and Prescription* (GETP) 11th edition was published in 2021. The ACSM certification exams will reflect changes in GETP beginning July 1, 2022. The significant revisions and additions from the 10th to 11th editions are outlined in the newly revised candidate handbook.

Handbook/Guidebook

- During a recent survey, ACSM learned that certification candidates and certified professionals both wanted comprehensive, go-to guides for getting and staying certified. ACSM created a one-stop-shop resource for all things ACSM — from the beginning of the certification journey all the way through recertification.
 - *Candidate Guidebook*: everything a candidate needs to know about certification — exam eligibility, applications, test prep and more!
 - *Certification Handbook*: everything a certified professional needs to continue their career with ACSM — recertification requirements, CEC options and more!

Exam cancellation and rescheduling fees

- Due in large part to the wide availability of online proctored exams (OnVUE), ACSM reinstated certification-exam cancellation and rescheduling fees starting Jan. 1, 2021. If an exam is canceled or rescheduled by Pearson VUE, these fees will be waived.

Unaudited 2021 Financial Report

Unaudited 2021 financial report for the American College of Sports Medicine presents a gross revenue of \$11,290,466, gross expenses of (\$10,918,586), and net surplus of \$371,881. Of which, the CCRB reports a gross revenue of \$2,792,246 and gross of expenses of (\$1,77,517). The ACSM Board of Trustees implemented a risk management strategy in the event income streams were impacted by COVID-19.

American College of Sports Medicine, Inc. Statement of Revenues and Expenses For the Year Ended December 31, 2021

Income	Certification Exams and Exam Preparation	\$2,792,246
Expenses	Exam Administration and Development	\$(1,177,517)

Exam Statistics

Annually, the CCRB publicizes pass rates for the core ACSM certification programs. ACSM launched new exam forms on Jan. 1, 2021, for the ACSM Certified Personal Trainer® (ACSM-CPT), Certified Group Exercise Instructor® (ACSM-GEI), ACSM Certified Exercise Physiologist® (ACSM-EP) and Certified Clinical Exercise Physiologist® (ACSM-CEP). The 2021 **first-time pass rates** for ACSM certification exams are as follows: ACSM-CPT, 58%; ACSM-GEI, 74%; ACSM-EP, 70% and ACSM-CEP, 61%. The 2021 **repeat test taker pass rates** for ACSM certification exams are as follows: ACSM-CPT, 42%; ACSM-GEI, 67%; ACSM-EP, 48% and ACSM-CEP, 45%. Many factors contribute to the low pass rate for repeat test takers; candidates must prepare properly and aim to pass on their first attempt for the best chance at passing the exams.



2021

Exam Title	First-Time Test Takers			Repeat Test Takers		
	Total Graded	Total Passed	Pass Rate	Total Graded	Total Passed	Pass Rate
ACSM Certified Personal Trainer	1,630	939	58%	574	242	42%
ACSM Certified Group Exercise Instructor	91	67	74%	6	4	67%
ACSM Certified Exercise Physiologist	2,026	1,410	70%	254	122	48%
ACSM Certified Clinical Exercise Physiologist	284	174	61%	127	57	45%

2020

ACSM Certified Personal Trainer	1,448	1,006	69%	444	218	49%
ACSM Certified Group Exercise Instructor	64	48	75%	12	7	58%
ACSM Certified Exercise Physiologist	1,527	1,190	78%	159	96	60%
ACSM Certified Clinical Exercise Physiologist	304	211	69%	87	42	48%

2019

ACSM Certified Personal Trainer	2,520	1,613	64%	762	401	53%
ACSM Certified Group Exercise Instructor	120	84	70%	16	12	75%
ACSM Certified Exercise Physiologist	2,372	1,697	72%	315	157	50%
ACSM Certified Clinical Exercise Physiologist	290	190	66%	79	39	49%

Total number of active ACSM certificants*

ACSM-CPT	12,224
ACSM-GEI	701
ACSM-EP	11,324
ACSM-CEP	3,925

*As of February 2022

Continuing Education Services Survey

Task force Members

Francis Neric, National Certification Director

Katherine Hughey, Certification Project Manager

Vanessa Kercher, Taskforce Co-Chair, CCRB Member-At-Large

Paul Gallo, Taskforce Co-Chair, CCRB CPE Subcommittee Chair

Zheng Zhou, Data Analyst/Doctoral Student, Indiana University

The CCRB appointed a task force to learn more about the certified stakeholders ACSM serves. This task force created a first-time survey, ACSM Continuing Education Services Survey, to explore certification and membership status as it relates to recertification and continuing education.

The survey aimed to provide a comprehensive view of the profile of ACSM's certified target audience by describing the key demographic, socioeconomic variables, certification status and satisfaction for the continuing education offerings.

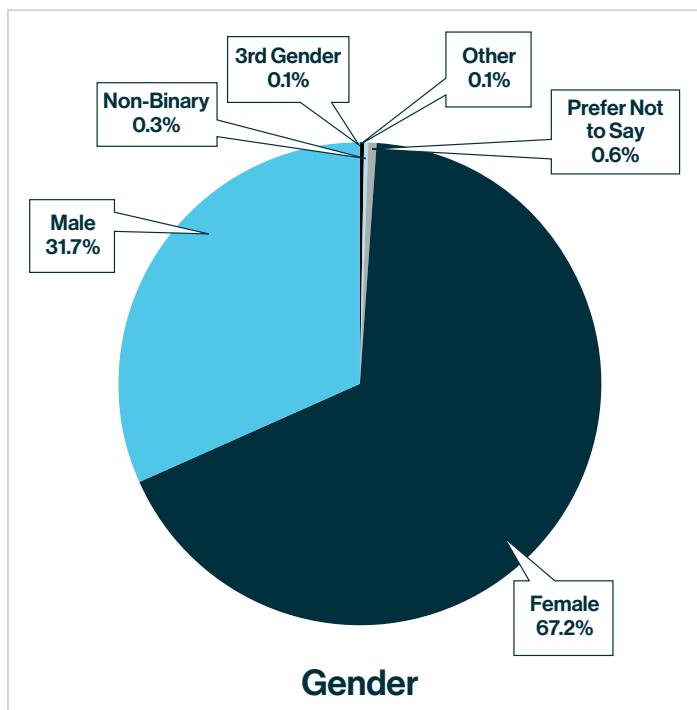
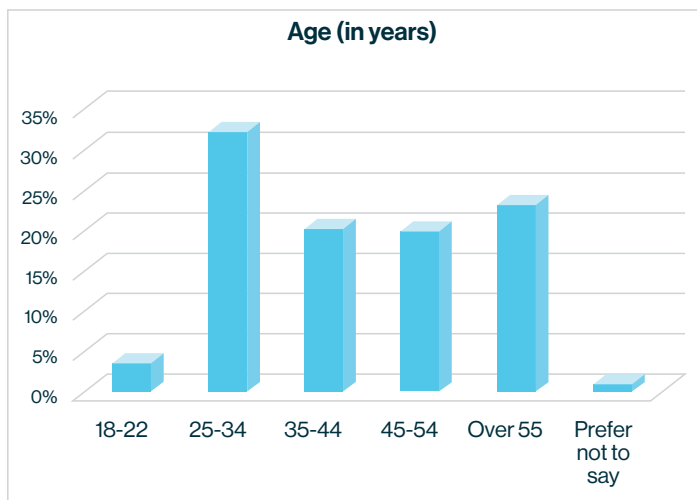
Key Findings

- Participants were primarily from the United States, with California representing the largest number of responses.
- Most participants held bachelor's degrees and were full-time employees with an income over the U.S. median.
- The majority hold at least one ACSM certification and would recommend others to earn an ACSM certification.
- Although new certifications have been decreasing since 2017, the recertification rate is steadily increasing.
- Most participants were aware of ACSM's continuing education offerings. However, a large proportion of the participants were not satisfied with the offerings and access process, suggesting the current courses are not varied and are overpriced.
- The most important considerations for future education are cost and content area.
- The top continuing education content needs were clinical specialty and movement analysis.
- The most important considerations for recertification were access to resources on exercise programming and exercise testing.

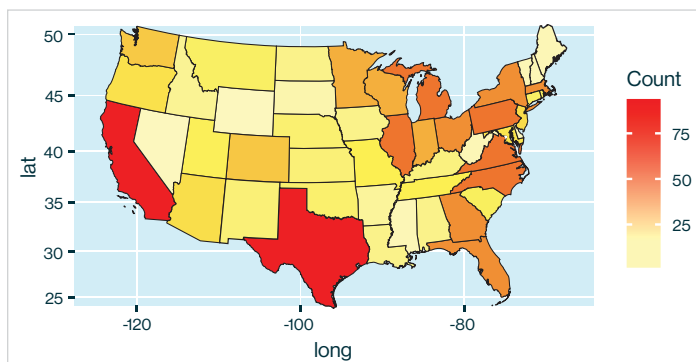


Demographics

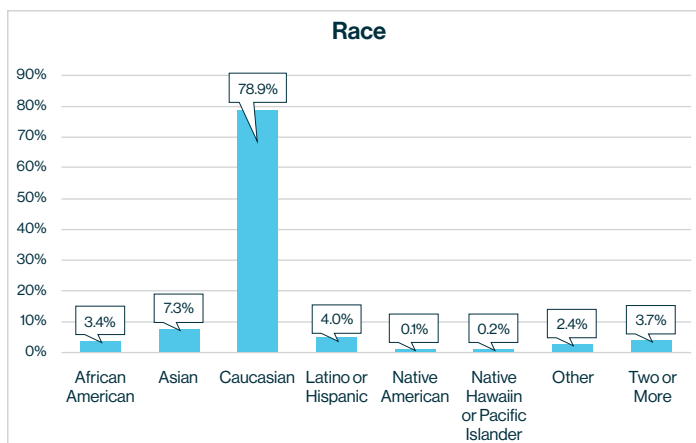
Participants between the ages of 25 and 34 were most represented (n = 489, 32.1%), whereas those between the ages of 18 and 22 were least represented (n = 54, 3.6%). A total of 67.2% of the participants were female, and less than 31.7% were male, with a smaller proportion of other reported genders.



A majority (87%) of the participants reside in the United States, with the largest number represented in the state of California (n = 94, 6.8%) and Texas (n = 80, 5.8%). The state with the lowest number of participants was West Virginia (n = 1). For the participants from the United States, their states' distribution is visualized in the heatmap:



A majority (78.9%) of participants were Caucasian. Among the minority members, Asian (3.4%) was the largest group.

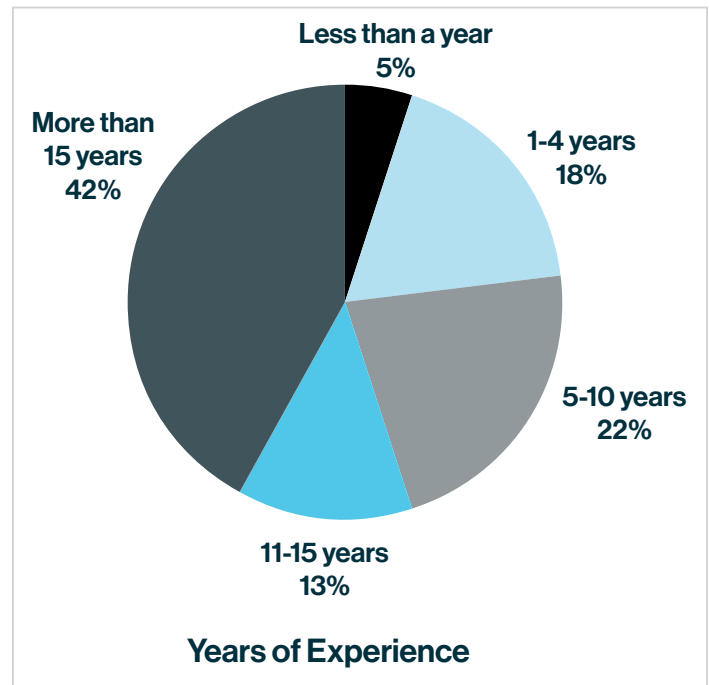


Education, Employment Status and Employment Setting

Participants with master's degrees (40%) and undergraduate or professional degrees (41%) accounted for the majority. Full-time employment accounted for about half (51.7%), with at least 40% of the participants having more than 15 years of experience. The greatest proportion was employed at a health care facility (28%), followed by health club/fitness facilities (15%) and then by those employed as a professor or otherwise working in higher education (11%). The lowest was from those working at community-based facilities (3%).

	High school	Undergraduate or professional degree	Master's	Doctoral	Others
	454	41	598	383	21
Employment Status					N
Full-time employment					818
Part-time employment					262
Retired					39
Self-employed					233
Student					71
Underemployed (wage below industry average)					22
Unemployed (looking for work)					50
Missing					87
Employment Setting					N
Business owner					91
Community-based facility					42
Corporate fitness					57
Government/military					44
Health club/fitness facility					218
Health care facility					415
Independent contractor					123
University/college fitness facility					55
Professor/higher education					170
Other					135
Not currently in fitness industry					132
No response					100

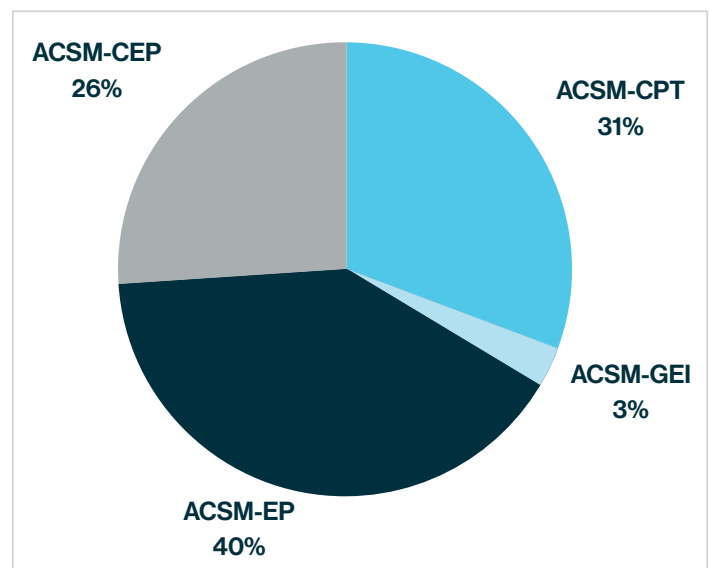
Years of Experience



Certification Status

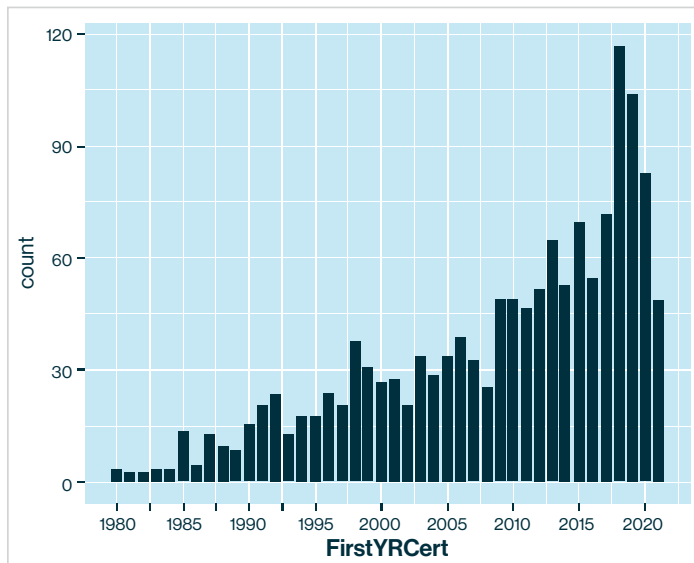
A majority (78%) of the participants held at least one ACSM certification, with few (9%) holding more than one ACSM certification. Overall, the ACSM-EP certification was identified as the most popular (38%).

ACSM-CPT	ACSM-GEI	ACSM-EP	ACSM-CEP
454	41	598	383

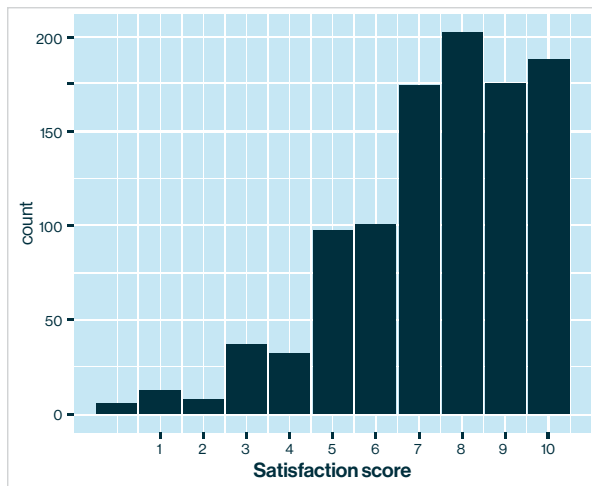


Recertification

Certifications experienced a spike in 2018 and 2019 and have steadily decreased since 2020. A total of 1,048 participants reported recertification in the last three years. The number of recertifications did not decrease in the last three years. Thus, participants were actively maintaining their certification status.



Participants were mostly satisfied with the process and expressed that ways to improve it would include **reducing the required time and lowering the cost**. Participants also expressed that the process could be made clearer.



Most participants were not interested in earning any of the additional listed certificates in the future (n = 493), whereas a fifth of the participants (n = 295) indicated a desire to to earn the ACSM-CEP certification in the future.

Certificate	N
ACSM-CEP	295
ACSM-CPT	98
ACSM-EP	178
ACSM-GEI	106
ACSM Speciality Certification	211
Not Interested	493

Content Areas

The most identified needed content area was **clinical specialty** (e.g., neuromuscular, bariatric, ESRD). The second-most frequently mentioned was **movement analysis**, followed by **fitness business** (e.g., management, marketing, finance, accounting). Participants indicated that the most important priority when considering continuing education is **content area and cost**.

Content Area	N
Blank	374
Content area	468
Cost	484
Location	35
Networking opportunities	29
On-demand access	130
Speakers	38
Other	24

Lastly, participants indicated that the top three benefits in their decisions for becoming an ACSM member were continuing education discounts, conference discounts and ACSM journal access. Access to journals stood out as an outstanding benefit enjoyed by the majority of ACSM members.

Continuing Professional Education (CPE) Subcommittee



CHAIR
Certified Professional Member
Paul M. Gallo, Ed.D., FACSM,
ACSM-CEP, ACSM-EP,
ACSM-GEI, EIM-III
Norwalk Community College
Norwalk, CT



Employer Representative
Rachelle Reed, Ph.D.,
ACSM-EP
Orangetheory Fitness
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Certified Professional Member
Jason "Jay" Melnyk, Ph.D.,
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New Britain, CT



Certified Professional Member
James Whitworth, Ph.D.,
ACSM-EP
Boston University,
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Certified Professional Member
Meir Magal, Ph.D., FACSM,
ACSM-CEP, CSCS
North Carolina Wesleyan
College
Rocky Mount, NC



The CCRB Continuing Professional Education (CPE) Subcommittee is charged with the oversight of continuing competence and recertification requirements of ACSM certified professionals, and to ensure alignment to the continuing education standards and guidelines set forth by the National Commission for Certifying Agencies (NCCA). The CPE subcommittee plays a critical role in revisions and development of policies that guide the recertification process for ACSM certified professionals and the application process for the submission of course offerings by ACSM-approved providers.

The primary objectives of the CPE include:

- Developing the mission and vision of continuing competence and professional development of ACSM certified professionals.
- Defining continuing competence that must be demonstrated by all ACSM certified professionals.
- Developing a rationale for recertification reporting windows and required continuing education credit (CEC) limits for each certification program. Rationale of each renewal period and the number of required CECs will be provided to all certified professionals with clear descriptions and examples of acceptable CEC categories.
- Ensuring all CEC opportunities are accessible, timely, relevant and meet the professional competencies of each ACSM certification program. The committee shall ensure that all CEC opportunities are reflective of new or changing standards of the industry and profession.
- Developing and maintaining valid procedures to verify and ensure certificants meet recertification requirements.
- Ensuring recertification policies and procedures are publicly available and easily accessible.
- Reviewing and providing recommended actions to the CCRB for all contentions or violations of recertification procedures submitted by certified professionals.

Over the course of the past six months, the CPE created an operational code that was approved by the CCRB. The CPE discussed long-range goals for creating a continuing education policy for ACSM and for revising the recertification policy for all ACSM certified professionals. Moving into 2022, the primary focus of the committee will be to clearly define what continuing education is and how certified professionals are held accountable for their continuing education.

A secondary goal of the CPE is to review the current application process for approved providers who are offering continuing education programming. The CPE will provide revisions to streamline the application process, ensure continuing education course work aligns with the domains of each certification program and the growing needs of the profession and that continuing education remains accessible and affordable for all professionals.

Exam Subcommittees

The year 2021 was one of change, adjustment and enhancement for the ACSM exam subcommittees. Each of the exam subcommittees expanded; each addition bringing to it a breadth of knowledge and experience in the health and fitness field. As the committees continued to adjust due to the pandemic, members took these adjustments in stride by meeting virtually to fulfill deadlines and overdelivered on their service to the committee tasks and goals.

Each exam subcommittee had three goals for 2021:

1. Content outline updates
2. Item bank review
3. Item writing and form creation

Content Outline Updates

The committees reviewed the then-current exam content outlines. The committee examined each of the performance domains and the associated job tasks to confirm the content represented the most recent updates to professional standards and current practices in the field of health, fitness and wellness. Utilizing the 11th edition of the *Guidelines for Exercise Testing and Prescription* (GETP 11) and vast experience in the field, the committees updated the list of statements that describe what a minimally qualified candidate should know and be able to perform as part of the job. With an ever-evolving field, this was an important step to ensure ACSM is asking the appropriate questions to certify the minimally qualified candidate.

Item Bank Review

Following the update of the exam content outline, the committees reviewed the existing exam items within each content domain. Each committee member underwent a series of item-review assignments to determine any items that were no longer relevant to the field, in need of updates to reflect the most current standards and/or include the most appropriate language. This review process passes through a minimum of two committee members before resubmitting to be included in a future exam form. The major goal of this task was ensuring each item measured what was described based on the assigned section of the content outline.

Item Writing and Form Creation

A goal for each committee is to have an abundance of items that can be used in current, future and practice forms of the certification exam. The committee must develop strong items that measure the knowledge and skill of the minimally qualified candidate by creating quality forms for examination as well as provide practice items to better equip candidates to pass the examination. Until recently, the number of items in the item bank did not allow for multiple forms to be used simultaneously, nor provide practice questions for exam preparation purposes. The goal is to develop at least 300 items in each certification to be used in multiple forms.



Certified Personal Trainer (CPT) Subcommittee



CHAIR

Fitness director/manager or fitness entrepreneur

Tommy Thompson, ACSM-CPT, ACSM-GEI
Plus One Health Management Inc.
Springfield, OR



Academician — fitness generalist

Juan Aponte, M.S., ACSM-CPT
Salt Lake Community College
Sandy, UT



Practitioner — small fitness studio, boutique

Katie Hake, ACSM-CPT, R.D.
Orangetheory Fitness; Riley Hospital for Children
Indianapolis, IN



Academician — exercise science generalist

Jessica Sansone, Ph.D., ACSM-CEP
Shenandoah University
Winchester, VA



Academician — motor behavior

Peter Ronai, M.S., ACSM-EP, ACSM-CEP, CSCS
Sacred Heart University
Milford, CT



Academician — behavior change; exercise psychology

Mark Baldis, Ph.D., ACSM-CEP
California State University at Fresno
Fresno, CA



Practitioner — inclusive exercise

Michelle Alencar, Ph.D., ACSM-CPT, ACSM-EP
California State University, Long Beach
Orange, CA



Practitioner — large fitness center

Candace Campbell, M.S., ACSM-CPT
24 Hour Fitness, CSU Long Beach
Long Beach, CA



Practitioner — large fitness center (college rec. center)

Arthur Hockwald, M.S., ACSM-CPT
Tim Soder Physical Therapy
Las Vegas, NV



Group Exercise Instructor (GEI) Subcommittee



CHAIR

Group fitness director/manager

Lauren Korzan, M.A., ACSM-GEI, ACSM-EP
Aquila
Avondale Estates, GA



Practitioner — large fitness center (college rec. center)

Aleen Dailey M.S., ACSM-CEP, ACSM-GEI
Carolina Village
Hendersonville, NC



Academician — fitness generalist

Brandi Angelosanto, M.S., ACSM-GEI
Artistic Grace; GVSU
Grand Rapids, MI



Practitioner — community fitness center

Jennifer Rewkowski, ACSM-GEI
YMCA Metro Atlanta
Atlanta, GA



Academician — motor behavior

Ashley Artese, Ph.D., ACSM-EP, ACE-CPT, ACE-GFI
Aquila
Avondale Estates, GA



Practitioner — inclusive fitness

Nicole Mendola, M.S., ACSM-CEP, ACSM-EP, ACSM-GEI
Norwalk Community College
Norwalk, CT



Practitioner — small fitness studio, boutique

Summer Sides, M.S., ACSM-EP, ACE-GFI
GXUnited
Denver, CO



Practitioner — large fitness center/corporate fitness

Dana Von Badinski, M.S., ACSM-EP, ACSM/NCHPAD CIFT
YMCA, Life Time Athletic
Charlotte, NC



Exercise Physiologist Subcommittee



CHAIR

Practitioner — small fitness studio, boutique

Anthony “Tony” Maloney, ACSM-EP
Orangetheory Fitness
Indianapolis, IN



Academician — exercise science generalist

Stephanie (Hosaka) Cooper Ph.D., ACSM-EP
University of San Francisco, Equinox
Woodland Hills, CA



Practitioner — medical fitness specialist or corporate wellness

Caitlin Freeman, MPH, ACSM-EP
Aquila
Atlanta, GA



Academician — fitness generalist

Jessica Tucker, M.S., ACSM-EP
Wake Technical Community College
Wake Forest, NC



Academician — motor behavior

Christopher Taber, Ph.D., ACSM-EP
Sacred Heart University
Fairfield, CT



Academician — behavior change; exercise psychology

Julia Buchanan, Ph.D., ACSM-EP, NBC-HWC
University of Cincinnati
Cincinnati, OH



Fitness director/manager

Aaron Aslakson, M.A., ACSM-EP, CSCS
Walker Methodist Fitness Centers
Savage, MN



Practitioner — large fitness center (“box”)

Michelle Adams, M.S., ACSM-EP
Orangetheory Fitness, IU Health
Indianapolis, IN



Practitioner — large fitness center (college rec. center)

Susie Reiner, M.S., ACSM-EP
Club Fit Briarcliff
Briarcliff Manor, NY

Clinical Exercise Physiologist (CEP) Subcommittee



CHAIR

Michael J. Lynch, M.S., ACSM-CEP, R.D.
UW Medicine Valley Medical Center
Edmonds, WA



Practitioner — obesity/metabolic/endocrine exercise specialist

Kelly Ann Drew, M.S., ACSM-CEP
Orangetheory Fitness; Two Chicks Obsessed with Running
Indianapolis, IN



Practitioner — cardiac, pulmonary, rehab exercise specialist

T. David Cannon, M.A., ACSM-CEP
iRhythm Technologies
Chicago, IL



Academician — motor behavior, orthopedic/musculoskeletal, neuro, biomechanics

Brittany Overstreet, Ph.D., ACSM-CEP
University of Delaware
Newark, DE



Academician — clinical exercise physiology/pathophysiology

Jeffrey Christle, Ph.D., ACSM-CEP
Stanford University
Stanford, CA



Academician — clinical exercise testing and prescription

Timothy Allerton, Ph.D., ACSM-CEP, LCEP
Pennington Biomedical Research Center
Baton Rouge, LA



Practitioner — ortho/musculo, neuro, hematologic, sarcopenia or frailty exercise specialist

Anne Brady, Ph.D., ACSM-CEP
UNC Greensboro
Greensboro, NC



Practitioner — neoplastic, cancer, immunologic, sarcopenia or frailty exercise specialist

Joel Hardwick, M.S., ACSM-CEP
Piedmont Atlanta Fitness Center
Atlanta, GA

International Subcommittee



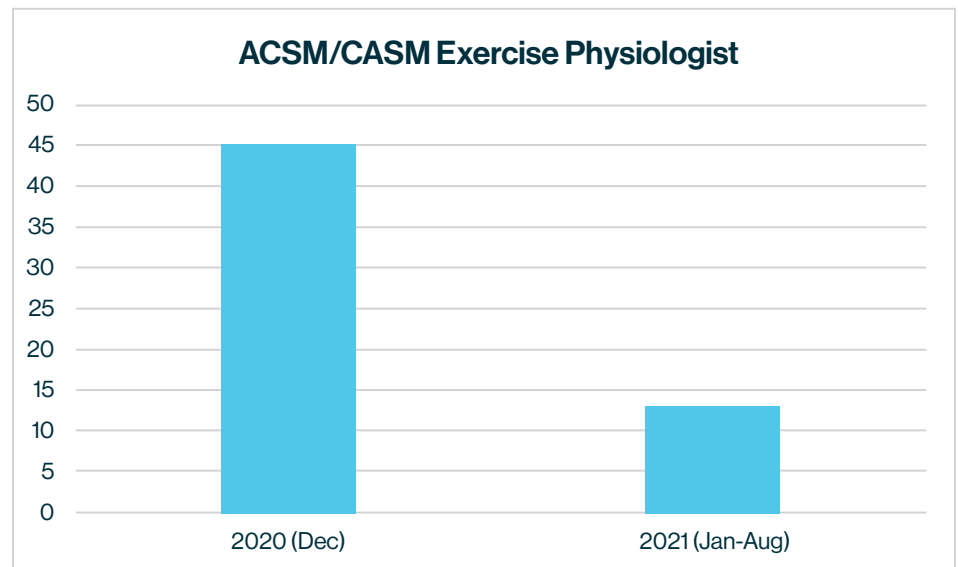
Shawn Drake, Ph.D., CSCS, ACSM-CEP, ACSM-PD, EIM-III; Committee Chair



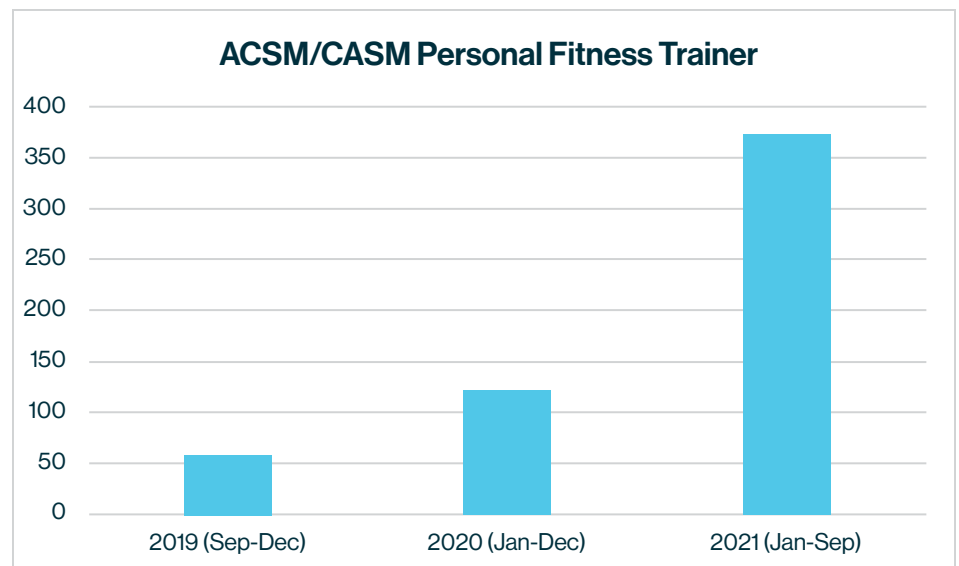
ACSM's partnership with the Chinese Association of Sports Medicine (CASM) began in 2018 to develop and deliver educational certificate programs. The co-branded, assessment-based certificate programs are non-degree granting programs that (1) provide instruction and training to aid participants in acquiring specific knowledge, skills and/or competencies associated with intended learning outcomes; (2) evaluate participants' accomplishment of the intended learning outcomes and (3) award a certificate only to those participants who meet the performance, proficiency, or passing standard for the assessment(s). The three ACSM-CASM educational certificate programs are Personal Fitness Training, Exercise Physiology, and Clinical Exercise Physiology.

Since the launch of the ACSM-CASM Personal Fitness Trainer program in 2019, the program has realized substantial, persistent growth.

The ACSM-CASM Exercise Physiologist program was created in late 2020 for an emerging discipline in China. While CASM anticipates growth in the program as more exercise science programs are created for the medical fitness sector, they fully anticipate a long runway for growth.



In 2021, ACSM and CASM developed a clinical exercise physiologist program for launch in 2022. In addition, ACSM staff are in active discussions with educational partners to launch similar programs in India and South Korea.



Advocacy



Monte Ward,
ACSM Vice President of
Government Relations

Policy

ACSM's evidence-based information informs public policy that encourages healthy lifestyles and the safe enjoyment of sports and other physical activity. ACSM members serve as expert resources for federal, state and community-level policy-makers, ensuring that decisions are founded on the latest research. Behind the ACSM policy program is a growing cadre of members who blend professional expertise with a dedication to enact lasting change that will improve the health of all Americans. ACSM's advocacy efforts are guided by the ACSM Board of Trustees, the Health and Science Policy Committee and all ACSM members.

To date, there are over 5,000 bills that deal with sports, health, physical activity, physical education and healthy lifestyles. ACSM works with the White House, federal agencies and Congress to ensure that the policies being considered meet the policy principles established by ACSM.

CEP/EP Taskforce

Clinical exercise physiologists (CEPs) and exercise physiologists (EPs) work for the betterment of the health, fitness and quality of life for patients at high risk or living with a chronic disease and those that are healthy or have medically controlled diseases.

Clinical exercise physiologists help to increase the likelihood of long-term physical, social and economic independence of patients through individualized patient education, behavior change and primary and secondary prevention strategies. Exercise physiologists take training to an advanced level by conducting and interpreting physical fitness assessments and developing exercise prescriptions for people who are healthy or have medically controlled diseases.

Currently, CEPs and EPs are not using their complete training in the health care setting as their scope of practice is limited by their lack of ability to be reimbursed for the services they provide. In addition, there is not a direct career path for these exercise professionals. There are over 16,000 potential jobs that could be filled by CEPs and EPs but are not, since they cannot be reimbursed for the services such positions require.

Recognizing the importance of this issue, ACSM has created a task force to review and create a path forward that will allow CEPs and EPs to use their complete training. The task force is chaired by ACSM Immediate Past President Bill Kraus and includes members representing a wide range of expertise.

It is the task force's goal that exercise professionals will be: (1) recognized as qualified health care practitioners (QHPs), (2) be able to deliver exercise and healthy lifestyle counseling and supervision to patients (according to their scope of practice) and (3) be able to bill and be reimbursed for their services.

Key Contacts

ACSM member advocates represent an array of expertise, from scientists to physicians to educators and health-and-fitness professionals. Each brings unique insights and perspectives to help policy-makers and staff members make informed decisions. Many are involved citizens who participate in town hall meetings, campaign for candidates or issues or engage in dialogue and debate. ACSM has over 3,500 members that have agreed to be "key contacts," someone who has agreed to (1) introduce themselves to their members of Congress (2) send a message to their elected officials through ACSM's Action Alerts, (3) serve as a conduit for issues in their district and (4) recruit other ACSM members to be key contacts. It is ACSM's goal to have a key contact in every congressional district in the country.

Grassroots Advocacy

ACSM utilizes direct lobbying as one of its tools to accomplish its legislative and regulatory goals. However, one of its most powerful tools is grassroots advocacy. In the past, ACSM has held an in-person Capitol Hill Day where its members visit Washington, DC, to



advocate on certain issues. Since COVID-19 has limited access for in-person meetings on Capitol Hill, ACSM held its first ever virtual Capitol Hill Day. ACSM's Board of Trustees held several meetings with their members of Congress to advocate in support of health lifestyles in America. In addition, ACSM asked its members to contact their members of Congress through its Action Alert system. This generated over 1,800 letters to members of Congress asking them to cosponsor legislation designed to get Americans active.

Legislation

Successful passage of the Infrastructure Investment and Jobs Act. Below are the major components of the bill.

Transportation Alternatives

- More than 60% increase in transportation-alternatives funding
- Limits on when and how much a state can transfer
- Metropolitan planning organizations get a larger share of funding and obligation authority, meaning they can sign checks and get projects moving. (Before, they had to wait for the state.)
- State flexibility on the local match so states can use safety funds as local match or meet 80/20 requirements through grouping projects

Safety

- Requires every state to do a Vulnerable Road User Safety Assessment looking at road classification, speed, demographics of surrounding area, etc.
- Requires states where 15% or more of roadway fatalities are vulnerable road users to spend 15% or more of Highway Safety Improvement Plan funds on vulnerable road user safety
- Requires FHWA to research best practices that both promote biking and walking and make biking and walking safer, including on arterial roads

Complete Streets

- Sets aside state and MPO planning to create Complete Streets policy, standards and plans
- Funds can also be used for all kinds of active-transportation plans and/or plans that reduce single-occupancy vehicle travel

Accessibility

- Pilot project to get better accessibility data to states and MPOs with the goal of improving connectivity

Vehicle Safety

- The bill updates the New Car Assessment Program (NCAP) to include a rating on ability to avoid crashes with vulnerable road users.
- New headlight standards will require incorporating new technologies that should help reduce fatalities in the dusk and dark, and other updates include the crashworthiness of hoods and bumpers.

Miscellaneous

- \$1.5 billion per year in RAISE grants
- Help for MPOs to understand how Congestion Mitigation and Air Quality (CMAQ) projects affect low-income communities
- A study on the role biking and walking can play in disaster relief
- A pilot project to deliver project prioritization criteria

Passage in the Senate of S. 1301, the Promoting Physical Activity for Americans Act. The legislation would accomplish the following:

- Require the Secretary of Health and Human Services to publish a report that provides physical activity recommendations at least every 10 years based on the latest scientific evidence.
- Midway through each 10-year cycle, a second report would highlight "best practices and continuing issues in the physical activity arena, which may focus on a particular group ... or a particular issue relating to the physical activity of Americans."
- Help fight the growing obesity epidemic by recommending separate exercise guidelines for children, adults, seniors and people with disabilities

Successful introduction and increase in cosponsors of H.R. 3109/S. 844, the Personal Health Investment Today (PHIT) Act. PHIT promotes physical health by allowing the use of pre-tax medical funds to pay for qualified fitness and sports expenses of up to \$1,000 per year for individuals or \$2,000 for heads of household.

Increased funding for NIH research.

CoAES



EXECUTIVE DIRECTOR
Walter R. Thompson, Ph.D.,
FACSM



**Non-voting/CAAHEP/
CoAES Liaison**
Gregory Ferenchak, Ph.D.,
Ed.D., R.T.
Paris Junior College



CoAES Chair
Ben C. Thompson, Ph.D.,
FACSM
Metropolitan State
University of Denver



Todd Galati, M.A.
American Council on
Exercise
(Sponsoring Organization)



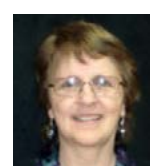
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(Sponsoring Organization)



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(Sponsoring Organization)



Brian Biagioli, Ed.D.
National Council on
Strength & Fitness
(Organization)



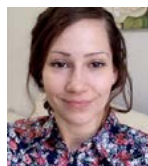
At-Large Member
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At-Large Member
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College



Francis Neric, M.S., MBA
American College of
Sports Medicine
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Practitioner Member
Kristen Dempsey, M.S.
Clinical Exercise
Physiologist
Newton-Wellesley
Hospital



Jerry Purvis, M.S., RKT
American Kinesiotherapy
Association
(Sponsoring Organization)



The Commission on Accreditation of Allied Health Education Programs (CAAHEP) is the largest programmatic accreditor of the health sciences professions. In collaboration with its Committees on Accreditation, CAAHEP reviews and accredits over 2,100 individual education programs in 32 health science occupations. CAAHEP-accredited programs are assessed on an ongoing basis to assure that they meet the standards and guidelines of each profession. CAAHEP is recognized by the Council for Higher Education Accreditation (CHEA). CAAHEP is also a member of the Association of Specialized & Professional Accreditors (ASPA). [www.caahep.org]

The Committee on Accreditation for the Exercise Sciences (CoAES) was established in April 2004 under the auspices of CAAHEP. The primary role of the CoAES is to establish standards and guidelines for academic programs that facilitate the preparation of students seeking employment in the health, fitness and exercise industry. The secondary role of the CoAES is to establish and implement a process of self-study, review and recommendation for all programs seeking CAAHEP accreditation. Programmatic accreditation through CAAHEP is specifically intended for exercise science or related departments (physical education, kinesiology, etc.) with a professional preparation track designed for students seeking employment opportunities in the health, fitness and exercise industry. [www.coaes.org]

The CoAES has multiple partners, ensuring widespread acceptance of the academic standards. Sponsoring organizations for the CoAES include ACSM, the American Council on Exercise, American Kinesiotherapy Association, American Red Cross, National Academy of Sports Medicine, and National Council on Strength & Fitness.

There are currently three academic program accreditations available: personal fitness trainer (for associates degrees or certificate programs), exercise science (for bachelor's degree programs) and exercise physiology (for graduate programs). Academic programs can select either clinical exercise physiology, applied physiology or both for graduate programs. There are currently five personal fitness trainer, 66 exercise science and 13 exercise physiology programs fully accredited. There are an additional 40 academic programs that have started their self-studies in 2021 or have completed the process and are waiting for CAAHEP to vote on their accreditation status.

In addition to a comprehensive self-study, the CoAES requires a site visit by two experienced academics specifically trained to visit institutions and to verify information contained in the self-study report. Because of the quick alteration (pivot) that accrediting agencies needed to make because of COVID-19 and the resulting travel restrictions, the CoAES adopted a COVID-19 Relief Program. The CoAES understood the budgetary restrictions imposed on colleges and universities around the world because of adjustments

caused by the COVID-19 during this last academic year and into 2022. They remained committed to providing programs with the very best accreditation services during this unprecedented time. For the calendar year 2021 (Jan. 1 through Dec. 31 and now through the end of the spring semester of 2022), any college or university that submits a new request for accreditation services through the CAAHEP website for the personal fitness training, exercise science or exercise physiology accreditations has the initial accreditation fee of \$750 waived (and for programs seeking two accreditations at the same time, the fee of \$1,000 is waived) and the site visit fee waived (a savings of between \$1,500 and \$3,000). Successful programs only pay the annual fee of \$500 after receiving initial accreditation.

Unlike many other academic program accreditations that are process based, CAAHEP accreditation is outcomes based. Outcome assessments must include but are not limited to national credentialing examination(s) performance, programmatic retention/attrition, graduate satisfaction, employer satisfaction, job (positive) placement and programmatic summative measures. The program must meet the outcomes assessment thresholds. Academic programs do not need to change the name of their programs, and outside of self-discovery of curricular gaps, the CoAES does not force programs to change their course offerings.

Certified Professional of the Year

The ACSM's Committee for Certification and Registry Boards (CCRB) and the Health Fitness Summit Program Committee launched the ACSM Certified Professional of the Year (CPOY) in 2021. The award recognizes an outstanding ACSM certified professional by acknowledging their dedication and exceptional contributions toward enhancing the health and wellness of individuals in their community. Applications open in early fall and close in the winter.

2022 Selection Committee

Christie Ward-Ritacco, CCRB Chair

Francis Neric, National Certification Director

Katherine Hughey, Certification Project Manager

Stephanie Cooper, CCRB Representative

Vanessa Kercher, CCRB Member-at-large

Renee Rogers, ACSM Summit Planning Committee Chair

Keli Roberts, Professional, ACSM Summit Planning Committee representative

Kristin A. Traskie, 2021 Certified Professional of Year winner

2021 Selection Committee

Christie Ward-Ritacco, CCRB chair

Francis Neric, National Certification Director

Stephanie Cooper, CCRB Representative

Deb Riebe, CCRB Representative, ACSM Summit Planning Committee Chair

Meir Magal, CCRB Representative

Patti Mantia, CCRB Representative

Dave Cannon, CCRB Representative

Keli Roberts, Professional, ACSM Summit Planning Committee representative

The primary task of the committee is to set the eligibility requirements and conduct a review of applications to determine the top three finalists. Each of the finalists completes additional application components that the committee then reviews before selecting a winner. The three finalists are recognized, and the winner is announced at the Annual ACSM Health and Fitness Summit.

Annually, the committee evaluates the award procedures and details to determine future alterations and growth of the award. Future changes may include but are not limited to:

- Years 1 and 2: One overall winner
- Year 3: Two winners (overall and up-and-coming)
- Year 4: Two winners (overall and up-and-coming)
- Year 5: One overall winner for each credential, plus one general up-and-coming winner

Winner of the 2021 Certified Professional of the Year Award



Kristin A. Traskie, MPH, ACSM-CPT, EIM Level 1

Kristin Traskie's mission: Create a culture of health and well-being on the Michigan State University (MSU) campus. She uses research-backed knowledge from her multiple fitness certifications to create holistic wellness and movement opportunities. Her work through MSU's health-promotion department, Exercise is Medicine on Campus® initiative, Well-Being Coalition and the SPARTANfit fitness and wellness program is improving health outcomes and life satisfaction.

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LEADING THE WAY