PERSONAL HEALTH INVESTMENT TODAY ACT

NRPA POLICY POSITION

Co-sponsor legislation introduced by Rep. Kind (D-WI) H.R. 956, the Personal Health Investment Today (PHIT) Act, and support the introduction of companion legislation in the Senate. In addition, NRPA supports the inclusion of the PHIT Act in any comprehensive tax reform legislation. The PHIT Act will give Americans a tax incentive to increase physical activity and fitness to improve their health.

Background

The PHIT Act was introduced by Rep. Kind (D-WI) and has truly bipartisan support. The bill amends the Internal Revenue Code to allow a medical care tax deduction for up to \$1,000 (\$2,000 for married couples filing jointly or heads of household) of qualified sports and fitness expenses. One would be able to use their pretax medical expenditure accounts known as Flexible Spending Accounts and Health Savings Accounts on preventive physical activity fees, such as membership at a recreation or fitness facility, youth and adult sports league fees, exercise classes, youth camps, organized running event registration fees, martial arts, gymnastics and other physical activities. Currently, pretax medical accounts are primarily used for reimbursement of medical expenses once you become sick. Economic consequences of physical inactivity affect individuals, businesses and government. An investment of \$1 (time and equipment) leads to \$3.20 in medical cost savings. Physically active individuals save an estimated \$500 per year in healthcare costs. 1

Why Congress Should Act

We need to get America moving to reduce health care costs and our parks play a vital role as a hub in nearly every community where individuals young and old can go to be physically active. According to the Centers for Disease Control, more than one-third of U.S. adults (35.7) percent) are obese and (69.2 percent) are overweight.2 The Personal Health Investment Today Act can make an impact in preventing illness and costs associated with obesity by offering incentives to increase physical activity and fitness. Help make a difference by joining NRPA in supporting H.R. 956.

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2010 State Obesity Rates (%)3

Alabama	32.2	Illinois	28.2	Montana	23.0	Rhode Island	25.5
Alaska	24.5	Indiana	29.6	Nebraska	26.9	South Carolina	31.5
Arizona	24.3	Iowa	28.4	Nevada	22.4	South Dakota	27.3
Arkansas	30.1	Kansas	29.4	New Hampshire	25.0	Tennessee	30.8
California	24.0	Kentucky	31.3	New Jersey	23.8	Texas	31.0
Colorado	21.0	Louisiana	31.0	New Mexico	25.1	Utah	22.5
Connecticut	22.5	Maine	26.8	New York	23.9	Vermont	23.2
Delaware	28.0	Maryland	27.1	North Carolina	27.8	Virginia	26.0
District of Columbia	22.2	Massachusetts	23.0	North Dakota	27.2	Washington	25.5
Florida	26.6	Michigan	30.9	Ohio	29.2	West Virginia	32.5
Georgia	29.6	Minnesota	24.8	Oklahoma	30.4	Wisconsin	26.3
Hawaii	22.7	Mississippi	34.0	Oregon	26.8	Wyoming	25.1
Idaho	26.5	Missouri	30.5	Pennsylvania	28.6		

- 1 World Health Organization. Health and Development Through Sport Report, 2008.
- 2 CDC.gov, Prevalence of Obesity in the United States, 2009–2010.
- 3 CDC.gov, 2010 State Obesity Rates.

