

Caring for the Ages

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Getting Functional Medicine on the PALTC Radar

By Joanne Kaldy

Even as people age, lifestyle and other changes can still positively impact outcomes, well-being, and longevity. So, it's not surprising that functional medicine, which involves a holistic, person-centered approach to health care that focuses on root causes of illness instead of just treating symptoms, is gaining traction in senior care.



The Basics

By gathering extensive information, including medical history, test results, and insights and input from the patient and (as appropriate) family and other caregivers, functional medicine providers can identify reasons someone is ill or doesn't feel well. This may involve genetics and/or issues such as stress, poor nutrition, and environmental factors (like exposure to toxins or pollution).

Functional medicine involves a team approach that often involves physical therapists, occupational therapists, nurses, pharmacists, and others. Practitioners can earn various functional medicine-related credentials. These include the Functional Medicine Certified Professional credential offered by the Institute for Functional Medicine, Functional Medicine Certified Professional – Medical (specifically for licensed medical professionals – MDs, DOs, and NDs) and Applied Functional Medicine Certification offered by the School of Applied Functional Medicine.

Functional medicine generally involves strategies related to:

- Nutrition optimization involving antioxidant-rich diets, foods with omega-3 fatty acids, lean protein consumption, and limited intake of sugar and processed foods.
- Lifestyle changes, including stress and sleep management, medication optimization, and preserving movement/muscle strength and promoting mobility.

- Personalized patient experiences. This includes testing such as hormone panels, cardiovascular screening, and toxin panels; as well as gut health support (e.g., promoting probiotics/prebiotics and eliminating food sensitivities).

Ruth Odai, MD, MPH, of Functional Medicine and Direct Primary Care, describes functional medicine as “a search for the root of what's causing a symptom. For instance, when someone comes in because of a fall or multiple falls, we don't just say, ‘Go and get some physical therapy.’ While this intervention may be helpful, we want to know what's causing the fall. For a lot of women in my patient population, it could be from sarcopenia, it could be from osteopenia, or it could be from osteoporosis. We'll look at things like their protein intake and vitamin D levels, and we'll devise a strategy to limit the risk of falls.”

Functional medicine seeks to identify upstream drivers of disease. “This can be very powerful with older adults because we develop multiple overlapping processes as we age, many of which have similar underlying root causes,” says Ashley Shrader, DNP, FNP-C, IFMCP, founder of RISE Functional Medicine. For instance, a major risk factor for falls is neuropathy, and functional medicine can help identify what is driving this—for example, whether it's nutrient deficiencies and/or possibly gut health issues.

“As we get older, muscle loss is common, and a big driver of this is not getting the proper nutrients,” says Dr. Shrader. With functional medicine, she observes, “We assess and understand nutrient status at the macronutrient and micronutrient levels.”

Of course, functional medicine reviews medications. Dr. Shrader says, “Understanding how these impacts one's ability to be mobile and steady, for example, can help identify opportunities to reduce fall risks and increase people's ability to be independent and engage in activities.”

Care planning in functional medicine generally involves three key steps:

- Assessments that identify antecedents such as genetics, triggers (events or condition changes that may have caused or exacerbated a condition), and mediators (factors such as poor sleep or dietary habits) that contribute to health conditions on an ongoing basis.
- Interventions, which generally start with lifestyle changes such as nutritional counseling and support, tools to improve sleep and reduce stress, and efforts to address emotional health.
- Monitoring, which may involve lab testing, patient-reported outcome measures, and follow-up appointments with providers.

Readiness assessment is another key part of functional health, as it is important to know if someone is motivated and committed to adhering to interventions and making significant lifestyle modifications. Dr. Shrader says, “It's important to understand what the individual's motivations and goals are and how these intersect with their physical and mental health. It all ties together.”

A Family Affair?

Older adults and their adult children may share an interest in functional medicine interventions, particularly if there is a hereditary illness or condition in the family. “I have my own personal journey, as my mother passed away from amyotrophic lateral sclerosis (ALS) a few years ago. In the process of

getting tested, she discovered she had a genetic predisposition to this illness. It prompted me to get my own genetic testing done, and I have the same genetic marker,” says Dr. Shrader. This prompted her to explore her dietary habits, environmental factors, lifestyle issues, and other aspects of her life she could control or modify to reduce the risk of developing ALS.

In relation to genetic and other testing, she stresses, “You really want to be confident that you’re working with a practitioner who understands what to do with the genetic data.” She observes that some information can trigger anxiety for people, so having a mutually trusting patient-practitioner relationship is key.

Many adult children have family histories of dementia and/or cardiovascular disease and are seeking ways to minimize the risk of developing these illnesses and stay healthy longer.

Dr. Odai notes, “Whenever I see a new patient, we sit down and basically draw a timeline. We talk about their family history and look at conditions such as cancer, dementia, osteoporosis, high blood pressure, and diabetes.” I discuss the role genetics plays, but also look at opportunities to manage their health via lifestyle modifications. “We give them a way to know that there are steps they can take to prevent or delay expression of the conditions exhibited by their parents,” she says.

Coverage Challenges

One challenge to using functional medicine is that, because it is generally considered an alternative intervention, it isn’t covered by original Medicare (Parts A and B), and there is no CPT code for these services. However, Dr. Shrader notes that Medicare may cover some laboratory tests, such as stool analyses or cardiometabolic panels, particularly if the patient has a history or condition that warrants such testing. At the same time, some Medicare Advantage plans may offer limited coverage for some functional medicine interventions, depending on the provider.

Much like PALTC practitioners, who are committed to person-centered and age-friendly care, functional medicine aligns closely with this approach. As Dr. Shrader observes, “I think you’ll find in a lot of functional medicine practices that more time is spent with each individual patient, really trying to understand their journey and the correlating factors that align with the onset of their symptoms and health issues and what matters to them. We also seek to learn about the mental, emotional, and spiritual aspects of their lives to help understand their health journey holistically.”

Dr. Odai adds, “I can have two patients who both have textbook hypertension, but the causing or initiating factors for each person can be very different. By understanding what is driving the high blood pressure in each patient, I can address those things on an individual level.” As a result, she says, there is potential for better outcomes and greater adherence to interventions and behavioral/lifestyle changes.

Getting Functional Medicine on Your Radar

It behooves post-acute and long-term care practitioners to get functional medicine on their radar, as the market for these services is on the upswing, [with an annual growth rate of 23.1%](#). As Dr. Shrader observes, “patients and practitioners alike are attracted by its holistic, person-centered approach to care and the value of addressing root causes instead of just symptoms.”

The Institute for Functional Medicine (IFM) has a [free introductory course](#) that offers the core features of the functional medicine framework and how it supports health outcomes. The IFM also has other resources. You can also [search for functional medicine practitioners](#) in your area who can share their experiences and answer questions.

While practicing functional medicine or offering these services may not be a viable option, there may be some partnership opportunities. As Dr. Shrader says, “I think you’ll find that a lot of functional medicine providers would be happy to collaborate with geriatricians or internal medicine practitioners who see a value for their older patients.”

It is reasonable to expect that older adults and their families will increasingly expect at least some elements of functional medicine to be integrated into their care. As Tina Sandri, MHSA, LNHA, QCP, RYT-200, president of Forest Hills of DC, says, “I think Americans are starting to look at wellness from a different perspective and seeking to address body, mind, and spirit in ways that enable them to live longer and better. Functional medicine is part of this.”

Boomers are driving this trend to some degree. As Ms. Sandri notes, “This is probably the first generation that is more empowered to take data into their own hands and seek to understand their body at a cellular level.”

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