Whereas, Civil pilot health is a significant public health concern; and
Whereas, Proper and correct clearance for pilots to fly requires careful assessment of physical status and the potential effects of medications; and
Whereas, The complex interactions of medications and underlying health conditions involving multiple bodily systems are compounded at high altitudes; and
Whereas, The 2015 update to Federal Aviation Administration (FAA) statutes creates a new category for civil pilot health monitoring known as BasicMed; and
Whereas BasicMed requires examination by a “physician”; and
Whereas, The FAA has interpreted this broadly as any professional licensed in a state that is allowed to use the title of “physician”; and
Whereas, In approximately 18 states, chiropractors and other limited license providers have or are seeking authority to perform BasicMed examinations; and
Whereas, The FAA has noted, in its discussion of the BasicMed program, that it does not expect that physicians other than MD or DO would be capable of adequately performing these examinations; and
Whereas, The Department of Transportation has, in the past, issued similar authority non-prescribing physicians, to that of the FAA, as it pertains to the medical examinations to obtain a Commercial Drivers License; therefore be it
RESOLVED, That our American Medical Association advocate for the Federal Aviation Administration to restrict BasicMed examinations for pilots to physicians with prescriptive authority (Directive to Take Action); and be it further
RESOLVED, That AMA Policy H-160.949, “Practicing Medicine by Non-Physicians,” be amended by addition to read as follows:

Practicing Medicine by Non-Physicians H-160.949

Our AMA: (1) urges all people, including physicians and patients, to consider the consequences of any health care plan that places any patient care at risk by substitution of a non-physician in the diagnosis, treatment, education, direction and medical procedures where clear-cut documentation of assured quality has not been carried out, and where such alters the traditional pattern of practice in which the physician directs and supervises the care given;
(2) continues to work with constituent societies to educate the public regarding the differences in the scopes of practice and education of physicians and non-physician health care workers;
(3) continues to actively oppose legislation allowing non-physician groups to engage in the practice of medicine without physician (MD, DO) training or appropriate physician (MD, DO) supervision;
(4) continues to encourage state medical societies to oppose state legislation allowing non-physician groups to engage in the practice of medicine without physician (MD, DO) training or appropriate physician (MD, DO) supervision;
(5) through legislative and regulatory efforts, vigorously support and advocate for the requirement of appropriate physician supervision of non-physician clinical staff in all areas of medicine; and
(6) opposes special licensing pathways for physicians who are not currently enrolled in an Accreditation Council for Graduate Medical Education of American Osteopathic Association training program, or have not completed at least one year of accredited post-graduate US medical education; and
(7) opposes efforts by federal agencies (i.e., the Federal Aviation Administration and the Department of Transportation) to permit non-prescribing physicians to conduct medical examinations required to obtain special transportation licenses. (Modify Current HOD Policy)

Fiscal Note: Modest - between $1,000 - $5,000.

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