

Title: Expedited Immigrant Green Card for J-1 Visa Waiver Physicians Serving in Underserved Areas

Introduced by: Venkat K. Rao, MD, for the Genesee County Delegation

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Referred To: Reference Committee E

House Action: **APPROVED**

Whereas, J-1 visa IMG resident physicians sign up for serving in underserved areas for three years to become eligible to stay in the U.S. as a permanent resident instead of a mandatory return to their native countries as required per J-1 visa regulation, and

Whereas, their service is extremely helpful in improving the health of U.S. citizens, especially low income and rural communities, and

Whereas, substantial care to COVID-19 patients was provided by these J-1 visa waiver physicians and they saved lives, and

Whereas, the waiting period for getting the Green Card Visa for physicians of certain countries is longer than 10 years at present due to a per country limit of seven percent of H-1B to immigrant (Green Card) availability, and the J-1 visa waiver physicians have to join the end of the very long queue of 1.2 million applicants for certain countries, and their children are becoming status less at age 18, and

Whereas, these J-1 visa waiver physicians provided great national service to US citizens, and deserve priority in visa allotment; therefore be it

RESOLVED: That the Michigan Delegation to the American Medical Association (AMA) ask our AMA to lobby U.S. Congress and the U.S. Administration that the J-1 visa waiver physicians serving in underserved areas be given highest priority in visa conversion to green cards upon completion of their service commitment obligation and be exempted from the per country limitation of H-1B to green card visa conversion.

WAYS AND MEANS COMMITTEE FISCAL NOTE: \$1,000-\$2,000 for new AMA policy.

Relevant MSMS Policy:

Eliminate Cap on J-1 Visa Waiver Slots for Each State

MSMS supports eliminating the cap on J-1 Visa Waiver slots each state is allowed to sponsor. (Board Action Report #7, 2013 HOD, re Res68-12)

Relevant AMA Policy:

J-1 Visas and Waivers D-255.993

1. Our AMA shall encourage HHS and other interested government agencies to continue sponsorship of the J-1 visa waiver program.
2. If the USDA does not continue in its role as an interested government agency (IGA), the AMA encourage HHS to expand its J-1 visa waiver program.
3. Our AMA will work with federal agencies to ensure better coordination of federal, state, and local agencies in monitoring the placement and enforcement of physicians' service requirements through the J-1 waiver and Conrad-30 programs with a report back at A-03.
4. Our AMA will work towards regulation and/or legislation to allow physicians on H-1B visas for their J-1 visa waiver, who are limited to serving in medically underserved areas, to continue to care for their patients who require hospitalization in the closest appropriate medical facility which may not be in the underserved area.
5. Our AMA will work with state medical societies to study and report back on the feasibility of having a national data repository of J-1 Visa Waiver statistics so that J-1 Visa Waiver unoffered positions can be transferred to states as needed to treat underserved communities and to monitor the success of this program.

Conrad 30 - J-1 Visa Waivers D-255.985

1. Our AMA will: (A) lobby for the reauthorization of the Conrad 30 J-1 Visa Waiver Program; (B) advocate that the J-1 Visa waiver slots be increased from 30 to 50 per state; (C) advocate for expansion of the J-1 Visa Waiver Program to allow IMGs to serve on the faculty of medical schools and residency programs in geographic areas or specialties with workforce shortages; (D) publish on its website J-1 visa waiver (Conrad 30) statistics and information provided by state Conrad 30 administrators along with a frequently asked questions (FAQs) document about the Conrad 30 program; (E) advocate for solutions to expand the J-1 Visa Waiver Program to increase the overall number of waiver positions in the US in order to increase the number of IMGs who are willing to work in underserved areas to alleviate the physician workforce shortage; (F) work with the Educational Commission for Foreign Medical Graduates and other stakeholders to facilitate better communication and information sharing among Conrad 30 administrators, IMGs, US Citizenship and Immigration Services and the State Department; and (G) continue to communicate with the Conrad 30 administrators and IMGs members to share information and best practices in order to fully utilize and expand the Conrad 30 program.
2. Our AMA will continue to monitor legislation and provide support for improvements to the J-1 Visa Waiver program.
3. Our AMA will continue to promote its educational or other relevant resources to IMGs participating or considering participating in J-1 Visa waiver programs.
4. As a benefit of membership, our AMA will provide advice and information on Federation and other resources (but not legal opinions or representation), as appropriate to IMGs in matters pertaining to work-related abuses.
5. Our AMA encourages IMGs to consult with their state medical society and consider requesting that their state society ask for assistance by the AMA Litigation Center, if it meets the Litigation Center's established case selection criteria.

Source:

<https://www.cato.org/publications/immigration-research-policy-brief/backlog-skilled-immigrants-tops-1-million-over#employment-based-green-card-backlog>