

August 10, 2005

The Honorable Condoleezza Rice  
Secretary  
U.S. Department of State  
2201 C Street, NW  
Washington, DC 20520

The Honorable Michael Chertoff  
Secretary  
U.S. Department of Homeland Security  
245 Murray Lane  
Washington, DC 20528

Dear Secretary:

On behalf of the undersigned organizations, we are writing to request a meeting with you or your designees to discuss changes to administrative policies and processes within your departments that can help our health care institutions address a chronic shortage of health care professionals.

We are a coalition of health care providers, nurse executives and managers, nurse workforce staffing companies and their representatives, and educational concerns who advocate for public policies that will help increase the supply of qualified health care professionals in U.S. health care facilities.

As caregivers, our mission – our commitment to care for our patients and communities – simply cannot be accomplished unless we have a sufficient number of competent and caring nurses, respiratory therapists, radiology technologists and scores of other health care professionals we rely on to care for an aging population. But a shortage of caregivers, particularly nurses, makes this promise an increasingly difficult one to keep.

The reasons for the nursing shortage are complex and affected by changing demographic trends. Our current nursing workforce is aging; sicker patients require more advanced care and technology; and despite significant efforts to increase enrollments in schools of nursing nationwide, programs are unable to quickly meet the huge demand for nurses. The impending health care needs of the baby boom generation make the shortage all the more critical. The U.S. Bureau of Labor Statistics projected that 1.1 million new and replacement nurses will be needed by 2012. While our coalition strongly supports the provisions of the Nurse Reinvestment Act (P.L. 107-205) to increase the number of U.S.-educated nurses, it will not be enough.

The seriousness of the current nursing shortage and its implications for patient care forces hospitals and other health care providers to look overseas for highly qualified registered

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nurses (RNs). When we brought our concerns to lawmakers, Congress responded in May by passing Title V, Section 501 of the REAL ID Act of 2005 (Division B of P.L. 109-13), which the President signed into law. This provision recaptured 50,000 employment-based immigrant visas (EB-3s) and made them available for nurses and physical therapists, in addition to the regular statutory allocation. We will continue to press for recapturing unused employment visas from the past four years to help address our shortages of health care professionals. As the enclosed statement of our coalition's organizing principles make clear, our focus is on ensuring that internationally educated health care personnel who serve in our health care facilities are fully qualified to address our patients' needs.

As Congress begins to debate longer-term immigration reform, the nursing shortage is a critical current problem and any provisions that might be included in legislation could take years to implement. In the meantime, your departments can take immediate administrative steps to speed the flow of highly qualified foreign nurses. We believe that while it now takes as much as two years to bring a qualified nurse from abroad, administrative changes alone could reduce this time to under six months.

We respectfully request that you assign a member of your staff to meet with us to explore the following ideas and others that may help our health care facilities achieve these processing time reductions as they struggle with workforce shortages:

- *Prioritize nurses (or Schedule A) at the U.S. Citizenship and Immigration Service (USCIS) Centers.* Nurses are reported separately on processing time reports. They can be processed as a priority. While processing times have improved to 60 to 90 days from more than a year in the past few years, processing in 30 days or fewer is a reasonable objective.
- *Institute electronic transmission of approvals from USCIS Centers through the National Visa Center (NVC) to consular posts.* Just avoiding the physical delivery of files from USCIS to the NVC would save 60 days or more in processing time. Our coalition would strongly support a pilot project for electronic transmission of approvals for nurses.
- *Consolidate the NVC processing steps.* The NVC goes through four to six separate steps in moving a file to the consular post for the applicant's interview. Consolidating these steps could reduce processing delays by up to five months.

We intend to pursue other administrative reforms with the Secretary of Labor and with the International Commission on Healthcare Personnel -- all with the goal of reducing the processing time for a qualified nurse from as long as two years to under six months. Your departments can make a major contribution to this effort with just the innovations described above. And each of them can be extended in the future to other categories of caregivers in short supply.

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Thank you for considering our request. Together, we can improve health care services to patients in our nation's health care facilities. We look forward to your response. Please contact Carla Luggiero, Senior Associate Director of Federal Relations, at the American Hospital Association at 202/626-2333 for further information.

Sincerely,

American Association of Homes and Services for the Aging  
American Health Care Association  
American Hospital Association  
AMN Healthcare  
American Organization of Nurse Executives  
Federation of American Hospitals  
Foreign Nurse Task Force  
National Association of Public Hospitals  
O'Grady Peyton International  
Premier  
VHA Inc.