American Hospital Association

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The Honorable Kent Conrad
530 Senate Hart Building
Washington, DC 20510-6275

Dear Senator Conrad:

On behalf of our more than 5,000 member hospitals, health systems and other health care organizations, and our 42,000 individual members, the American Hospital Association (AHA) is pleased to support your bill, the Conrad State 30 Improvement Act (S. 1979). The legislation reauthorizes and improves the current J-1 visa waiver program to enable foreign physicians to remain in the United States and serve patients in medically underserved areas.

Under current law, foreign physicians admitted to the United States on a J-1 visa to participate in graduate medical education programs are required by section 212(e) of the Immigration and Nationality Act (8 U.S.C. 1182(e)) to return to their home countries or last permanent residences for two years before they are eligible for an immigration status change allowing them to continue their work as physicians in the United States. The Conrad State 30 Program allows state health departments to request J-1 visa waivers for up to 30 foreign physicians per year to work in federally designated Health Professions Shortage Areas (HPSA) or Medically Underserved Areas (MUA). First enacted in 1994 (P.L. 103-416), this program has been integral to bringing medical care to many of the most underserved areas of our country.

Access to health care is a critical issue for our nation. Currently, more than 20 million Americans live in areas where there is a lack of physicians to meet their medical needs. Our nation's rural and inner city hospitals struggle to recruit and retain physicians, and the supply of primary care providers in such areas is steadily decreasing. In many areas of our nation, the Conrad State 30 physician is the only source of primary health care.

Unfortunately, the authorization for the Conrad State 30 Program remains temporary and the latest extension will expire on June 1, 2012. Without immediate and timely reauthorization, many of our communities that have benefited from a Conrad State 30 physician may find themselves without access to physician services.

S. 1979 would make the Conrad 30 program permanent, providing needed certainty to this source of physician supply for underserved areas. The bill also provides flexibility to expand the number of waivers in states where the demand exceeds the current limit of 30 per year. It also provides incentives for physicians who receive their training in H-1B status to participate in the program. Lastly, the bill clarifies standards for organizations employing Conrad 30 physicians.

The AHA urges a swift enactment of S. 1979 and we stand ready to work with you and your colleagues to accomplish this goal.

Sincerely,

Rick Pollack
Executive Vice President