



**American Hospital
Association®**

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April 27, 2017

The Honorable Darrell Issa
United States House of Representatives
2269 Rayburn House Office Building
Washington, DC 20515

Dear Congressman Issa:

On behalf of our nearly 5,000 member hospitals, health systems and other health care organizations, and our clinician partners – including more than 270,000 affiliated physicians, 2 million nurses and other caregivers – and the 43,000 health care leaders who belong to our professional membership groups, the American Hospital Association (AHA) is pleased to express our support for the Conrad State 30 and Physician Access Act of 2017 (H.R. 2141). Your legislation would reauthorize the Conrad State 30 Program and make other changes to improve patient access to care.

Currently, foreign-educated non-U.S. citizen 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 country or last permanent residence for two years before they are eligible to apply for a visa 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 or Medically Underserved Areas. First enacted in 1994 (Public Law 103-416), this program has been integral to bringing medical care to many of the most underserved areas of the country.

Access to health care is a critical issue for our nation. More than 20 million Americans live in areas where there is a shortage of physicians. 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 declining. In many areas of the country, a Conrad State 30 physician is the only source of primary health care.

Your legislation would extend the Conrad State 30 Program through 2021, providing needed certainty for underserved areas. The bill also would increase the state allocations to 35 physicians per year and provide flexibility to further expand the number of waivers in states where the demand exceeds the limit. In addition, it would provide a variety of technical improvements in the administration of the program based on more than 20 years of experience. Finally, the bill would clarify employer standards for using Conrad 30 physicians.



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The latest extension of the Conrad State 30 Program will expire on April 28. We urge swift action to extend this vital program. Without timely reauthorization, many communities that have benefited from these physicians may find themselves without access to such services. We support the enactment of the program improvements contained in the Conrad State 30 and Physician Access Act as part of this extension and stand ready to work with you and your colleagues to accomplish this goal.

Sincerely,

Thomas P. Nickels
Executive Vice President