

# Increasing Use of Physician Visa Waiver Programs

December 2022

## Background

Idaho is experiencing a severe shortage of physicians, especially in rural areas. Idaho ranks 50th in the nation for active physicians providing direct patient care per resident and 45th in the nation for active primary care physicians per resident.<sup>1</sup> The physician shortage is projected to worsen in coming years with 30% of Idaho physicians being age 60 or older.<sup>1</sup> Rural communities, which make up 80% of our state, have a higher rate of the aging population suffering from a greater number of chronic conditions requiring more frequent and complex care. Despite this, rural Idaho counties have substantially fewer physicians per resident than urban counties (2.8 vs. 4.6 physicians per 5,000 residents). And 14 Idaho counties have less than 2 physicians per 5,000 residents.<sup>2</sup>

## How Physician Visa Waiver Programs Work

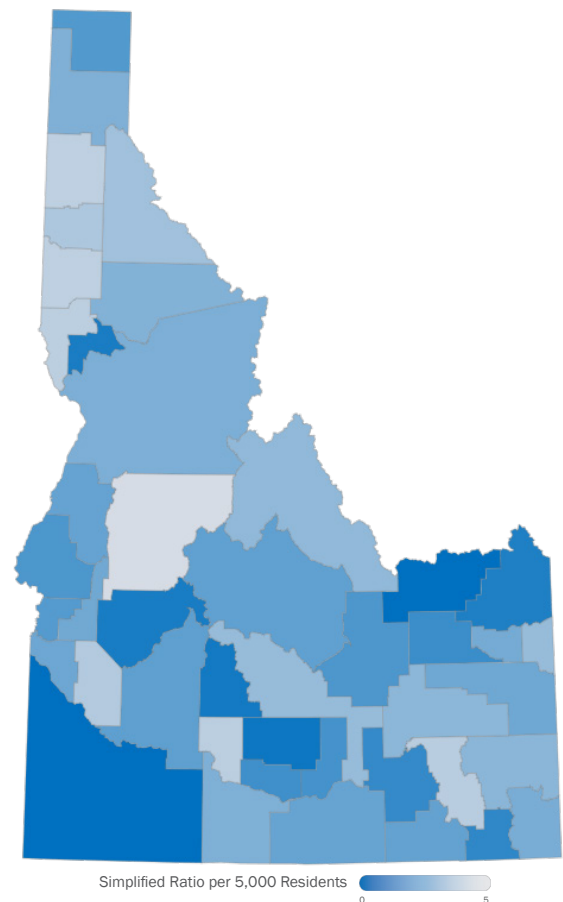
The Conrad J-1 Visa Waiver and National Interest Waiver programs were established by federal law in 1961 and in Idaho law in 2004 as recruitment options of last resort. These programs allow healthcare facilities designated as a Healthcare Professional Shortage Area (HPSA) to recruit non-U.S. citizen physicians to fill vacancies they have been unable to fill with a U.S. citizen physician. To be eligible, a physician must have successfully completed a residency training program in the U.S. For the J-1, the waiver eliminates the two-year return home requirement in exchange for a three-year service commitment to practice medicine in an underserved area in the U.S. The National Interest Waiver program waives the labor certification requirement for the employer and allows a foreign physician to practice medicine with an underserved population for 3-5 years. Waivers are submitted to the Division of Public Health for review, and final waiver decisions are made by the U.S. Department of State.



“Several of our key current providers were J-1 recruits and the program almost always leads to a long-term commitment by the physician to the community.”

– Idaho Hospital CEO

## Physician FTE by County per 5,000 Residents



“The J-1 waiver has allowed us to successfully recruit oncology and neurology providers and it has been wonderful for our community to receive the care close to home.”

– Idaho Critical Access Hospital CEO

## Increasing Use of Visa Waivers in Idaho

Visa waiver programs have been effective recruiting tools for healthcare facilities across the country, yet they have been historically underutilized in Idaho. Idaho can receive 30 visa waivers per year statewide, but from 2004-2021, Idaho health facilities only requested on average 1 waiver per year. In 2022, Idaho facilities submitted 7 applications. According to feedback from healthcare facilities, the additional elements required by Idaho law are particularly burdensome for lower-resourced facilities such as Rural Health Clinics and Critical Access Hospitals. The following table outlines the proposal that will simplify the application process, while continuing to meet the original intent as a recruitment option of last resort.

## Proposed Legislative Changes

Category	Current Requirement	Proposed Requirement
Recruitment Efforts	Must demonstrate that facility tried for at least <b>6 months</b> to fill the position with a U.S. citizen physician by submitting <b>specific documentation</b> evidencing the recruitment process	Must demonstrate that facility tried for at least <b>3 months</b> to fill the position with a U.S. citizen physician by submitting a <b>narrative description</b> of the recruitment process
Sliding Fee Scale	Must have a sliding fee scale, submit a copy of the fee scale with the application, and post on-site	No longer required
Letter from Residency and Previous Employer	Healthcare facilities required to submit both with specific outlined criteria	No longer required
Number of applications by healthcare facility (applies to J-1 only)	Can submit up to <b>2</b> applications per healthcare facility	Can submit up to <b>5</b> applications per healthcare facility
Number of Flex* waivers (applies to J-1 only)	Flex waivers capped at <b>10</b>	<b>No specific cap</b> on flex waivers for non-HPSA facilities after 6-months (statewide cap of 30 waivers per year remains in place)
Number of Specialty Physician waivers (applies to J-1 only)	Specialty physician waivers capped at <b>5</b>	<b>No specific cap</b> on waivers for specialty physicians after 6-months (statewide cap of 30 waivers per year remains in place)

\*Flex: Non-Healthcare Possessional Shortage Area (HPSA)

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## References

<sup>1</sup> State Physician Workforce Data Report (2021), available at aamc.org.

<sup>2</sup> Idaho Department of Health and Welfare Report (2022). Data notes: Population data from the 2020 American Community Survey 5-year aggregate; provider data is compiled using Health Resources Services Administration and verified using Idaho Medicaid, Board of Medicine, and Idaho Medical Association; J-1 site-data from Bureau of Rural Health and Primary Care; Provider types include: general practice, obstetrics and gynecology, family medicine, pediatrics. FTE = Full Time Equivalent physician who practices 40 hours per week.