

The Honorable Chad Wolf
Office of the Secretary
U.S. Department of Homeland Security
Washington, D.C. 20528

Dear Acting Secretary Wolf,

The Society of Hospital Medicine (SHM), which represents the nation's hospitalists, is writing to urge additional action to aid in the fight against the novel COVID-19 pandemic.

Hospitalists are clinicians whose professional focus is the care of hospitalized patients and are one of the specialties of frontline providers during the COVID-19 pandemic. They are and will be the primary attending physicians directly responsible for the large majority of hospitalized COVID-19 patients.

Prior to the outbreak of COVID-19, the United States was already facing a physician shortage. Immigrant physicians are crucial in providing quality care throughout the United States, particularly in rural and underserved communities. However, visa restrictions are limiting the ability to effectively utilize and deploy these physicians in communities with the greatest need. For example, physicians on an H-1B visa are only allowed to work in hospitals listed on their visa. Therefore, physicians on employment-based visas, many of whom are young and trained in the United States, are unable to provide care in nearby hospitals that are experiencing staffing shortages due to COVID-19 exposure. We have recently heard calls from New York and California asking for physicians from out of state to help them care for patients, and there will certainly be additional areas of great need looking for additional help as the pandemic continues. **In light of the declaration of national emergency, we recommend allowing clinicians on H-1B visas to work in hospitals that have not sponsored their visas.**

To further increase physician capacity, we recommend the Department of Homeland Security enact the following administrative changes to H1-B visas:

- 1) Allow electronic filings for H-1B's for physicians. Currently, all H-1B filings are full physical copies, which typically consist of hundreds of pages. Electronic filing will speed up the application process. The Immigration and Nationality Act (INA) establishes that the "petition shall be in such form and contain such information as the Attorney General shall prescribe," INA 214(c)(1), which suggests that the Secretary has the power to establish an electronic form.
- 2) Allow premium processing for physicians. Premium processing forces the government to adjudicate an H-1B within 15 calendar days. However, premium processing for all petitions was recently suspended. Premium processing, at least for physicians, will ensure rapid approval for these much-needed clinicians.
- 3) Limit Requests for Evidence ("RFE") for physicians. The RFE rate for H-1B's has skyrocketed (increasing from under 20% to over 65%) under the current administration. Limiting RFE's during this pandemic will allow the U.S. Citizenship and Immigration Services (USCIS) to adjudicate H-1B petitions more quickly. This will ensure the United States can expand its workforce rapidly.

The J-1 visa is another tool that can enable the United States to quickly increase its clinician workforce. We recommend enacting the following policy changes:

- 1) Adjudicate J-1 waivers more quickly. It currently takes approximately 8 months from the time physicians file a waiver until the time a J-1 recipient can actually begin working.
- 2) Relax restrictions related to primary and secondary work sites. J-1 waiver physicians must work 160 hours at their primary facility. This makes it nearly impossible to empower hospital systems to shift these providers to hospitals and areas with the greatest need.
- 3) Relax requirements about the types of physicians (primary care vs. specialists) that can apply for a J-1 visa. Some states do not let specialists apply for a J-1 waiver, while other states limit the amount of the 30 available J-1 waivers to non-primary care physicians. This limits hospitalists that are employed by large groups to apply for J-1 waivers, as they are sometimes classified as specialists.

We ask that you act now to boost the flexibility of the healthcare workforce and provide some relief to those who are already over-extended in fighting this pandemic.

Sincerely,

A handwritten signature in black ink that reads "Danielle Scheurer MD". The signature is written in a cursive style with a large, prominent "D" at the beginning.

Danielle Scheurer, MD, MSCR, SFHM
President
Society of Hospital Medicine