Resolution: 1
(I-23)

Introduced by: International Medical Graduates Section
Subject: Addressing Work Requirements for J-1 Visa Waiver Physicians
Referred to: Reference Committee

Whereas, The J-1 visa serves as a non-immigrant exchange visitor visa, frequently utilized by International Medical Graduates (IMGs) seeking medical residency or fellowship training in the United States; and

Whereas, The J-1 visa permits individuals to remain in the U.S., typically for up to seven years, during the completion of their Graduate Medical Education (GME); and

Whereas, Upon fulfilling their GME, these individuals are mandated by U.S. immigration law to return to their home country for a minimum of two years before becoming eligible for an H-1B visa to re-enter and work in the United States, or for permanent residency; and

Whereas, J-1 physicians upon completing GME are confronted with two primary options: firstly, they can adhere to the two-year home residency requirement, or secondly, they can pursue a waiver of this obligation; and

Whereas, A J-1 visa waiver nullifies the two-year home residency prerequisite, granting physicians the ability to transition to H-1B visa status. In exchange, physicians commit to serving in federally designated Health Professional Shortage Areas (HPSAs), Medically Underserved Areas (MUAs), or among Medically Underserved Populations (MUPs). These physicians should dedicate three years to delivering safety-net services to indigent or underserved individuals, all while functioning under H-1B status. Common pathways for obtaining waivers include the Conrad 30 Waiver Program, the Appalachian Regional Commission (ARC), the Delta Regional Authority (DRA), and the Department of Health and Human Services (HHS) program; and

Whereas, For a waiver application, physicians must possess a full-time employment contract, involving at least 40 hours of work per week as a direct care physician; and

Whereas, The stringent requirement of 40 hours of direct patient care for physicians within the J-1 waiver program places a significant burden. Balancing patient care, essential administrative tasks, and professional growth becomes challenging within this demanding schedule. Physicians find themselves navigating the complexities of continuous patient care while also aiming to dedicate time to administrative responsibilities and pursue non-clinical leadership roles. This rigid structure hampers their ability to effectively deliver high-quality medical services while fostering their own professional progress; therefore, be it

RESOLVED, That the American Medical Association acknowledges that the requirement of 40
hours of direct patient care could impose a burden on IMG physicians and may hinder opportunities for professional growth (Directive to Take Action); and be it further,

RESOLVED, That the American Medical Association advocates for a revision in the J-1 waiver physician's requirement, proposing a transition to a comprehensive 40-hour work requirement that encompasses both direct clinical responsibilities and other professional activities. (Directive to Take Action)

Fiscal Note:

Received:

REFERENCES

2. J-1 Visa Waiver – U. S. Department of State: https://j1visawaiverrecommendation.state.gov/

RELEVANT AMA POLICY

None.