

AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution: 1
(I-23)

Introduced by: International Medical Graduates Section

Subject: Addressing Work Requirements for J-1 Visa Waiver Physicians

Referred to: Reference Committee

1 Whereas, The J-1 visa serves as a non-immigrant exchange visitor visa, frequently utilized by
2 International Medical Graduates (IMGs) seeking medical residency or fellowship training in the
3 United States; and
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5 Whereas, The J-1 visa permits individuals to remain in the U.S., typically for up to seven years,
6 during the completion of their Graduate Medical Education (GME); and
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8 Whereas, Upon fulfilling their GME, these individuals are mandated by U.S. immigration law to
9 return to their home country for a minimum of two years before becoming eligible for an H-1B
10 visa to re-enter and work in the United States, or for permanent residency; and
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12 Whereas, J-1 physicians upon completing GME are confronted with two primary options: firstly,
13 they can adhere to the two-year home residency requirement, or secondly, they can pursue a
14 waiver of this obligation; and
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16 Whereas, A J-1 visa waiver nullifies the two-year home residency prerequisite, granting
17 physicians the ability to transition to H-1B visa status. In exchange, physicians commit to
18 serving in federally designated Health Professional Shortage Areas (HPSAs), Medically
19 Underserved Areas (MUAs), or among Medically Underserved Populations (MUPs). These
20 physicians should dedicate three years to delivering safety-net services to indigent or
21 underserved individuals, all while functioning under H-1B status. Common pathways for
22 obtaining waivers include the Conrad 30 Waiver Program, the Appalachian Regional
23 Commission (ARC), the Delta Regional Authority (DRA), and the Department of Health and
24 Human Services (HHS) program; and
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26 Whereas, For a waiver application, physicians must possess a full-time employment contract,
27 involving at least 40 hours of work per week as a direct care physician; and
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29 Whereas, The stringent requirement of 40 hours of direct patient care for physicians within the
30 J-1 waiver program places a significant burden. Balancing patient care, essential administrative
31 tasks, and professional growth becomes challenging within this demanding schedule.
32 Physicians find themselves navigating the complexities of continuous patient care while also
33 aiming to dedicate time to administrative responsibilities and pursue non-clinical leadership
34 roles. This rigid structure hampers their ability to effectively deliver high-quality medical services
35 while fostering their own professional progress; therefore, be it
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37 RESOLVED, That the American Medical Association acknowledges that the requirement of 40

1 hours of direct patient care could impose a burden on IMG physicians and may hinder
2 opportunities for professional growth (Directive to Take Action); and be it further,
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4 RESOLVED, That the American Medical Association advocates for a revision in the J-1 waiver
5 physician's requirement, proposing a transition to a comprehensive 40-hour work requirement
6 that encompasses both direct clinical responsibilities and other professional activities. (Directive
7 to Take Action)

Fiscal Note:

Received:

REFERENCES

1. U.S. Department of State - Waiver of the Exchange Visitor Two-Year Home-Country Physical Presence Requirement: <https://travel.state.gov/content/travel/en/us-visas/study/exchange/waiver-of-the-exchange-visitor.html>
2. J-1 Visa Waiver – U. S. Department of State: <https://j1visawaiverrecommendation.state.gov/>
3. Conrad 30 Waiver Program – U. S. Citizen and Immigration Service (USCIS): <https://www.uscis.gov/working-in-the-united-states/students-and-exchange-visitors/conrad-30-waiver-program>
4. State Department's J-1 Visa Exchange Visitor Program – U. S. Department of State: <https://travel.state.gov/content/travel/en/us-visas/study/exchange.html>

RELEVANT AMA POLICY

None.