October 26, 2020

Chad F. Wolf
Acting Secretary
Department of Homeland Security
500 12th Street SW
Washington, DC 20536

SUBMITTED ELECTRONICALLY VIA http://www.regulations.gov

Re: Establishing a Fixed Time Period of Admission and an Extension of Stay Procedure for Nonimmigrant Academic Students, Exchange Visitors, and Representatives of Foreign Information Media (RIN 1653-AA78)

Dear Secretary Wolf:

The Society of General Internal Medicine (SGIM) appreciates the opportunity to provide comments on the Department of Homeland Security (DHS) proposed rule on “Establishing a Fixed Time Period of Admission and an Extension of Stay Procedure for Nonimmigrant Academic Students, Exchange Visitors, and Representatives of Foreign Information Media” that proposed to eliminate “duration of status” as an authorized period of stay. SGIM is a member-based medical association of more than 3,000 of the world’s leading academic general internists, who are dedicated to improving the access to care for all populations, eliminating health care disparities, and enhancing medical education. Our members are committed to delivering high quality care and ensuring patients have access to a well-trained physician workforce.

SGIM respectfully requests that DHS rescind its proposal, as it will lead to disruptions to patient access to care and the performance of biomedical research. The agency is proposing to limit the duration of initial admission for exchange visitors (J visas). Under the current system, visa holders in this category are allowed to remain in the U.S. for as long as the conditions of their admission are met. Under this proposed rule, J visa holders would be admitted for an initial fixed time period of only two to four years.

J-1 visas are utilized by medical residents, physicians, postdoctoral researchers, and graduate students each year who work and train in the U.S. If finalized the foreign national physicians and trainees with J-1 visa status, who typically need more than two to four years to complete their programs, will need to apply for visa extensions. Currently, processing of an extension through the United States Citizenship and Immigration Services (USCIS) may take up to 5 to 19 months for completion, and the alternative is processing the extension through a U.S. Consulate abroad, which forces physicians in training to travel internationally to visit the Consulate in their home country. Both methods to obtain an extension are extremely burdensome and could potentially lead to disruptions at hospitals across the nation if physicians are unable to return to the U.S. and continue their clinical duties, if any delays of processing an extension were to occur.
The J-1 classification makes it possible for medical professionals to provide essential health care services in our communities, particularly those that are rural and underserved. If finalized, this rule could potentially disrupt the training of more than 12,000 highly qualified J-1 foreign national physicians, who are currently in U.S. residency and fellowship training programs, and hamper their ability to provide health care services to patients at 750 teaching hospitals across the country. SGIM is concerned that this will result in severe disruptions to patient care across the nation, particularly during the COVID-19 public health emergency. Even before this emergency, there already were shortages of primary care physicians in the workforce. Fifty-one percent of J-1 physicians serve in primary care as general internists, pediatricians, and family medicine physicians and these physicians play essential roles in our teaching hospitals and to the health of our communities. This rule, if finalized, would disrupt J-1 physicians’ training and place additional burden on other physician trainees in their residency and fellowship programs, thereby negatively affecting the educational experience for all physicians in training.

Moreover, the current coronavirus crisis has revealed a dangerously overburdened health care system in the U.S. that is stretched beyond its limit. We are facing an unprecedented strain on resources, including a growing physician shortage that predates the pandemic. Several states have attempted to re-recruit retired physicians, hire previously unlicensed international medical graduates (IMGs), and rush medical students into action to support the rising number of COVID-19 cases. This rule, if finalized, will exacerbate the current workforce shortage and significantly decrease our ability to provide critically necessary medical care to Americans.

Thank you for the opportunity to provide these comments. If you have any questions or require additional information on any of our comments, please contact Michaela Hollis at mhollis@dc-crd.com.

Sincerely,

Jean S. Kutner, MD, MSPH
President, SGIM