



October 16, 2020

Chad Wolf
Acting Secretary
U.S. Department of Homeland Security
301 7th Street, SW
Washington, DC 20528

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 (DHS Docket No. ICEB-2019-0006)

Dear Acting Secretary Wolf:

The American College of Physicians (ACP) offers the following comments Proposed Rule, U.S. Immigration and Customs Enforcement (ICE) 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. As explained in more detail below, ACP believes that including physicians in the proposed rule will do great harm to medical care in the United States, is unnecessary, and should be modified to expressly exclude physicians. ACP is the largest medical specialty organization and the second-largest physician membership society in the United States. ACP members include 163,000 internal medicine physicians (internists) and related subspecialists including infectious diseases, pulmonary diseases, and critical care medicine. Internal medicine physicians are specialists who apply scientific knowledge and clinical expertise to the diagnosis, treatment, and compassionate care of adults across the spectrum from health to complex illness, including diagnostic evaluations, acute problem management, critical care, and long-term care for complex conditions. Internal medicine specialists are on the front lines of infection control, diagnosis, and treatment battling COVID-19 across the country. Internists treat many of the patients at greatest risk from COVID-19, including the elderly and patients with pre-existing conditions like diabetes, heart disease and asthma.

We strongly oppose the proposed rule change that would change the process to extend the period of authorized stay in the United States for certain categories of nonimmigrants by eliminating the long-standing "duration of status" and replacing it with a specific end date. Specifically, we urge you to exclude physicians in the Department of State's (DOS) Exchange Visitor Program in J-1 visa status from this rule change. We are greatly concerned that not doing so will have serious healthcare repercussions, especially as the U.S. tries to address the COVID-19 pandemic. We are seeing health systems threatened by staffing shortages every day as the pandemic spikes from region to region. Now is not the time to limit our healthcare workforce.

J-1 physicians training in the United States are an essential part of the U.S. health care system. Over 12,000 J-1 physicians train in more than 50 medical specialties and related subspecialties across the country. Before they enter U.S. training positions, these international medical graduates (IMGs) are assessed by the Educational Commission for Foreign Medical Graduates (ECFMG). ECFMG's rigorous program for certifying IMGs includes verification of the authenticity of medical education credentials, including medical diplomas, directly with the issuing medical schools. Only IMGs who are certified by ECFMG can enter U.S. GME programs. The J-1

physicians that would be affected by the proposed change have already been thoroughly vetted and are carefully monitored.

Earlier this year, the National Resident Matching Program placed 4,222 non-U.S. IMGs into training positions that started on July 1, 2020. For categorical internal medicine, 2,116 (25.4% of 8,324) matched spots were filled with non-U.S. IMGs. Many of these physicians join their U.S. training programs in J-1 visa status, as participants in the Exchange Visitor Program. The proposed rule change that replaces “duration of status” with a specific end date, and the additional requirement to apply through the U.S. government each year to extend this end date will present significant workforce challenges to our healthcare system. Since the majority of residency/fellowship contracts are issued only three to five months in advance of the July 1 start of each new academic year, the proposed change would result in significant delays, and do so on a recurring, annual basis. As a result, thousands of J-1 physicians would be unable to continue in their training programs on July 1 each year.

A vastly larger number of IMGs are currently serving on the front lines of U.S. healthcare, both under J-1 and H-1B training visas and in other forms. These physicians serve an integral role in the delivery of health care in the United States. IMGs provide health care for underserved populations in the United States and are often more willing than their U.S. medical graduate counterparts to practice in remote, rural areas. In addition, adherence to care improves when patients experience greater comfort and higher levels of patient satisfaction with care from physicians “who look like them.” This element of diversity to the physician workforce is helpful and necessary to the health care for an increasingly diverse patient population. During this pandemic the non-U.S. IMG role is even more critical to care for the thousands of patients battling COVID-19.

The proposed change to the “duration of status” model will impact more than 12,000 physicians nationwide and jeopardize the delivery of patient care in the United States. It is also unnecessary for J-1 physicians as it will not accomplish its stated goal of reducing visa overstays since these individuals are already a tightly monitored cohort. We appreciate the opportunity to comment on this proposed rule and urge you to exclude physicians from such a proposal. If you have any questions, please contact Renee Butkus, Director Health Policy at rbutkus@acponline.org.

Sincerely,

A handwritten signature in black ink that reads "Jacqueline W. Fincher MD". The signature is written in a cursive, flowing style.

Jacqueline W. Fincher, MD, MACP
President