



May 13, 2020

The Honorable David Perdue
United States Senate
455 Russell Senate Office Building
Washington DC 20510

The Honorable Todd Young
United States Senate
185 Dirksen Senate Office Building
Washington DC 20510

The Honorable John Cornyn
United States Senate
517 Hart Senate Office Building
Washington DC 20510

The Honorable Dick Durbin
United States Senate
711 Hart Senate Office Building
Washington DC 20510

The Honorable Chris Coons
United States Senate
218 Russell Senate Office Building
Washington DC 20510

The Honorable Patrick Leahy
United States Senate
437 Russell Senate Office Building
Washington DC 20510

Dear Senators Perdue, Young, Cornyn, Durbin, Coons and Leahy:

On behalf of the American Academy of Family Physicians (AAFP), which represents 136,700 family physicians and medical students across the country, I write to share our organization's support for your legislation, the *Healthcare Workforce Resilience Act* (S. 3599). This legislation is a good, incremental, step to address an immediate need presented by the COVID-19 pandemic.

As the nation's largest primary care organization, our members provide care to more than 190 million patients annually. Family physicians are acutely aware of the current shortage of primary care physicians across the country and the important role International Medical Graduates (IMGs) play in addressing this shortage. Particularly during the COVID-19 crisis, the ability to recapture 15,000 unused employment-based physician immigrant visas from prior fiscal years would enable our U.S. physicians to have the support they need and our U.S. patients to have the care they deserve.

IMGs play a vital role in caring for some of the most vulnerable populations in the U.S. For example, foreign-trained physicians are more likely than U.S.-trained physicians to practice in lower-income and disadvantaged communities. As such, nearly 21 million Americans live in areas of the U.S. where foreign-trained physicians account for at least half of all physicians. Furthermore, over the past 10 years, more than 10,000 IMGs practicing through J-1 visa waivers have worked in underserved communities. By increasing the number of visas available to IMGs these vulnerable populations will be better served and the overall health care system will be bolstered.

AAFP also believes that Congress must reauthorize the broader, valuable Conrad 30 J-1 visa waiver program to help alleviate ongoing physician shortages and ensure the long-term health care needs of

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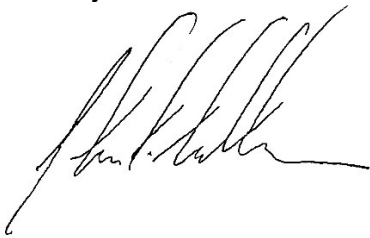
communities across our country are met. We are encouraged by your introduction of S. 3599 and urge Congress to also take action this year to reauthorize and improve the Conrad 30 program.

Currently, resident physicians from other countries working in the U.S. on J-1 visa waivers are required to return to their home country after their residency has ended for two years before they can apply for another visa or green card. The Conrad 30 program allows these physicians to remain in the U.S. without having to return home if they agree to practice in an underserved area for three years. Many communities, including rural and low-income urban districts, have problems meeting their patient care needs and depend on the physicians in this program to provide health care services. With communities across the country facing physician shortages, the Conrad 30 program ensures that physicians who are often educated and trained in the U.S. can continue to provide care for patients during the COVID-19 crisis and beyond. The AAFP strongly supports legislation introduced last year, the *Conrad State 30 & Physician Access Act* (S. 948) that would reauthorize the J-1 visa waiver program for an additional three years, protecting patient access to care in medically underserved areas.

It is unacceptable that thousands of doctors currently working in the U.S. on temporary visas are stuck in the green card backlog, putting their futures in jeopardy and limiting their ability to contribute to the fight against COVID-19. Your bipartisan, targeted, and timely legislation, along with reauthorizing and strengthening the Conrad 30 program, will strengthen our health care workforce and improve health care access for Americans in the midst of the COVID-19 pandemic and in the future.

We are pleased to support this important legislation.

Sincerely,



John Cullen, MD
Board Chair

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