

LOUISIANA CONRAD 30/J-1 VISA WAIVER PROGRAM



PROGRAM POLICY AND GUIDANCE

2021



TABLE OF CONTENTS

Contact Information	3
Program Manager	3
Program Coordinator	3
Mailing Address	3
Program Overview	4
Program Terms	5
Practice Site Approval	7
Submission of the Application Packet	8
Support of a J-1 Visa Physician	9
Priority Criteria	9
Responsibilities of the Bureau	9
Responsibilities of the Physician/Employer Following J-1 Visa Waiver Approval	9
External Documents	0

Updates to Document

Date	Page Number	Change Made
12/3/2019	Page 7	In section "Responsibilities of the Physician/Employer Following J-
		1 Visa Waiver Approval", added requirement of completion of Exit
		Interview process.



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PROGRAM OVERVIEW

The **Louisiana Department of Health (LDH)** is committed to assuring that all Louisiana residents have access to quality affordable health care. The **Louisiana Conrad 30/J-1 Visa Waiver Program (Waiver Program)** is a state and federal partnership that sponsors international medical graduates who agree to practice in underserved areas for a minimum of three years after completing their residency. To assist residents in accessing the program:

- 1. LDH has given the Bureau of Chronic Disease Prevention and Healthcare Access (Bureau) the responsibility within the state of recommending and processing J-1 visa waiver requests for participation in the Waiver Program.
- 2. The United States Department of State (US DOS) and the United States Citizenship and Immigration Services (USCIS) both recognize the Director and the Louisiana Primary Care Officer of the **Bureau** as the persons with authority to sign letters of support which indicate that the **Bureau** is acting as an Interested Government Agency (IGA) for the J-1 visa waiver request application being submitted for approval.
- 3. The primary purpose of the **Waiver Program** is to improve access to primary health services in Health Professional Shortage Areas (HPSAs) where there is a shortage of physicians, and secondarily, to improve access to needed specialty care.
- 4. The state of Louisiana recognizes that the Waiver Program affords J-1 visa physicians the opportunity of waiving their two-year return home requirement in exchange for providing primary and/or specialty medical care in designated primary care HPSA or to residents of designated HPSAs for a period of at least three years.
- 5. The operation of the **Waiver Program** is designed to be consistent with other health care programs and policies of the state of Louisiana. Policy guidelines will be the same for all sites, rural or urban, seeking support though the Waiver Program.
- 6. The **Waiver Program** is a separate and distinct program from any other programs intended for physicians holding J-1 visas now operating within the state of Louisiana, such as the Delta Regional Authority and the United States Department of Health and Human Services programs.
- 7. LDH's participation in and guidelines for the Waiver Program are completely discretionary and voluntary and may be modified or terminated at any time. The submission of a completed waiver request application packet to the Bureau does not ensure an automatic letter of support for a J-1 visa waiver. In all instances, LDH reserves the right to support or deny support for any request.



PROGRAM TERMS

In order to better understand the following policy, the term "Conrad 30 physician" is defined as a non-resident alien (foreign medical graduate [FMG]) who came to the United States to complete a residency/fellowship training program. The J-1 visa requires that the physician returns to their home country for two years before returning to the United States to live or work. The J-1 visa waiver eliminates this two-year return home requirement and allows the physician to adjust his/her visa status to an H-1B visa, which is a temporary work permit, in order to provide services to underserved citizens for at least three years.

NOTE: The waiver of the two-year return home requirement is not a visa and is only one step in a multi-step process.

The terms "Conrad 30 physician" and "J-1 visa waiver physician" are sometimes used interchangeably; however, for the purposes of this policy, the J-1 visa waiver physicians mentioned herein are those applying for a letter of support from the **Bureau** for their J-1 visa waiver request application, or ones who have been approved for this waiver and who are participating in the **Waiver Program** at this time.

The term "primary care physician" is defined as a physician practicing one of the following specialties for at least 80% of their clinical work hours: pediatrics, obstetrics/gynecology, internal medicine, geriatrics, and family practice. If the physician has other sub-specialty patients, they will receive services no more than 20% of the physician's clinical service hours or that physician will be considered a "specialist physician" for the purposes of this program.

The term "specialist physician" shall be defined as all physicians practicing specialties not defined as primary care above. As is the case for any J-1 visa waiver physician, specialists may participate in the **Waiver Program** following a letter of support from **LDH** and final approval from US DOS and USCIS. After a review of the area's need as established in the **Specialist Dire Need Criteria form**, **LDH** will support specialist physicians to the area only if the need is considered to be sufficient to warrant such a placement. From October 1st through December 31st, there will be <u>six slots reserved for specialist physicians</u>. As of January 1st, any remaining slots will be supported on a first-come, first-served basis after it is determined that the packet is complete and meets all program requirements/guidelines. Complete, qualifying packets will be supported based on a first-come, first-served basis, regardless of whether or not it is the request of a specialist or primary care physician. The **Waiver Program** will support J-1 visa psychiatrists if they are practicing in mental health shortage areas at sites which meet all other program criteria. US DOS and USCIS must approve these placements like any other J-1 visa waiver applicant.

The term "Health Professional Shortage Area (HPSA)" is defined in Section 332 of the Public Health Service Act, which provides that the United States Secretary of Health and Human Services shall designate HPSAs based on criteria established by regulation. HPSAs are defined in section 322 to include (1) urban and rural geographic areas, (2) population groups, and (3) facilities with shortages of primary health care and mental health providers. Dental HPSAs will not apply in the **Waiver Program**. There are <u>10 slots available each year to practices in non-designated HPSAs</u> provided that the physician's work site can provide documentation that at least 30% of their patient-base resides in designated HPSAs of the appropriate type. These are referred to as FLEX slots. To determine if the area where the physician will work is in a designated HPSA, click on: <u>http://hpsafind.hrsa.gov/</u>. The site must submit a **FLEX (Non-HPSA) Support Request Form** with requested documentation and be approved prior to submission of the waiver application packet.

The term "Medically Underserved Areas/Populations (MUA/P)" are areas or populations designated by HRSA as having too few primary care providers, high infant mortality, high poverty or a high elderly population. Health

Professional Shortage Areas (HPSAs) are designated by HRSA as having shortages of primary medical care, dental or mental health providers and may be geographic (a county or service area), population (e.g. low income or Medicaid eligible) or facilities (e.g. federally qualified health center or other state or federal prisons).

The term "employer/practice site" is defined as a practice site/employer/service location eligible to employ a J-1 visa physicians through the **Waiver Program**.

The term "group practice" is defined in this policy as a practice location where more than one physician provides health care services on a routine basis. All physicians of the group practice must accept Medicare, Medicaid, and Uninsured/Underinsured sliding fee scale patients, regardless of whether or not they are of the same specialty type as the **Waiver Program** physician.



PRACTICE SITE APPROVAL

All employers and practice site locations must complete the **Site Information Form**. If the site is different from the employer, they must also submit a **Site Information Form**. The site must have the following in place at the time of submission of the **Site Information Form**.

- A written policy on letterhead that states the site accepts all patients regardless of their ability to pay, as well as a sign posted in the waiting room informing all patients of this policy;
- A sliding fee schedule, charity care or indigent-care policy for uninsured/ underinsured patients who are at or below 200% of the most current federal poverty level;
- Proof of provision of services to Medicare and Medicaid patients (e.g. a written policy).

The **Site Information Form** should document that a minimum of 30% of the following patient types were treated by the site in the previous year:

- Medicaid patients,
- Medicare patients,
- Uninsured/underinsured patients who were eligible for reduced fees under application of the sliding fee scale/indigent-care policy, AND
- Total patients treated and number of visits to the site during the year.

NOTE: All physicians and practice groups and/or services at the practice site must accept all of these patient types.

All new sites will receive an unannounced site visit prior to practice site approval. Any issues arising from any site visit must be addressed by the point of contact as necessary to resolve these issues. Approved sites will remain in and "approved" status for a three-year period from the date of approval.

As of the date of the submission of an application requesting participation in the **Waiver Program**, the practice site must be located in an area designated by the HRSA Shortage Designation Branch as a primary care HPSA, or mental health HPSA in the case of psychiatrists seeking program participation, or MUA, or the applicant must provide documentation that the site serves residents of a nearby HPSA. Documentation is considered proof that their patient base for the last year has been comprised of at least 30% of residents from a designated HPSA, of the appropriate type. The appropriate type means that primary care HPSAs are reviewed for primary care sites and mental health HPSAs are reviewed for mental health sites. In order to document that the site meets the criteria, the site must include information regarding their patient base numbers, by patients' zip codes, payer type (Medicare, Medicaid, uninsured) and the HPSAs served. This will be done by completing the FLEX (Non-HPSA) Request Form.



SUBMISSION OF THE APPLICATION PACKET

All applicants of the Waiver Program MUST be represented by a board-certified attorney. The Bureau will work closely with the attorney to ensure application packets are completed accurately and timely.

Once a J-1 physician has been hired by an employer/site and an employment contract has been signed, a completed **Waiver Program** Application Packet can be submitted to the **Bureau**.

Submission of a complete Application Packet will hold a slot for this physician while the packet is under review. If the packet is deemed to be incomplete or if changes are deemed to be needed following the review by the **Waiver Program** Review Committee members, the point of contact for the packet, i.e., the physician/the attorney/the employer, will be notified of its incomplete and/or incorrect status in order for the packet to be completed or corrected as necessary. In the event that the errors or incomplete sections are found to be too numerous or excessive, the packet will be returned to the point of contact as appropriate for correction and resubmission. In the event that the packet is deemed to be incorrect and/or incomplete per this policy, the packet will be placed "on hold," until it is corrected and/or completed.

The initial check of the application packet for completed documentation will be completed in a timely manner following receipt. If the packet is not complete, or does not meet program criteria at the time of this review, the point of contact will be notified in writing regarding the deficiencies and/or issues which need to be corrected/addressed. Subsequent review of the packet will be completed by the remaining members of the **Waiver Program** Review Committee. The Application Packet will be evaluated for support by the **Bureau** only when they are fully completed. The Bureau will make the determination about whether or not to support the physician's waiver request application within 45 days after the packet is deemed to be <u>complete</u> with all issues resolved.

The **Bureau** will accept support applications from October 1st through March 31st, ten of the available **Waiver Program** slots will be open to sub-specialists and specialists. If slots have not been filled as of January 1st, the remaining slots for that J-1 year will be open to all positions (specialist or primary care) on a first-come, firstserved basis.

Employers may request support for three (3) physicians per J-1 year, per service location, until January 1st. If there are remaining **Waiver Program** slots at that time, additional requests may be submitted.



SUPPORT OF A J-1 VISA PHYSICIAN

Priority Criteria

The **Bureau** will review the J-1 physician's Application Packet to determine if a letter of support can be signed for the physician holding a J-1 visa using the following priorities/considerations:

- 1. Priority will be given to physicians who agree to serve in HPSAs with the highest degree of shortage and whose service will have the greatest impact on underserved populations.
- 2. Priority will be given to J-1 physicians who have completed their residency/fellowship in a Louisiana residency/fellowship program.
- 3. Priority will be given to correctly completed packets over incomplete/incorrect ones.

Responsibilities of the Bureau

The Bureau must:

- 1. Verify that the practice site is located in a designed HPSA/MUA as determined by the U.S. Secretary of Health and Human Services (per federal regulations) or that the practice is serving residents of a HPSA/MUA;
- 2. Verify that the employer has an active practice site, i.e., one which is open at least 40 hours a week. For newly opened practices, the **Bureau** will verify that the site has been opened at least one year, has implemented a sliding fee scale/indigent care policy, and has complied all other criteria as required by and reported to the **Bureau**. The sliding fee scale/indigent care policy, including posted signage announcing it, must be implemented and in effect at least 90 days prior to the submission of the J-1 visa waiver support request application packet to the **Bureau**;
- 3. Assist the applicant and their attorney with other forms that may be required for the physician or the physician's family members as needed;
- 4. Submit the completed application packet requesting that a J-1 visa waiver be approved to the appropriate federal government agency on behalf of the physician including a letter of support from the **Bureau** acting as an IGA supporting this **Waiver Program** support request application packet; AND
- 5. Complete all site visits as required prior to issuing a letter of support and as the physician completes his/her J-1 visa waiver obligation to ensure program compliance by all parties.

Responsibilities of the Physician/Employer Following J-1 Visa Waiver Approval

The physician/employer must:

1. Provide the **Bureau** with a **Quarterly Service Report** after the physician has obtained their H1-B visa and begins working. Reports are based on the federal fiscal year and submitted by email.

Report Submission Schedule			
Quarter	Due Date		
Quarter 1: October 1-December 31	January 31		
Quarter 2: January 1-March 31	April 30		
Quarter 3: April 1-June 30	July 31		
Quarter 4: July 1-September 30	October 31		

2. Participate in a 3 Month Pre-Exit Interview conducted using an on-line surveying tool.

3. Participate in a 6 Month Post-Exit Interview conducted using an on-line surveying tool.

NOTE: Failure to provide Quarterly Reports and complete the exit interview process in a timely manner will jeopardize future **Waiver Program** support for this practice site and may result in an out of compliance report for the J-1 visa waiver physician to the federal government.



EXTERNAL DOCUMENTS

The following is a list of all documents mentioned within this policy/guideline and others needed to complete the application packet. These documents are external from this policy/guideline.

- **0. Application Packet Directions**
- **1. Site Information Form**
- 2. Application Packet Checklist
- 3. FLEX (Non-HPSA) Support Request Form
- Physician Statement
- 5. Physician Attestation
- 6. Criteria for Support by the State of Louisiana
- 7. Specialty Dire Need Criteria Form
- 8. Quarterly Service Report

