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February 17, 2022

The Honorable Zoe Lofgren
Subcommittee on Immigration and Citizenship
House Committee on the Judiciary
Washington, DC 20515

The Honorable Tom McClintock
Subcommittee on Immigration and Citizenship
House Committee on the Judiciary
Washington, DC 20515

Statement for the Record on “Is There a Doctor in the House? The Role of Immigrant Physicians in the U.S. Healthcare System”

Dear Chair Lofgren and Ranking Member McClintock:

The American Academy of Neurology (AAN), the world’s largest association of neurologists representing over 38,000 professionals, is strongly committed to improving the care and outcomes of persons with neurologic illness in a cost-effective manner. One in six people lives with a brain or nervous system condition, including Alzheimer’s disease, Parkinson’s disease, stroke, epilepsy, traumatic brain injury, ALS, multiple sclerosis, and headache.

The AAN thanks the House Committee on the Judiciary Subcommittee on Immigration and Citizenship for hosting the upcoming hearing titled “Is There a Doctor in the House? The Role of Immigrant Physicians in the U.S. Healthcare System.” The AAN strongly supports strengthening the health care workforce by utilizing the skills of immigrant physicians who completed their training in the United States to assist in the growing shortage.

The United States is facing a shortage of between 54,100 and 139,000 physicians by 2034 that will likely be exacerbated by rising rates of physician burnout and early retirement due to the COVID-19 pandemic.¹ Now, more than ever, it is critical that we ensure our nation’s health care workforce can meet the needs of the American people. Additionally, as the significant impacts of Long COVID for millions of Americans are emerging, having a sufficient workforce to address the additional demand for neurologic care is critical. According to a recent study, one-third of patients diagnosed with COVID-19 may develop psychiatric or neurologic disorders within six months, including depression, anxiety, strokes, and dementia.² That same study found that among COVID-19 patients admitted to an intensive care unit (ICU),

¹ <https://www.aamc.org/news-insights/press-releases/aamc-report-reinforces-mounting-physician-shortage>

²

https://journals.lww.com/neurotodayonline/Fulltext/2021/06030/6_Months_After_COVID_19_Infection,_1_in_3_Develop.4.aspx

the incidence of developing a psychiatric or neurologic disorder increased to 46%. Given the magnitude of COVID-19 cases across the US, the impact of neurologic symptoms is likely enormous, making the need for neurologists ever-growing.

Furthermore, the population of the United States is also expected to grow by 10.6% by 2034, with a 42.4% increase of individuals aged 65 years and older, and a 74% increase of individuals aged 75 years and older. As life expectancy continues to rise, more Americans will develop chronic neurologic conditions such as Parkinson's disease, dementia, and Alzheimer's disease, which require specialized care.

The Conrad State 30 and Physician Access Reauthorization Act

International medical graduates (IMGs) are an important part of the US neurology workforce, with 31.5% of active neurologists being IMGs. However non-US IMG resident physicians training in the US on J-1 visas are required to return to their home country for two years after their residency has ended before they can apply for a work visa or green card. The Conrad 30 program provides 30 waivers per state to allow these physicians to remain in the US without having to return home for two years if they agree to practice in a medically underserved area for three years. With communities across the country facing physician shortages, the Conrad 30 program helps physicians who are educated and trained in the US continue to care for patients. We encourage the Subcommittee to advance **The Conrad State 30 and Physician Access Reauthorization Act (S. 1810/ H.R. 3541)**, which would reauthorize the Conrad 30 program for an additional three years, as well as make several key improvements to the program, including creating a process to gradually increase the number of waivers while requiring additional employment protections.

Healthcare Workforce Resilience Act

The AAN also encourages the Subcommittee to review the **Healthcare Workforce Resilience Act (S. 1024/ H.R. 2255)**, a bill that would reallocate 15,000 visas for foreign-born physicians and 25,000 visas for foreign-born nurses to practice in the United States. The Healthcare Workforce Resilience Act would provide much-needed stability to foreign-born physicians already practicing in the United States who are stymied by the green card backlog due to per country caps. According to one AAN member from India who has worked in an underserved area of Tennessee, based on "current wait times, it may take several decades for me to get a green card. Due to my visa status, me and my family face significant uncertainties regarding work and life in America." These qualified health professionals, including neurologists, will help fill shortages as our nation's health systems continue their "all hands-on deck" response to COVID-19. In addition, these highly trained medical professionals will provide life-saving care in many of our nation's underserved communities.

In conclusion, the AAN thanks you for your leadership on these important issues. If you have any questions or require additional information, please do not hesitate to contact Derek Brandt, Director of Congressional Affairs at dbrandt@aan.com or Fred Essis, Congressional Affairs Manager at fessis@aan.com. We look forward to working with you as we all strive to improve access to timely care for all Americans with neurologic conditions.

Sincerely,



Orly Avitzur, MD, MBA, FAAN
President, American Academy of Neurology