Help on the Horizon to Fill Physician Workforce Shortages? 4 Steps Hospitals Can Take to Plan Now

Healthcare organizations have resorted to mining all available resources to meet patient care demands. Prior to the COVID-19 public health emergency (PHE), many healthcare professionals were already in short supply. An aging population, a maturing physician workforce, and highly coveted residency slots, among other considerations, converged to create significant challenges, even for those organizations with the most contemporaneous provider needs assessments and recruiting strategies. Adding clinician burnout (already labeled an epidemic among providers by the American Medical Association) and a PHE to the mix has further complicated the situation.

Fortunately, new resources may be on the horizon. Chief among those resources is the Healthcare Workforce Resilience Act (HWRA), introduced in the U.S. Senate (S. 3599) May 5, 2020. The HWRA seeks to address workforce shortages during the global pandemic by expediting the recapture of unused employment-based immigrant visas. Furthermore, the U.S. House of Representatives introduced the Health Heroes 2020 Act (HH2A) May 1, 2020, requesting additional funding to be allocated for scholarships and loan forgiveness for participating select healthcare professionals working in healthcare shortage areas.

Proposed Visa Legislation

If a non-native healthcare provider does not already possess a green card or U.S. citizenship, he or she must apply for a visa. The most common type of immigrant visas for working professionals are employment-based visas, which are made up of five priority levels (generally based on education and work experience). Foreign-born or foreign-trained physicians are also able to apply for a physician National Interest Waiver (NIW), which is still an employment-based visa with several exceptions.

NIWs do not require employer sponsorship (unlike an H1-B visa) and are not based on employment preferences (i.e., do not follow the same criteria as the traditional five-tiered employment-based visa petitions). Primary care physicians (i.e., family practitioners, general practitioners, internists, pediatricians, obstetricians/gynecologists, or psychiatrists) can apply for this waiver in exchange for agreeing to a five-year term practicing in a health professional shortage area (HPSA), a Veterans Affairs facility, or a medically underserved area (although the term does not have to be within the same area, but a new petition must be filed when relocating). This type of waiver adds an additional benefit to meeting provider deficits since rural areas are the most affected by the shortage of primary care
The proposed legislation would permit providers with approved immigrant visas to adjust their status (i.e., apply for a green card for permanent resident status) to assist during the PHE, as well as allow for the entry of nurses with approved immigrant visas. Specifically, the bill calls for up to 40,000 unused visas, with 15,000 allocated for physicians and 25,000 allocated for nursing professionals, noting that the recaptured unused visas would not be counted under the current national employment-based visa country caps.

Further, the HWRA would create an expedited process (i.e., within 15 days) and waive the additional premium processing fee (currently set at $1,440 as of December 2019). The filing period for the recaptured visas would be limited to 90 days after the end of the PHE declaration. Employers would need to attest that job offers to immigrants will not displace an American physician or nurse. Responsibility for expediting the processing of the recaptured visas would fall to the Department of Homeland Security and the State Department.

**Proposed Legislative Loan Relief for Healthcare Professionals**

Other legislation has been proposed to financially assist healthcare professionals, primarily in the form of loan repayments and scholarships. HH2A provides for an additional $15 billion in funding during fiscal year (FY) 2020 for the National Health Service Corps (NHSC) Scholarship Program to ensure an adequate supply of physicians, dentists, behavioral and mental health professionals, certified nurse midwives, certified nurse practitioners, and physician assistants.

HH2A also calls for an additional $10 billion in funding requested for the NHSC Loan Repayment Program during FY 2020. Under this program, a healthcare professional may receive loan forgiveness in exchange for serving in a designated HPSA for a specified period of time. During times of national emergency, participating healthcare professionals may also voluntarily elect to provide these services in other designated areas of need, under direction of the Secretary of the Department of Health and Human Services.

**Be Prepared**

Pending passage of the HWRA and the HH2A, hospitals and other healthcare institutions should prepare for the potential need of additional healthcare professionals now and post-pandemic.

1. **Critically assess your current provider complement.** A comprehensive understanding of current provider supply and demand is an essential first step in outlining current, immediate, and long-term provider needs.
   - Complete and/or update your provider needs assessment to identify specialties or areas of care that show a deficit.
   - Evaluate providers with near-term retirements.
   - Understand the impact of advanced practice providers, such as nurse practitioners and physician assistants, on provider supply.
   - Consider other adjustments in certain situations, such as when physicians maintain significant administrative responsibilities.

2. **Enlist additional qualified healthcare professionals when and where possible.** Several states have advocated for the early graduation of final-year medical students, under the guidelines of the Liaison Committee of Medical Education for the American Medical Association.
and Association of American Medical Colleges. Hospitals and academic medical centers can temporarily reallocate certain residents and fellows to aid in primary, emergency, and critical care departments, if needed. At this time, most states have enacted executive actions to allow temporary licensure for out-of-state physicians and nurses to practice, as well as have waived professional fees and continuing education requirements for retired healthcare professionals to return to work during a PHE.

3. **Determine if you are a non-participating institution in a qualified HPSA.** Non-participating NHSC-eligible institutions in qualified HPSAs can apply to become participating sites to partake in the proposed loan repayment opportunities afforded by the pending HH2A. Eligible sites include, but are not limited to, Indian Health Service Facilities, critical access hospitals, state and local health departments, certain private practices, Federally Qualified Health Centers (FQHC) and look-alike FQHCs, mental health centers, substance abuse and free clinics, and state and federal correctional institutions. The National Health Service Corps Site’s Reference Guide details site eligibility requirements, the application and recertification process, site roles and responsibilities, as well as resources for recruiting a National Health Service Corps participant.

4. **Collaborate with internal recruiters or third-party staffing companies.** Work with internal recruiters and human resources personnel or third-party staffing companies to prepare for and potentially seek newly granted work visas for physicians and nurses (pending the passage of the HWRA) to fulfill identified specialty or subspecialty deficits. Third-party staffing companies may possess greater access to candidate pools and are well-positioned to provide qualified temporary physician and nursing staff until more permanent candidates can be identified. These companies can also reduce the burden for internal human resources personnel, allowing them to concentrate their efforts where needed most during the PHE.

PYA will continue to monitor the progression of these bills in Congress and will frequently provide updates that include additional guidance and resources to take advantage of these opportunities in recruiting additional healthcare professionals.

If you would like assistance and guidance related to pending legislation, or for other COVID-19 guidance, visit PYA’s COVID-19 hub, or contact one of our PYA executives below at (800) 270-9629.