

**Comment from the Coalition for Physician Accountability on DHS Proposed Rule:
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 (ICEB-2025-0001)**

DHS Docket No. ICEB-2025-0001

Dear Secretary of Homeland Security,

The Coalition for Physician Accountability—a group representing national organizations responsible for the oversight, education and assessment of medical students and physicians throughout their medical careers—appreciates the opportunity to express concern regarding the U.S. Department of Homeland Security’s (DHS) recent proposed rule to eliminate “duration of status” (DS) as an authorized period of stay for certain nonimmigrant visa holders, including J-1 physicians. We feel obliged to highlight how this action may negatively impact physician training, access to health care, and quality of care in the U.S.

Background and Current System

International Medical Graduates (IMGs) make up a significant proportion (23%) of the U.S. licensed physician workforce and play an essential role in serving patients in rural/underserved areas.

For more than three decades, Intealth (previously ECFMG, a division of Intealth served as the sponsor) has sponsored J-1 physicians for the duration of their residency or fellowship programs, up to a maximum of seven years. Sponsorship is granted in one-year increments, generally consistent with the academic year in medicine. This structure ensures that physicians are making appropriate progress in training, meeting milestones, remaining in good standing with their programs, and fulfilling all requirements for renewal. The Duration of Status (D/S) model allows for this annual renewal process while ensuring continuity in medical education and patient care. It also provides the flexibility to accommodate extensions for remediation, medical or parental leave, and board examinations without disruption or the need for separate, time-consuming U.S. Citizenship and Immigration Services (USCIS) Extension of Status (EOS) filings. The annual vetting

process further strengthens accountability and provides important assurances to all stakeholders.

Concerns Regarding the DHS Proposed Rule

The new proposed rule would replace D/S with a specific end date tied to the J-1 physician's contract, with admitted time capped at four years. Any extension(s) beyond the originally admitted time period would require an extension of status to USCIS. We strongly advise against this approach for several reasons:

- **Training Interruptions and Administrative Burdens:** The recurring need to file with USCIS for status extensions introduces delays due to unpredictable processing times (historically ranging up to 19 months). These delays could force J-1 physicians to pause or even withdraw from training, disrupting critical clinical programs and jeopardizing patient care during a period of physician workforce shortages.
- **Loss of Flexibility:** Residency training programs routinely require extension of the training period to accommodate approved leaves of absence and/or the need for additional training time. The proposed rule would convert these educational adjustments into immigration events, adding unnecessary risk and uncertainty for trainees and hospitals.
- **Access to Care:** Physicians-in-training provide a significant proportion of patient care at U.S. teaching hospitals. Disruptions to residents' availability to care for patients can undermine the continuity of care for many patients and devastate health facilities already facing staffing shortages. Loss of access to medical care for patients in rural and underserved areas would be particularly severe since a large proportion of physicians in training in these areas are J-1 visa holders.
- **Redundant Oversight:** J-1 physicians are closely monitored through Intealth, ACGME-accredited programs, and reporting in the Student and Exchange Visitor Information System (SEVIS), ensuring compliance and program integrity. The new rule would duplicate oversight without improving compliance or accountability.
- **Threats to Patient Care Continuity:** International physicians provide vital services in teaching hospitals and underserved regions. Interruptions in their ability to remain and train undermine continuity of care and threaten hospital workforce planning.
- **Distinct Needs of Physicians:** Physicians differ substantively from other J-1 categories owing to intensive oversight, programmatic structure, and essential service to the health care system.

- **J-1 Physicians are Among the Most Vetted Visa Holders:** J-1 physicians are thoroughly vetted before they begin training and continuously monitored throughout their programs. Before sponsorship is granted, Intealth verifies each physician's medical education credentials, English language proficiency, licensure eligibility, and compliance with federal visa requirements. Once in training, J-1 physicians undergo annual review as part of the sponsorship renewal process, which requires confirmation of good standing, satisfactory progress toward educational milestones, adherence to program and visa rules, and SEVIS reporting. Training institutions also provide detailed evaluations of performance and professionalism, and all J-1 physicians train under the close supervision of faculty. This layered vetting and oversight ensures that J-1 physicians are well-qualified to provide safe, high-quality care while advancing toward the competencies required for independent medical practice.

Recommendations

Given these factors, the Coalition for Physician Accountability urges DHS to:

- **Preserve Duration of Status for J-1 Physicians:** Maintain the established system which has served U.S. health care needs and protected patient care for decades.
- **If Changes Proceed, Provide an Exception for Physicians:** Should DHS finalize the rule, we respectfully urge an exemption for J-1 physicians, allowing admission for the full duration of their approved training as indicated on the DS-2019—without a four-year cap or routine USCIS filings for educational adjustments.
- **Engage with the Medical Education Community:** Consult with organizations involved in physician training and oversight, to ensure any regulatory changes reflect operational realities and protect the nation's ability to train future health care professionals.

We are Here to Help

As organizations involved in physician training and oversight, we are available to discuss these issues and/or provide additional information. We want to work with you to help ensure that regulatory changes reflect operational realities and promote uninterrupted medical training and continuous high-quality patient care.

Thank you for considering our recommendations for this important physician workforce issue.

Sincerely,

Members of the Coalition for Physician Accountability

AAMC

Accreditation Council for Continuing Medical Education (ACCME)

Accreditation Council for Graduate Medical Education (ACGME)

American Association of Colleges of Osteopathic Medicine (AACOM)

American Board of Medical Specialties (ABMS)

American Medical Association (AMA)

American Osteopathic Association (AOA)

Council of Medical Specialty Societies (CMSS)

Federation of State Medical Boards (FSMB)

Intealth

Liaison Committee on Medical Education (LCME)

National Board of Osteopathic Medical Examiners (NBOME)

National Resident Matching Program (NRMP)

NBME

About the Coalition for Physician Accountability

The Coalition for Physician Accountability is a membership organization designed to advance health care and promote professional accountability by improving the quality, efficiency, and continuity of the education, training, and assessment of physicians.

Founded in 2011, current membership consists of senior leadership and governance representatives from the Association of American Medical Colleges (AAMC), American Association of Colleges of Osteopathic Medicine (AACOM), American Board of Medical Specialties (ABMS), Accreditation Council for Continuing Medical Education (ACCME), Accreditation Council for Graduate Medical Education (ACGME), American Medical Association (AMA), American Osteopathic Association (AOA), Intealth comprising Educational Commission for Foreign Medical Graduates and Foundation for Advancement of International Medical Education and Research (ECFMG®|FAIMER®), Federation of State

Medical Boards (FSMB), Liaison Committee on Medical Education (LCME), NBME, National Board of Osteopathic Medical Examiners (NBOME) and the National Resident Matching Program® (NRMP®). In addition, the Joint Commission and the Council of Medical Specialty Societies (CMSS) serve as liaison members. The Coalition also appoints public members to its membership to ensure adequate representation of the public voice in the deliberations of the Coalition.