

J-1 Visa Waiver Guidance

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Definitions

1. Health Professional Shortage Area (HPSA): An area, population group, or facility designated by the U.S. Department of Health and Human Services as having an acute shortage of primary health care professionals. Please refer to the resource at https://data.hrsa.gov/tools/shortage-area for more information on HPSAs.
2. Medically Underserved Area (MUA): An area designated by the U.S. Department of Health and Human Services as meeting scoring criteria under the Index of Medical Underservice (IMU) which considers the ratio of primary medical care physicians to population, infant mortality rate, percentage of the population with incomes below the poverty level, and percentage of the population age 65 or over. Please refer to the resource at https://data.hrsa.gov/tools/shortage-area for more information on MUAs.
3. Medically Underserved Population (MUP): A designation by the U.S. Department of Health and Human Services which involves application of the Index of Medical Underservice (IMU) to data on an underserved population group within an area of residence to obtain a score for the population group. Please refer to the resource at https://data.hrsa.gov/tools/shortage-area for more information on MUAs.

General Information

This guidance provides information about eligibility for the Conrad 30/J-1 Visa Waiver Program.

Statutory Authority

The federal government authorizes the Iowa Department of Health and Human Services to sponsor physicians for a waiver who are subject to the 2-year home residency requirement upon completion of their exchange visitor program (see Section 214(l) of the Immigration Nationality Act (INA).

Program Overview

The State of Iowa is committed to improving access to health care in underserved areas of the state. The Conrad 30 waiver program, framed by Senator Kent Conrad of North Dakota in 1994, is one way to address the shortage of physicians in rural and urban areas. The Iowa Department of Health and Human Services, Division of Public Health, Primary Care Office receives requests and makes recommendations for waivers on behalf of physicians holding J-1 visas in accordance with the Conrad 30 waiver program.

Waiver requests are accepted for physicians who agree to a 3-year, full-time service commitment to provide primary care or specialty care in a designated primary care health professional shortage area, or a medically underserved area or population; or provide psychiatric care in a mental health professional shortage area. There are currently 30 available spots annually, 10 of which may be considered as “non-designated requests” for physicians who agree to work in non-designated areas yet still serve patients who reside in federally designated shortage area(s). The Iowa Department of Health and Human Services

issues letters of recommendation to the U.S. Department of State. The U.S Citizenship and Immigration Services approves, and issues J-1 visa waivers.

Program Requirements

Requirement 1: Health care facility must submit a statement on behalf of the physician.

Requirement 2: Physician must have proof of eligible employment at a practice site(s) that are in Iowa.

Requirement 3: The physician's attorney or accredited representative must submit a completed G-28 Document, if applicable.

Requirement 4: Physicians must provide federal J-1 visa and J-1 visa waiver documentation.

Requirement 5: Physicians must provide proof of identity.

Requirement 6: A physician must not submit another request to any U.S. Government department or agency equivalent to act on their behalf in any matter relating to a waiver of the two-year home residence requirement.

Requirement 7: Physicians must practice in an eligible discipline.

Requirement 8: Physician must provide a No-Objection Statement, if applicable.

Requirement 9: Physicians must be appropriately credentialed and qualified to practice in the discipline that the physician is applying for within the state of Iowa.

Requirement 10: Employer must have attempted to recruit a U.S. citizen for the position being filled by the J-1 visa waiver requestor.

Documentation Requirements

Document	Description/Requirements
Letter from Employer	This document must include the following on a signed and dated statement by the head of healthcare facility/employer on letterhead: 1) A request that the Iowa HHS act as an interested government agency 2) Employer legal name and physical address 3) Employer point of contact name, business address, email, phone, and fax 4) Type of request (designated or non-designated) 5) Provider legal name, date of birth, and country of origin 6) Provider discipline 7) A statement that waiver request would be in the public interest 8) An explanation of the detrimental effect that would result if the exchange visitor were unable to continue his or her involvement with the program or activity of interest to the

Document	Description/Requirements
	requesting agency, or if the requesting agency is unable to employ the exchange visitor 9) A statement that services are provided to Medicaid- and Medicare-eligible, uninsured, and indigent persons 10) A statement that services are provided to all individuals, regardless of ability to pay 11) A list of all practice sites where the provider will be fulfilling the service commitment specifying the following: a) Practice site legal name(s) and physical address b) FIPS county code and census tract or block numbering area number, or the 9-digit zip code for each practice site c) For a designated request, Health Professional Shortage Area name and ID#, Mental Health Professional Shortage Area name and ID#, or Medically Underserved Area/Population name and ID# for each practice site d) For a non-designated request, a statement that physician will only be working at a facility that serves patents who reside in a federally designated shortage area(s), medically underserved area(s), or medically underserved population(s)
HPSA/MUA Evidence	This document is used to verify eligibility regarding federally designated health professional shortage area(s), medically underserved area(s), or medically underserved population(s) for all practice sites where the provider will be fulfilling the service commitment.
Employment Contract	This document is used to verify eligible employment and must include the following information: 1) Physician legal name 2) Pertinent health care discipline of physician 3) Employer legal name and physical address 4) List of all practice sites where the provider will be fulfilling service commitment and must specify a) Practice site legal name(s) and physical address b) FIPS county code and census tract or block numbering area number, or the 9-digit zip code for each practice site c) For a designated request, Health Professional Shortage Area name and ID#, Mental Health Professional Shortage Area name and ID#, or Medically Underserved Area/Population name and ID# for each practice site

Document	Description/Requirements
	d) For a non-designated request, a statement that physician will be working at a facility that serves patents who reside in a federally designated shortage area(s), medically underserved area(s), or medically underserved population(s) 5) Physician salary must be the prevailing wage for the declared discipline or specialty 6) Direct care services must be provided for a minimum 3-year term and not less than forty (40) hours per week starting the first day of employment 7) Physician will agree to commence employment within 90 days of USCIS approval of waiver and H-1B status 8) Services must be provided at the practice site(s) specified in the J-1 visa waiver application for the duration of the service commitment 9) The physician provides medical care to Medicaid- and Medicare-eligible, uninsured, and indigent persons 10) Services must be provided to all individuals, regardless of ability to pay 11) Indicate compliance with INA section 214(l)
DS-2019 Certificate of Eligibility for Exchange Visitor Status (J Nonimmigrant)	This document is required to apply for a J-1 visa and is used to provide proof of J-1 visa eligibility.
I-94	This document is the DHS Arrival/Departure Record and is proof of legal entry into the United States.
Curriculum Vitae	This document provides information about the physician's work history and experience.
Iowa J-1 Visa Waiver Program Physician Information/Affidavit and Agreement (Exchange Visitor Attestation/Foreign Medical Graduate Statement)	This document collects information about the physician and the declared discipline: 1) A physician must not submit another request to any U.S. Government department or agency equivalent to act on their behalf in any matter relating to a waiver of the two-year home residence requirement. 2) A Physician does not have pending, nor will a physician submit another application while this application is pending, to any U.S. Government department or agency equivalent to act

Document	Description/Requirements
	on the physician's behalf in any matter relating to a waiver of the physician's two-year home residence requirement 3) Primary care provider disciplines are a) Family Practice b) General Internal Medicine, including Hospitalists c) General Pediatrics d) Geriatrics e) Obstetrics-Gynecology ***NOTE:*** *Primary care physicians providing services in an emergency department are considered primary health care.* 4) Mental health care provider disciplines are a) General Psychiatry b) Child/adolescent Psychiatry c) Geriatric Psychiatry d) Substance Use Disorders 5) Specialty care are services provided by physicians in disciplines other than those of primary care or mental health care.
G-28 Notice of Entry of Appearance as Attorney or Accredited Representative	This document is used to establish the eligibility of an attorney or accredited representative to represent a client (applicant, petitioner, requestor, beneficiary or derivative, or respondent) in an immigration matter before U.S. Department of Homeland Security (DHS).
• **DS-3035 and Supplementary Applicant Information Pages** • **Statement of Reason** • **Third-Party Barcode Page** • **Waiver Division Barcode Page**	These documents facilitate processing once a recommendation and waiver request has been forwarded to the Department of State.
Contact Information	This document collects information about the person completing the document, physician, law firm, attorney, employer name and contact, additional contacts.

Document	Description/Requirements
Birth Certificate or Passport	This document is used to verify the physician's identity.
J-1 Waiver No-Objection Statement, if applicable	This document is used if the physician is contractually obligated to return to their home country. If so, then the physician's home country must furnish, in writing, a statement of no objection to the waiver.
Iowa full/provisional professional license or certificate and specialty certificate (if applicable), or proof of payment to the Iowa Board of Medicine	This document is used to verify that the physician is appropriately credentialed and qualified to practice in the discipline that the physician is applying for within the state of Iowa.
J-1 Visa Waiver Program Employer Information	This document collects information about the person completing the document, employer, physician, practice site, employer acknowledgements.
J-1 Visa Waiver Recruitment Information	This document collects the following information about the recruitment efforts of employer: 1) How long the position has been vacant 2) Method/s used to facilitate recruitment that were specifically for the position being filled by the J-1 visa waiver requestor 3) The number of inquiries received because of recruitment methods 4) The number of physicians identified because of recruitment methods 5) How many interviews were conducted and if an offer was made 6) How many offers were made because of the recruitment efforts 7) How many offers were to U.S.-born physicians

Prioritization Criteria

Waiver requests are prioritized for recommendation in the following order:

Priority 1: Primary care or mental health care providers where service commitment will occur in a shortage designated area.

Priority 2: Primary care or mental health care providers where service commitment will occur in a rural, non-shortage designated area

Priority 3: Primary care or mental health care providers where service commitment will occur in an urban, non-shortage designated area.

Priority 4: Specialty care providers where service commitment will occur in a shortage-designated area.

Priority 5: Specialty care providers where service commitment will occur in a rural, non-shortage designated area.

Priority 6: Specialty care providers where service commitment will occur in an urban, non-shortage designated area.

NOTE: *Recommended applications will be listed within each priority category by order of receipt until the 30 slots are filled. The following additional factors may be considered at the discretion of the Iowa Department of Health and Human Services when making waiver recommendations: whether a spousal application exists; number of slots given to flex spots; or number of applications by specialty, employer, or county. Physicians requesting a non-designated spot will no longer be considered once the 10 non-designated spots are filled.*

Request Packet Instructions

J-1 visa waiver requests must be submitted per the following criteria. Failure to submit as prescribed may result in a waiver recommendation denial.

- Submit one electronic copy of the request packet via Cognito.
- Use a table of contents and tab documents
- Submit two (2) files (one for the Department of State and one for the State of Iowa) with documents in the order indicated on the Documentation Checklist.
- The DOS Case Number must be printed on the lower right-hand corner of every page of the request packet
- Copies of official documents are acceptable.
- Request packet contents must be on 8.5” x 11” paper
- Request packet contents must be single-sided (mail only)
- Do NOT use staples or binders (mail only)
- Do NOT include documents that are not required (mail only)

NOTICE: Beginning in 2027, Iowa HHS will only accept electronic submissions via Cognito. Until then, Iowa HHS will also accept original hardcopy applications via mail for the 2026 cycle (September 2, 2025, to October 31, 2025).

Send waiver request packet to:

Iowa Department of Health and Human Services
Division of Public Health
J-1 Visa Waiver Program
321 E 12th St.
Des Moines, IA 50319

Submission Timeframe

J-1 visa waiver requests are accepted annually starting the first Tuesday in September through the last Friday in October. If slots remain after the last Friday in October, the application process will remain open for additional applicants until the limit is reached or until the end of the federal fiscal year. In this circumstance, the Agency will recommend future applicants on a first-come, first-served basis if the criteria are met for acceptance.

Late Submissions

Requests may be submitted after the last Friday in October but are considered late. Late submissions will only be considered if waiver slots are still available after making recommendations on requests submitted in the September - October timeframe. Late submissions will be processed following Prioritization Criteria noted in the previous section.

Waiver Request Review

Waiver request review is based on the following considerations:
Review Consideration 1: Program requirements are satisfied.
Review Consideration 2: The requested information is sufficiently addressed.
Review Consideration 3: Contents are tabbed per the Request Packet Instructions Section of this document.

Waiver requests that do not meet requirements are designated as conditionally accepted pending submission of additional, requested materials within a specified date of return. If requested materials are not submitted on time, the waiver request will revert to a new submission, which may affect priority status.

Letter of Recommendation Decision

J-1 visa waiver physicians will be notified of a decision to provide a letter of recommendation on or before the second Monday in January for applications received within the submission timeframe.

Monitoring Criteria

J-1 visa waiver recipients must adhere to the following monitoring criteria while fulfilling their service commitment.
Monitoring Criteria 1: Physicians must submit a completed Commencement of Employment Status document within 30 days after employment commences.
Monitoring Criteria 2: Physicians must complete a year 1, year 2, and year 3 Provider Retention & Information System Management (PRISM) questionnaire for J-1 visa waiver physicians.
Monitoring Criteria 3: Physician's employer must complete and submit an annual report.

Resources

1. Health Resources and Services Administration (HRSA) Data: https://data.hrsa.gov/
2. HPSA by State and County: https://data.hrsa.gov/tools/shortage-area/hpsa-find
3. INA section 214(l): https://uscode.house.gov/view.xhtml?req=granuleid%3AUSC-prelim-title8-section1184&num=0&edition=prelim
4. MUA/P Find: https://data.hrsa.gov/tools/shortage-area/mua-find
5. Shortage by Address: https://data.hrsa.gov/tools/shortage-area/by-address
6. U.S. Department of Health and Human Services Exchange Visitor Program: https://www.hhs.gov/about/agencies/oga/about-oga/what-we-do/exchange-visitor-program/index.html
7. U.S. Citizenship and Immigration Services (USCIS) Conrad 30 Waiver Program: https://www.uscis.gov/working-united-states/students-and-exchange-visitors/conrad-30-waiver-program
8. U.S Department of State Exchange Visitor Visa: https://travel.state.gov/content/travel/en/us-visas/study/exchange/waiver-of-the-exchange-visitor/how-to-apply-waiver.html

J-1 Visa Waiver Request Documentation Checklist

Department of State Documentation

☐	Letter from Employer
☐	HPSA/MUA Evidence
☐	Employment Contract
☐	DS-2019's
	I-94
☐	Curriculum Vitae
☐	Exchange Visitor Attestation/Foreign Medical Graduate Statement (J-1 Visa Waiver Program Physician Information)
☐	G-28/Letter of Representation
☐	DS-3035 and Supplementary Applicant Information Pages
☐	Statement of Reason
☐	Third Party Barcode Page
☐	Waiver Division Barcode Page

State of Iowa Documentation

☐	Iowa J-1 Visa Waiver Program Contact Information
☐	J-1 Visa Waiver Program Employer Information
☐	J-1 Visa Waiver Recruitment Information
☐	Birth Certificate or Passport
☐	Iowa full/provisional professional license or certificate, or proof of payment to the Iowa Board of Medicine
☐	J-1 Waiver No-Objection Statement, if applicable

Changes to Guidance

Date of Change	Section	Change
03/14/2024	Prioritization Criteria	Added Priority 6: Specialty care providers where service commitment will occur in an urban, non-shortage designated area.
03/14/2024	Submission Timeframe	Added: If slots remain after the last Friday in October, the application process will remain open for additional applicants until the limit is reached or until the end of the federal fiscal year. In this circumstance, the Agency will recommend future applicants on a first-come, first-served basis if they meet the criteria for acceptance.
3/18/2024	Candidate Requirements and Documentation, Requirement 7	Added: Hospitalists are considered Primary care providers under General Internal Medicine.
4/4/2024	J-1 Visa Waiver Request Documentation Checklist	Updated the document titles and order to reflect federal requirements.
2/18/2025	J-1 Visa Waiver Request Documentation Checklist	Updated the document titles and order to reflect federal requirements.
4/23/2025	Candidate Requirements and Documentation	Separated the Candidate Requirement Section and the Documentation Requirements Section. Reorganized the Documentation Requirements Section to mirror the specific order required by the Department of State.
4/23/2025	Request Packet Instructions	Created a Cognito document for application submission to phase out the paper copy requirement.
4/23/2025	J-1 Visa Waiver Request Documentation Checklist	Updated the document titles and order to reflect federal requirements.