



REPORT OF REVIEW

J-1 WAIVER PROGRAM
WILLIAMSON MEMORIAL HOSPITAL
WILLIAMSON, WEST VIRGINIAOIG Report 95-6(H)
December 8, 1994BACKGROUND

The review was undertaken, as part of a survey of J-1 program operations in the Appalachian Region, to address concerns reported to the Office of Inspector General with respect to the failure of J-1 physicians to be at the approved site and the practice of subspecialties.

The J-1 waiver program provides a 2-year waiver of foreign physicians' responsibilities to return to their home country after completion of medical training in the United States. The waiver can be granted for various reasons, including the need for health care services in medically underserved areas in the United States. The Appalachian Regional Commission participates as a Federal entity sponsor in the Appalachian Region and, based on supporting information submitted by physicians requesting a waiver, prospective employers, and the applicable state health agency, recommends, where appropriate, approval of waivers to the United States Information Agency and Immigration and Naturalization Service. The applicable ARC policies and procedures are that the J-1 physician will serve 2 years in a Health Professional Shortage Area (HPSA) in the Appalachian Region and will practice 40 hours of primary care per week. There is no prohibition on J-1 physicians working extra hours or practicing subspecialties after fulfilling primary care requirements. Also, transfers to other HPSAs in Appalachia are permitted.

Although ARC regulations do not require employer certifications about intended use of J-1 physicians, employers must submit a statement of intended location and practice. We consider this statement to be an important aspect of program control and employer accountability and new substantive diversion from statements made to ARC in support of J-1 applications as a serious program violation.

ARC policies note that an employer's failure to comply in good faith with the waiver policy may be considered in the evaluation of other applications involving the same employer. Also, the J-1 Visa Waiver Policy Affidavit and Agreement signed by the physician includes an acknowledgement that willful failure to comply with terms of the agreement would result in ARC notifying INS and recommending that deportation proceedings be instituted against the physician.

Primary responsibilities for reviewing J-1 waiver requests, including supporting documentation, justifications of need, program oversight, and reporting have been delegated to state health

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agencies; but ARC retains the authority to act on waiver requests and to ensure compliance with program objectives and requirements.

Williamson Memorial Hospital sponsored three J-1 physicians for Kermit, West Virginia, in 1993. As of our review, two of the three physicians were still employed. One physician left in mid-1994 and is rumored to be working in a non-HPSA outside of the Appalachian Region. ARC recommended approval of J-1 waivers for the three physicians based on applications and supporting letters indicating the physicians would be providing a minimum of 40 hours of primary care per week at a clinic in Kermit, West Virginia. Kermit, West Virginia, is in a HPSA; whereas, Williamson, West Virginia, is not in a HPSA.

OBJECTIVE

To determine compliance with ARC J-1 program requirements that physicians perform 40 hours weekly of primary care for 2 years in an Appalachian HPSA.

RESULTS

Based on a review of available information and discussions with various parties, including the two J-1 physicians currently employed and the current Administrator of Williamson Memorial Hospital, we concluded that there was substantive violations of ARC regulations and program intents. This occurred because the J-1 physicians were providing minimal service at the HPSA location for which the J-1 waiver was justified and approved. In two instances, physicians spent about 4 to 12 hours each at the clinic. In another instance, it did not appear the J-1 physician spent any time at the Kermit, West Virginia clinic site. It appeared that this situation resulted because the employer never intended for the J-1 physicians to work full time at the Kermit clinic, as evidenced by the Certificate of Need (CON) application for the establishment of an Ambulatory Health Care Facility at Kermit, West Virginia. The CON application notes that the clinic would be open 8:00 a.m. to 5:00 p.m., 4 days per week. Staffing was noted as two physicians and a registered nurse, who would also function as a receptionist; and each physician would have office hours 2 days per week as well as a hospital practice. The CON application indicates the J-1s would also practice their subspecialties to a substantial degree.

The above information, which indicates a maximum intended use of each physician 16 hours per week at the HPSA site, was apparently not available to the state agency and ARC prior to processing of the J-1 waiver recommendation.

One of the three physicians approved for the Kermit, West Virginia location left the area prior to completion of the 2-year waiver period apparently because the J-1 waiver approval was erroneously interpreted by the physician as being retroactive until October 1992.

With respect to a fourth physician sponsored by Williamson Memorial Hospital in Williamson, West Virginia, we did not consider the physician's location at a non-HPSA site to be a program violation since the state agency and ARC approved a J-1 waiver request based on the Williamson location.

Also, neither the physicians or employer had forwarded regularly required reports to ARC and had not responded to state agency and ARC requests for information July 1994.

DETAILS

File Review

The supporting letters (one dated April 8 and two dated April 14, 1993) for three J-1 applicants, submitted by the Interim Administrator, Williamson Memorial Hospital, were identical as respects noting that the physician would practice internal medicine a minimum of 40 hours per week, with at least 32 hours per week spent in the HPSA, at the East Gate Shopping Center, Route 52, Kermit, West Virginia 25674. The first letter was dated January 22, 1993, and was signed by the Administrator of Williamson Memorial Hospital. (See Exhibits A, B, and C.)

The April 14, 1993 letters note that the physicians would begin employment at the Kermit clinic on or before July 1, 1993; the April 8, 1993 letter notes interest in employing the physician as of October 1, 1992, and states that the physician's office is located at East Kermit, West Virginia. We found no indication that the physician's J-1 waiver was retroactively approved; records and interviews disclosed the Kermit clinic was not opened until April 1994, and this physician never practiced at the clinic.

In two instances, we also noted a certification by the employer on behalf of the J-1 physician including, as Item 2, the statement that the physician will practice a minimum of 40 hours per week (including 8 on-call hours) in a HPSA, as determined by the US Public Health Service; and 32 office hours will be spent in the HPSA per week. (See Exhibits D and E.)

Files also disclosed that an Application for Alien Employment Certification (Green Card) noted the East Gate Shopping Center in Kermit, West Virginia as the address where the alien will work. These forms are signed by the employer. (See Exhibit F.)

Based on the above information, ARC recommended approval of J-1 waivers for the three physicians to practice primary care at Kermit, West Virginia. (See Exhibits G, H, and I.)

Attached, as Exhibit J, are excerpts from the Williamson Memorial Hospital, Inc. proposal for establishment of an Ambulatory Health Care Facility at Kermit, West Virginia. The proposal notes that each of the two assigned physicians will have office hours at the Kermit clinic two days per week as well as a hospital practice (hospital located in a non-HPSA). The proposal also refers several times to the practice of subspecialties, e.g., cardiology and pulmonary medicine, in conjunction with internal medicine. The proposal is date stamped November 30, 1993, which indicates the document may not have been available to ARC until after J-1 waiver approvals were recommended.

Also, no mention is made in the proposal of clinic staffing by a third physician although three J-1 requests were submitted and justified for the Kermit clinic by the employer. The November 1993 date may also be indicative of the reason for delayed opening of the Kermit clinic since a West Virginia CON was necessary before starting operations.

Exhibit K is an example of the J-1 Visa Waiver Policy Affidavit and Agreement signed and notarized by the physicians on November 9, 1992; December 1, 1992; and March 22, 1993, respectively. The ARC recommendations for waivers were forwarded to the United States Information Agency on May 3, 12, and 27, 1993, respectively, and approved in June 1993.

Physician Recruitment Agreements

We reviewed two Physician Recruitment Agreements for each of the two J-1s assigned to the Kermit, West Virginia clinic and the agreement for the J-1 physician that left the area in September 1994.

With one exception, the agreements note practice or service in Williamson, West Virginia, and/or in Mingo County, West Virginia. In one instance, the agreement language is noted as a medical clinic located in Williamson, West Virginia, and known as the Tug Valley Medical Clinic. The clinic eventually opened in Kermit, West Virginia, is known as the Tug Valley Medical Clinic. It is unclear from the agreements whether the intent was that the J-1s' practice would be in Williamson rather than at a clinic in Kermit. The current Administrator of Williamson Memorial Hospital said he did not know of his predecessor's intents about the establishment of a clinic in Kermit, West Virginia, at the time the J-1 physicians were recruited.

In any event, the applications and supporting documentation noted primary practice at a clinic in Kermit, West Virginia, and do not mention practice at Williamson, West Virginia, a non-HPSA.

In two cases, the initial Physician Recruitment Agreements were revised to reflect some changed conditions, including the absence of a clinic in Kermit. Initial agreements noted effective dates of July 1993, with revised agreements effective in August 1993.

The final agreements for the three J-1 physicians noted that they were independent contractors who would engage in the private practice of medicine as an internist in Williamson and/or Mingo County, West Virginia, and would receive a guaranteed amount of gross receipts per month from Williamson Memorial Hospital.

The three final agreements note that physicians are responsible for billings and collections and the guarantee payment, if any, would be determined based on an audit of monthly gross receipts. In the instance of the physician employed in October 1992, the agreement specifies the employer will pay for the office space and furnishings for an office. This provision is not included in the revised agreement for the two J-1 physicians staffing the Kermit, West Virginia clinic. The employer is, however, paying for rent and equipment at the Kermit office but not for the physicians' offices in Williamson.

None of the agreements contain restrictive covenants (noncompete clauses).

Interviews with J-1 Physicians

The two J-1 physicians still in the area were interviewed separately and essentially provided similar information with respect to their employment, practices, and failure to complete the ARC J-1 Physician Reporting Form.

The physicians were hired by different hospital Administrators and arrived in West Virginia in July and August 1993, respectively. Both were surprised that the Kermit clinic was not available when they arrived. It was their understanding that the employer had not applied for a CON from the state as of their arrival. They believed the absence of a CON was the primarily reason for the Kermit clinic not opening until the spring of 1994.

Both physicians said that, since the Kermit clinic was not available for them, their original employment contracts were terminated and they entered new 1-year contracts wherein they obtained separate office space in Williamson, West Virginia (a non-HPSA) and started a private practice. Their contract salary was substantially increased, e.g., \$125,000 to \$225,000.

When the Kermit clinic was opened, the physicians staffed it as needed. Both physicians said there were few patients served at the clinic. One physician, internist/cardiologist, said he goes to the clinic on Thursday if there are scheduled appointments. He said five appointments were scheduled for October 27, 1994, but only one showed up. The other physician, internist/pulmonologist, said he is available for appointments at the Kermit clinic on Mondays and Wednesdays. He said he usually is at Kermit for part of Wednesdays and sometimes on Mondays.

Both physicians said that the clinic does not have a laboratory or x-ray equipment and, thus, patients have to go to Williamson for laboratory work or x-rays. Williamson Memorial Hospital is currently paying the Kermit clinic expenses, but the physicians expected this to change soon. They said they pay the expenses associated with their private practices.

The physicians also said that the large proportion of their practice involves internal medicine, with some subspecialty practice in line with the high incidence of lung and heart problems in the area. They said that most of their patients come from outside of Williamson and that as many as 90 percent are eligible for Medicare or Medicaid. The internist/cardiologist noted that, although he has privileges at the Williamson Memorial Hospital and Appalachian Regional Hospital in South Williamson, Kentucky, neither hospital has sophisticated cardiology capabilities, so he is automatically precluded from performing most cardiology procedures.

One of the physicians said he would like to stay in the area and the other was unsure since his wife, who also is a physician, was employed in another state. One physician said he believed Williamson, West Virginia, was a HPSA 4 or 5 years ago and most of the J-1s left after 2 years service.

Both physicians said they had received the ARC J-1 Physician Reporting Form but were afraid to complete them because they knew they were not performing the agreed-to service. They said they had been worried about the situation, but they did not know what to do. They also believed the employer had not lived up to their agreement to provide a viable clinic in a HPSA.

Interview with Current Administrator, Williamson Memorial Hospital

The current Administrator said that, when he began his duties in July 1973, he became aware of the J-1 program and the commitments made to two J-1 physicians about employment at a medical office in Kermit, West Virginia. Also, he said he did not become aware of the status of two other J-1 physicians employed by Williamson Memorial Hospital until a later date. Decisions relative to employment of the J-1s and the establishment of an office in Kermit, West Virginia, a HPSA, were made by his two predecessors.

Since Williamson Memorial Hospital had not established a medical office at Kermit, West Virginia, and action had not been initiated to obtain a CON from the state, he recognized a need to revise the contracts of the two J-1 physicians who were scheduled to start work in July/August 1993. Essentially, the contracts were revised to reflect that the two J-1s would be independent practitioners with a monthly income guaranteed by Williamson Memorial Hospital. As such, the J-1s established an independent practice in Williamson, West Virginia, a non-HPSA, pending establishment of a medical office at Kermit, West Virginia, by Williamson Memorial Hospital. Per the Administrator, the J-1s were responsible for their own billings and resource (nurses/administrative staff) acquisition and did not share revenues with Williamson Memorial Hospital. Any benefit to Williamson Memorial Hospital resulted from ancillary services and admissions referred by the J-1s.

A CON application was forwarded in the fall of 1993; and a medical office in Kermit, West Virginia, was opened in April of 1994. The two J-1 physicians have staffed the appointment only office on a part-time basis since April 1994. The Administrator estimated the time spent at the Kermit office as two half-days per week for each J-1, with a caseload of 5 to 8 patients per day. The physicians' remaining time is primarily spent at their Williamson offices.

The Kermit office does not have laboratory or x-ray capabilities, and the future of the services provided is dependent on viability of the office. Although Williamson Memorial Hospital currently pays the space costs, this arrangement is under review. The J-1s staffing the clinic operate independently in line with their agreements and, as such, prepare their own billings.

With respect to the third J-1 physician who terminated employment in September 1994 after 2 years of service, the Administrator said the separation was agreeable to both parties and the physician had relocated in Kentucky. He indicated this physician, a nephrologist, had expressed some interest in returning to the area if dialysis capability could be established in the area.

The fourth J-1 physician continues working in Williamson; and the Administrator noted the circumstances surrounding the 3-year delay in the physician submitting J-1 waiver forms and receiving a waiver approval for practice in Williamson, West Virginia, a non-HPSA.

With respect to the type of practices conducted by the J-1s, the Administrator noted that the bulk of work involved primary care services. He noted that the absence of subspecialty capabilities in the Williamson area, e.g., dialysis or catheterization capabilities, limited opportunities for J-1s with subspecialties in nephrology or cardiology to practice these disciplines. He also noted the high incidence of lung ailments in the area and the value of having expertise available for treatment of affected patients.

It was pointed out that agreements between J-1s and Williamson Memorial Hospital do not include restrictive covenants since the J-1s are essentially considered independent practitioners. Also, it was noted that restrictive covenants (noncompete clauses) used by other facilities utilizing J-1s effectively precludes the J-1 physicians from remaining in the area after completion of their waiver period.

The two J-1s assigned part time to the Kermit office have expressed an interest in remaining in the area. However, one of the physicians' wife is currently a pathologist resident in another state; and the unavailability of a J-1 waiver for a pathologist, despite a need for such service, under the ARC program will result in one physician leaving to relocate with his wife.

With respect to Williamson Memorial Hospital not responding to ARC and the state agency's July 1994 request for information about the use of J-1 waivers, the Administrator said that he had received informal legal advice that Williamson Memorial Hospital was not an employer based on the agreement they had with the J-1 physicians and that he did not want to report inaccurately. He noted that he had prepared a letter dated September 2, 1994, to ARC explaining the situation but had not sent the letter.

The Administrator noted that he was in contact with a physician who had expressed interest in a J-1 appointment in July 1995 after the current J-1 tours are completed. He was discussing internist duties at Kermit and some moonlighting at the emergency room at Williamson Memorial Hospital. However, he had deferred further discussion based on his and his superiors' concerns about ARC action with respect to the condition noted about use of J-1 physicians and concerns about ARC position on physician moonlighting. He requested a timely decision by ARC with respect to recommendations in this report.

Reviewer Comment

The reviewer comments included a summation of probable Office of Inspector General (OIG) recommendations to ARC, emphasizing timely reporting to ARC and the state about changed conditions regardless of perceived technicalities since the ARC program is based largely on good faith efforts of employers and physicians rather than detailed rules and regulations; the absence of ARC prohibitions against physicians performing other duties provided requirements for primary care at a HPSA are met; and recognizing that the J-1 submissions were made prior to the current Administrator's arrival, the difficulty of accepting the premise that workload existed for a three-person full-time staff at a Kermit, West Virginia office as was noted in the sponsor's supporting letters. It was also noted to the Administrator that a recommendation would be made for timely ARC decisions with respect to OIG recommendations.

J-1 Physician Leaving the Area

Exhibit A denotes the employer's recommendation and justification of April 8, 1993, for a J-1 waiver for a physician. The letter notes that Williamson Memorial Hospital would like to employ the physician subject to the 2-year foreign residence requirement, beginning October 1, 1992.

The physician signed the ARC J-1 Visa Waiver Policy Affidavit and Agreement on November 9, 1992, and the ARC Federal Co-Chairman's J-1 Visa Waiver Policy on April 27, 1993. The

ARC J-1 recommendation was forwarded to the United States Information Agency on May 3, 1993; and the waiver was approved in June 1993.

The physician apparently terminated employment with Williamson Memorial Hospital in July 1994 and relocated in a non-HPSA outside of the Appalachian Region. Also, during the period of employment in West Virginia, we could not identify any time spent at the Kermit, West Virginia clinic for which the J-1 waiver was approved. According to colleagues, the physician had a private practice in Williamson, West Virginia, during her stay in West Virginia and did not submit any of the J-1 Physician Reporting Forms.

We concluded that the 2-year waiver period began in May or June 1993, or when ARC processed the request for a J-1 waiver. There is no evidence that the waiver was retroactive until October 1992 nor any evidence of eligibility for a waiver at that time since a HPSA location was not available.

We also recognize that the failure of the employer to open a clinic was one factor impacting on compliance with program requirements but believe the combination of leaving the area prior to completion of the 2-year period, not working at a HPSA location, engaging in a private practice in a non-HPSA, and not completing required reports supports ARC action to recommend deportation proceedings, if a voluntary agreement by the physician to serve additional time in a HPSA cannot be achieved.

J-1 Physician Approval for Williamson, West Virginia

A fourth J-1 physician was employed by Williamson Memorial Hospital. This physician was approved in 1993 by the state agency and ARC based on documentation that service was being provided in Williamson, West Virginia, a non-HPSA. This case involved a physician who was employed in 1990 and believed her attorney at that time had arranged for J-1 approval. When it became apparent in early 1993 that a waiver approval request had not been submitted, the physician initiated action to obtain an approval. Although it is unclear why a request for approval in a non-HPSA was supported by the state and ARC, a state official indicated that the absence of a state policy when the physician was originally recruited in 1990 and the length of service in Appalachia probably were factors in not objecting to the request. We did not consider this case to represent an employer or physician violation of the ARC program.

Williamson Memorial Hospital Response to ARC and State Agency Questionnaires

In July 1994, the West Virginia state agency and ARC forwarded separate questionnaires in order to obtain information from the employer about the use of J-1 physicians. The ARC requested the location and the type of practice and the state questionnaire asked for detailed information about patient visits.


As of November 15, 1994, the employer had not responded to either questionnaire. ARC files note a July 25, 1994 request for a short delay in responding due to unavailability of the hospital Administrator (Exhibit L). No response was received, and a followup phone call from ARC in September 1994 did not obtain a response. The reasons for no response are included in the section on an interview with the current hospital Administrator.

CONCLUSIONS

The intent and requirements of the J-1 program were substantially violated in that the J-1 physicians have been practicing primarily at a non-HPSA location and engaging in private practices rather than serving at the clinic in Kermit, West Virginia. Although the J-1 physicians are accountable for their actions and fulfillment of agreements, we nonetheless concluded that the employer, Williamson Memorial Hospital was primarily responsible for the situation noted. The unavailability of the Kermit clinic and the apparent limited workload potential are the primary factors, in our opinion, for the failure to comply with J-1 agreement provisions to provide 40 hours per week of primary care in a HPSA.

RECOMMENDATIONS TO ARC

- o In coordination with the state agency, should ensure that future J-1 recommendations are supported by evidence of the viability of physician service in accordance with ARC program requirements; and ARC and the state agency should require employer certifications to better ensure use of J-1 physicians in line with sponsors' justifications and intentions.
- o Consider debarring the employer from participation in the J-1 program for a period of 2 years subsequent to the completion of the current J-1s' 2-year waiver periods.
- o Notify employers and applicable J-1 physicians of the need to comply with program requirements and obtain employer commitments to increase and maximize the use of current J-1 physicians to practice primary care at the approved HPSA location.
- o In conjunction with the state agency, should seek voluntary agreement from the two J-1 physicians currently employed by Williamson Memorial Hospital to extend their tours of duty in an Appalachian HPSA to offset noncompliance with program requirements.
- o Seek a voluntary return to Appalachia to complete the 2-year J-1 waiver period from the J-1 physician who left the area or notify the Immigration and Naturalization Service and recommend deportation proceedings be instituted against the subject J-1 physician.


Hubert N. Sparks
Inspector General

Exhibits A-L



December 8, 1994

MEMORANDUM FOR The Federal Co-Chairman
 ARC General Counsel

SUBJECT: J-1 Waiver Program--Williamson Memorial Hospital,
 Williamson, West Virginia; OIG Report 95-6(H)

Enclosed is a copy of the subject report that reflects noncompliance with J-1 Waiver provisions requiring J-1 physicians to practice primarily at the approved HPSA location. We attributed the condition primarily to employer failure to ensure physician compliance, and the conclusions noted are similar to what we have noted at other locations.


From our view, decisions on good faith efforts need to consider that the subject employer, in supporting justifications, clearly noted the intention to primarily use the J-1s at a HPSA site in Kermit, West Virginia, starting around July 1993 and did not notify the state agency or ARC about problems with establishing a clinic in Kermit or the limited workload and service hours after the clinic was established in April 1994. Thus, the actual use of physicians became apparent only after the employer did not respond to ARC and state agency requests for information. Also, since this situation involved multiple J-1 physicians, it is our opinion that the employer was in a position to recognize, at the time of the J-1 applications, that it was not viable for three J-1 physicians to practice full time at the noted HPSA location.

Another important issue relates to whether there is a need for J-1 physicians in non-HPSAs to treat patients from surrounding HPSA areas. Our review did not include this issue nor did we attempt to verify the degree to which patients from HPSA areas actually visited the clinics or offices staffed by J-1 physicians in a non-HPSA since we believe the primary issue is whether the employer acted in good faith.

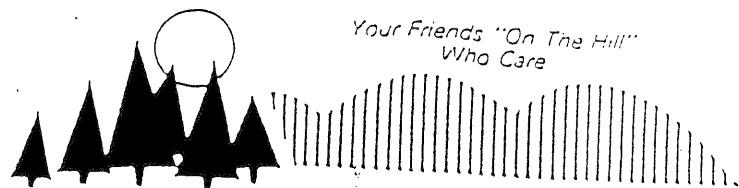
The physicians' names are available, but we have not included them in the report since the issues discussed related primarily to employer actions.

Thus our recommendations include ARC consideration of debarring the employer for a period of 2 years subsequent to completion of current J-1 physicians' 2-year waiver period for failure to comply with program requirements.

Also, we noted one instance where a J-1 physician terminated the employment contract prior to completion of the 2-year waiver period and apparently located in a non-HPSA outside the Appalachian Region. We are recommending that ARC notify INS of this case for consideration of deportation action or seek voluntary compliance to ensure completion of the 2-year waiver period.


Hubert N. Sparks
Inspector General

Enclosure



Williamson Memorial Hospital

April 8, 1993

Ms. Jacqueline L. Phillips
 Federal Co-Chairman
 Appalachian Regional Commission
 1666 Connecticut Avenue, N.W.
 Washington, D.C. 20235

RE: Dr. [REDACTED]

Dear Ms. Phillips:

Williamson Memorial Hospital would like to employ [REDACTED] M.D., a citizen of Pakistan subject to the two year foreign residence requirement, beginning October 1, 1992. Dr. [REDACTED] has completed a residency training in Internal Medicine and her office is located at the East Gate Shopping Center, Building #2, U.S. Rt. 52, East Kermit, West Virginia 25674.

Kermit is in the seat of Mingo County, a community of approximately 20 thousand people in the southern coal fields of West Virginia. Our area has historically suffered from a shortage of high-quality physicians and we believe that Dr. [REDACTED] coming to Williamson would be a significant step forward in the provision of high-quality medical care to the people of this area. According to a recent study prepared by the Southern West Virginia Health Education Training Center, Mingo County is the worst in the State of West Virginia with regard to mortality from chronic obstructive pulmonary disease and heart disease. It also leads the state in the percentage of citizens smoking cigarettes. It is at or near the worst level in the state with regard to several other disease categories and health risk factors.

The physicians currently practicing in the area are not able to keep up with the demand caused by the high level of disease present in this area. Nearly all of our physicians who are currently in practice, have been forced to limit their practices and not accept new patients because they are already overburdened with more work than they can handle. We believe that the area requires several new physicians and Dr. [REDACTED] by

herself, would in no way satisfy the current need for additional doctors.

Dr. [redacted] will practice a minimum of forty (40) hours per week in a Health Professional Shortage Area (HPSA) as determined by the U.S. Public Health Service. Eight (8) hours of which may be on-call time and thirty-two (32) hours of actual medical practice time.

We acknowledge that all the terms and conditions of the Physician's J-1 Visa Policy Affidavit and Agreement have been incorporated into the employment agreement with Dr. [redacted].

We further acknowledge that the employment agreement does not modify or amend any of the terms and conditions of the Physician's J-1 Visa Policy Affidavit and Agreement.

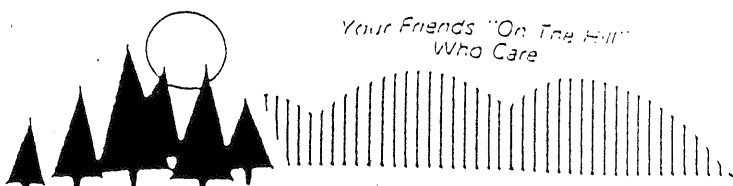
Thank you for your prompt attention regarding this matter.

Sincerely,

Bruce Bailey /sb
Bruce Bailey
Interim Administrator

/sb

Your Friends "On The Hill"
Who Care



Williamson Memorial Hospital

April 14, 1993

Jacqueline Phillips
Appalachian Regional Commission
1666 Connecticut Avenue
Washington, D.C. 20035

RE: Request that the Appalachian Regional Commission act as an interested government agency in recommending to the United States Information Agency that the two year foreign residency requirement be waived for Dr. [redacted], in order for him to render critically needed medical care to our service area.

Dear Ms. Phillips:

Williamson Memorial Hospital is a health care facility located in Mingo County, West Virginia. Our service area encompasses approximately 150 square miles and has a population of 42,500. As you are aware, there is a critical shortage of physicians in general in our service area; specifically a critical shortage of Internists. For example, our situation with respect to Mingo County, West Virginia, such that there is only one Internist for 9,200 people.

Kermit is in the seat of Mingo County, a community of approximately 42 thousand people in the southern coal fields of West Virginia. Our area has historically suffered from a shortage of high-quality physicians and we believe that Dr. [redacted] coming to Williamson would be a significant step forward in the provision of high-quality medical care to the people of this area. According to a recent study prepared by the Southern West Virginia Health Education Training Center, Mingo County is the worst in the State of West Virginia with regard to mortality from chronic obstructive pulmonary disease and heart disease. It also leads the state in the percentage of citizens smoking cigarettes. It is at or near the worst level in the state with regard to several other disease categories and health risk factors.

The physicians currently practicing in the area are not able to keep up with the demand caused by the high level of disease present in this area. Nearly all of our physicians who are currently in practice, have been forced to limit their practices and not accept new patients because they are already overburdened with more work than they can handle. We believe that the area requires several new physicians and Dr. [redacted] by [redacted]

himself, would in no way satisfy the current need for additional doctors.

After unsuccessfully attempting to recruit American physicians for the position, we were finally able to locate Dr.

_____, a J-1 physician. Dr. _____ has agreed to come to work for us at the salary we can afford to pay and under the working conditions in our area, which are far less than ideal.

Thus, we request that you intervene on our behalf and request that the USIA grant a recommendation for a waiver of the two-year foreign residency requirement so that Dr. _____ can begin work at the earliest possible moment.

We anticipate that Dr. _____ will begin his employment with us on or before July 1, 1993. Dr. _____, the physician we have recruited, has a residency training in Internal Medicine. The locations of his practice will be East Gate Shopping Center, Rt. 52, Kermit WV 25674 (HPSA).

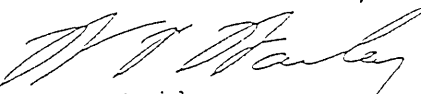
Dr. _____ will practice a minimum of forty (40) hours per week (including eight (8) on-call hours) in a Health Professional Shortage Area (HPSA) as determined by the U.S. Public Health Service. Thirty-two (32) office hours will be spent in the HPSA per week.

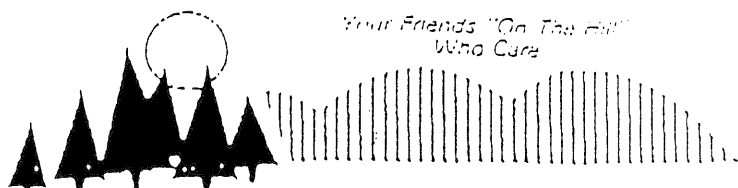
~~We~~ acknowledge that all the terms and conditions of the Physician's J-1 Visa Policy Affidavit and Agreement have been incorporated into the employment agreement with Dr.

~~We~~ further acknowledge that the employment agreement does not modify or amend any of the terms and conditions of the Physician's J-1 Visa Policy Affidavit and Agreement.

Thank you for your prompt attention regarding this matter.

Sincerely,


Bruce Bailey
Interim Administrator



Williamson Memorial Hospital

April 14, 1993

Ms. Jacqueline Phillips
 Appalachian Regional Commission
 1666 Connecticut Avenue
 Washington, D.C. 20035

RE: Request that the Appalachian Regional Commission act as an interested government agency in recommending to the United States Information Agency that the two year foreign residency requirement be waived for Dr. _____, in order for him to render critically needed medical care to our service area.

Dear Ms. Phillips:

Williamson Memorial Hospital is a health care facility located in Mingo County, West Virginia. Our service area encompasses approximately 150 square miles and has a population of 42,500. As you are aware, there is a critical shortage of physicians in general in our service area; specifically a critical shortage of Internists. For example, our situation with respect to Mingo County, West Virginia, such that there is only one Internist for 9,200 people.

Kermit is in the seat of Mingo County, a community of approximately 42 thousand people in the southern coal fields of West Virginia. Our area has historically suffered from a shortage of high-quality physicians and we believe that Dr. _____ coming to Williamson would be a significant step forward in the provision of high-quality medical care to the people of this area. According to a recent study prepared by the Southern West Virginia Health Education Training Center, Mingo County is the worst in the State of West Virginia with regard to mortality from chronic obstructive pulmonary disease and heart disease. It also leads the state in the percentage of citizens smoking cigarettes. It is at or near the worst level in the state with regard to several other disease categories and health risk factors.

The physicians currently practicing in the area are not able to keep up with the demand caused by the high level of disease present in this area. Nearly all of our physicians who are currently in practice, have been forced to limit their practices and not accept new patients because they are already overburdened with more work than they can handle. We believe that the area requires several new physicians and Dr. _____, by

himself, would in no way satisfy the current need for additional doctors.

After unsuccessfully attempting to recruit American physicians for the position, we were finally able to locate Dr. [redacted] a J-1 physician. Dr. [redacted] has agreed to come to work for us at the salary we can afford to pay and under the working conditions in our area, which are far less than ideal.

Thus, we request that you intervene on our behalf and request that the USIA grant a recommendation for a waiver of the two year foreign residency requirement so that Dr. [redacted] can begin work at the earliest possible moment.

We anticipate that Dr. [redacted] will begin his employment with us on or before July 1, 1993. Dr. [redacted], the physician we have recruited, has a residency training in Internal Medicine. The locations of his practice will be East Gate Shopping Center, Rt. 52, Kermit WV 25674, (HPSA).

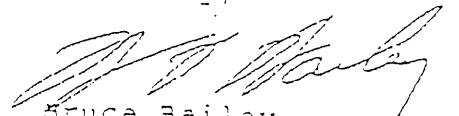
Dr. [redacted] will practice a minimum of forty (40) hours per week (including eight (8) on-call hours) in a Health Professional Shortage Area (HPSA) as determined by the U.S. Public Health Service. Thirty-two (32) office hours will be spent in the HPSA per week.

We acknowledge that all the terms and conditions of the Physician's J-1 Visa Policy Affidavit and Agreement have been incorporated into the employment agreement with Dr. [redacted].

We further acknowledge that the employment agreement does not modify or amend any of the terms and conditions of the Physician's J-1 Visa Policy Affidavit and Agreement.

Thank you for your prompt attention regarding this matter.


Sincerely,


Bruce Bailey
Interim Administrator

CERTIFICATION
FOR WILLIAMSON MEMORIAL HOSPITAL
ON BEHALF OF DR. _____

WILLIAMSON MEMORIAL HOSPITAL CERTIFIES TO THE APPALACHIAN REGIONAL COMMISSION AS FOLLOWS, IN CONNECTION WITH THE REQUEST TO ARC TO GRANT A WAIVER RECOMMENDATION TO DR.

1. WE ACCEPT MEDICAID AND MEDICARE-ELIGIBLE PATIENTS, AS WELL AS MEDICALLY INDIGENT PATIENTS.
2. DR. _____ WILL PRACTICE A MINIMUM OF FORTY (40) HOURS PER WEEK (INCLUDING EIGHT (8) ON-CALL HOURS) IN A HEALTH PROFESSIONAL SHORTAGE AREA (HPSA) AS DETERMINED BY THE U.S. PUBLIC HEALTH SERVICE. THIRTY-TWO (32) OFFICE HOURS WILL BE SPENT IN THE HPSA PER WEEK.
3. WILLIAMSON MEMORIAL HOSPITAL IS A LICENSED HEALTH CARE FACILITY IN THE STATE OF WEST VIRGINIA.
4. A ALINE LABOR CERTIFICATION APPLICATION BY WILLIAMSON MEMORIAL HOSPITAL ON BEHALF OF DR. _____ IS BEING PROCESSED AND SHOULD BE APPROVED IN THE NEAR FUTURE.
5. WILLIAMSON MEMORIAL HOSPITAL HAS BEEN ENGAGED IN EXTENSIVE RECRUITMENT THROUGH CLASSIFIED ADS FOR THIS POSITION AND NO QUALIFIED AMERICAN WORKERS HAVE RESPONDED.
6. DR. _____ WILL BE PRACTICING AT EAST GATE SHOPPING CENTER, RT. 52, KERMIT, WV 25674 (HPSA).



BRUCE BAILEY,
INTERIM ADMINISTRATOR

4-24-87
DATE

CERTIFICATION
FOR WILLIAMSON MEMORIAL HOSPITAL
ON BEHALF OF DR. _____

WILLIAMSON MEMORIAL HOSPITAL CERTIFIES TO THE APPALACHIAN REGIONAL COMMISSION AS FOLLOWS, IN CONNECTION WITH THE REQUEST TO ARC TO GRANT A WAIVER RECOMMENDATION TO DR. _____.

1. WE ACCEPT MEDICAID AND MEDICARE-ELIGIBLE PATIENTS, AS WELL AS MEDICALLY INDIGENT PATIENTS.
2. DR. _____ WILL PRACTICE A MINIMUM OF FORTY (40) HOURS PER WEEK (INCLUDING EIGHT (8) ON-CALL HOURS IN A HEALTH PROFESSIONAL SHORTAGE AREA (HPSA) AS DETERMINED BY THE U.S. PUBLIC HEALTH SERVICE. THIRTY-TWO (32) OFFICE HOURS WILL BE SPENT IN THE HPSA PER WEEK.
3. WILLIAMSON MEMORIAL HOSPITAL IS A LICENSED HEALTH CARE FACILITY IN THE STATE OF WEST VIRGINIA.
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5. WILLIAMSON MEMORIAL HOSPITAL HAS BEEN ENGAGED IN EXTENSIVE RECRUITMENT THROUGH CLASSIFIED ADS FOR THIS POSITION AND NO QUALIFIED AMERICAN WORKERS HAVE RESPONDED.
6. DR. _____ WILL BE PRACTICING AT EAST GATE SHOPPING CENTER, RT. 52, KERMIT, WV 25674 (HPSA).



BRUCE BAILEY
INTERIM ADMINISTRATOR

4-14-93
DATE

U.S. DEPARTMENT OF LABOR
Employment and Training Administration

APPLICATION
FOR
ALIEN EMPLOYMENT CERTIFICATION

IMPORTANT: READ CAREFULLY BEFORE COMPLETING THIS FORM
PRINT legibly in ink or use a typewriter. If you need more space to answer questions on this form, use a separate sheet. Identify each answer with the number of the corresponding question. SIGN AND DATE each sheet in original ink.
Do knowingly furnish any false information in the completion of this form and any supplement thereto or to aid, abet, or counsel another to do so. A felony punishable by \$10,000 fine or 5 years in the penitentiary, or both.

OMB APPROVAL NO. 1447-0041

PART A. OFFER OF EMPLOYMENT

1. Name of Alien (Family name in capital letters, First, Middle, Last)
2. Present Address of Alien (Number, Street, City and Town, State ZIP Code or Province, Country)
2 Park Place, #23-G, Hartford, Connecticut 06106 U.S.A.
3. Type of Visa (Alien Visa)
J-1

The following information is submitted in evidence of an offer of employment:

4. Name of Employer (Full name of organization)
Williamson Memorial Hospital
5. Telephone (Area Code and Number)
(304) 235-2500
6. Address (Number, Street, City or Town, Country, State, ZIP Code)
659 Alderson Street, Williamson, West Virginia 25661

7. Address where Alien will work (if different from item 6)
Office at East Gate Shopping Center, Rt. 52, Kermit, West Virginia 25674 and at the Hospital

8. Nature of Employer's Business Activity Health Care Facility	9. Name of Job Title Physician/Internist	10. Total Hours Per Week		11. Work Schedule (Hourly) 9:00 a.m. - 6:00 p.m.	12. Rate of Pay	
		a. Basic 40**	b. Overtime n/a		1. Basic \$108,000 S	2. Overtime n/a

13. Describe fully the job to be performed (Duties)
**Plus evening/weekend on-call emergency duty
Diagnoses and treats diseases and injuries of human internal organ system; Examines patient for symptoms of organic or congenital disorders and extent of injury or disorder, using diagnostic aids, such as x-ray machine, blood tests, electrocardiograph, sphygmomanometer, and stethoscope. Prescribes medication and recommends dietary and activity program, as indicated by diagnosis. Will assist with cardiology duties. Position also entails frequent evening/weekend emergency and clinic on call responsibilities.
-Must be able to obtain hospital privileges at local hospital.

14. State in detail the MINIMUM education, training, and experience for a worker to perform satisfactorily the job duties described in item 13 above.

EDUCATION (Enter number of years)	Grade School	High School	College	College Degree Required (Specify) M.D. or equivalent
	K	K	K	Major Field of Study Medicine
TRAINING	No. Yrs.	No. Mos.	Type of Training	
	3		Residency	
EXPERIENCE	Job Offered		Related Occupation	
	Yrs.	Mos.	Yrs.	Mos.

15. Other Special Requirements:
-Must have completed residency training in internal medicine
-Must have residency training in cardiology
-Must be board eligible or certified in internal medicine and cardiology
-Must have or be able to obtain license to practice medicine in the State of West Virginia
-Must be available for on-call and emergency room duty

16. Occupational Title of Person Who will be Alien's Immediate Supervisor
Administrator
-Must have verifiable references as an Employer
-Must be accepted as a provider for state Medicaid

ENDORSEMENTS (Make no entry in section for government use only)

Date Form Received	
U.S.	S.O.
R.O.	N.O.
Ind. Code	Occ. Code
Occ. Title	



APPALACHIAN REGIONAL COMMISSION

OFFICE OF THE
FEDERAL CO-CHAIRMAN
1666 Connecticut Avenue, N.W.
Washington, D.C. 20235
202/673-7856

May 3, 1993

Ms. Jean Peters
Waiver Review Officer
Waiver Review Branch
United States Information Agency
400 6th Street, S.W.
Room 3030
Washington, D.C. 20547

Dear Ms. Peters:

This letter recommends that your agency submit a request to the Attorney General for a waiver of the two-year foreign residency requirement for Dr. . . . Dr. . . . is presently awaiting waiver of foreign residence. Dr. . . . is prepared to provide primary health care services in East Gate Shopping Center, Building #2, US Route 52 East, Kermit, Mingo County, West Virginia. Such waiver is in the public interest. Requiring Dr. . . . to return home would be detrimental to efforts and activities of the State of West Virginia, the Department of Health and Human Services, and the Appalachian Regional Commission (ARC) to provide quality health care for the people of the Appalachian Region.

As you may recall, the ARC is a unique Federal-State partnership organization, created by the Congress in the Appalachian Regional Development Act of 1965. The Commission is composed of the 13 Governors of the participating States and a Federal representative, the Federal Co-Chairman, a position which I now hold. The statement of purpose of the Appalachian Regional Development Act is "to assist the region in meeting its specific problems, to promote its economic development, and to establish a framework for joint Federal and State efforts toward providing the basic facilities essential to its growth and attacking its common problems and meeting its common needs on a coordinated and concerted regional basis." The statement of purpose also expressly recognized the need for "the provision of essential health, education, and other public services." Thus, while the Commission, strictly speaking, is not a federal agency, as the term is generally used in federal statutes and regulations, the purpose of the Appalachian Act is

such, that--given the apparent objective of the procedures in 22 CFR 514.31--it is entirely consistent with your agency's responsibilities for me to bring this particular case to your attention and to seek your favorable consideration and cooperation in obtaining a waiver for Dr. from the Attorney General.

Dr. is presently awaiting waiver of foreign residence. He has accepted employment with East Gate Shopping Center, Building #2, US Route 52 East, Kermit, Mingo County, West Virginia. He has agreed to provide medical services in Appalachia, at least for two years, and more likely will stay longer. His presence will enable the community to obtain specialized and primary health-care services. Without a person with his skills and training the level of care available to the people of Appalachia would be significantly less.

The Appalachian Regional Development Program has given priority to the development of health and medical resources and services for the people who live in Appalachia. The Region, in general, suffers from a critical shortage of health manpower in both the primary-health care and hospital-based specialties, and for these reasons, we believe the waiver of the two-year foreign residence requirement for Dr. would be in the public interest and the compliance with the two-year residence requirement would clearly be detrimental to programs undertaken under the Appalachian Regional Development Act, by the State of West Virginia, and the Department of Health and Human Services.

Sincerely,

Jacqueline L. Phillips RKA

JACQUELINE L. PHILLIPS
Federal Co-Chairman

Enclosure



APPALACHIAN REGIONAL COMMISSION

OFFICE OF THE
FEDERAL CO-CHAIRMAN
1666 Connecticut Avenue, N.W.
Washington, D.C. 20235
202/673-7856

May 12, 1993

Ms. Jean Peters
Waiver Review Officer
Waiver Review Branch
United States Information Agency
400 6th Street, S.W.
Room 3030
Washington, D.C. 20547

Dear Ms. Peters:

This letter recommends that your agency submit a request to the Attorney General for a waiver of the two-year foreign residency requirement for Dr. . . . Dr. . . . is presently awaiting waiver of foreign residence. Dr. . . . is prepared to provide primary health care services in East Gate Shopping Center Route 52, Kermit, Mingo County, West Virginia. Such waiver is in the public interest. Requiring Dr. . . . to return home would be detrimental to efforts and activities of the State of West Virginia, the Department of Health and Human Services, and the Appalachian Regional Commission (ARC) to provide quality health care for the people of the Appalachian Region.

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Sincerely,



JACQUELINE L. PHILLIPS
Federal Co-Chairman

Enclosure



APPALACHIAN REGIONAL COMMISSION

OFFICE OF THE
FEDERAL CO-CHAIRMAN
1666 Connecticut Avenue, N.W.
Washington, D.C. 20235
202/673-7856

May 27, 1993

Ms. Leslie Marcus
Waiver Review Officer
Waiver Review Branch
United States Information Agency
400 6th Street, S.W.
Room 3030
Washington, D.C. 20547

Dear Ms. Marcus:

This letter recommends that your agency submit a request to the Attorney General for a waiver of the two-year foreign residency requirement for Dr. . . . Dr. . . . is presently awaiting waiver of foreign residence. Dr. . . . is prepared to provide primary health care services at East Gate Shopping Center in Kermit, Mingo County, West Virginia. Such waiver is in the public interest. Requiring Dr. . . . to return home would be detrimental to efforts and activities of the State of West Virginia, the Department of Health and Human Services, and the Appalachian Regional Commission (ARC) to provide quality health care for the people of the Appalachian Region.

As you may recall, the ARC is a unique Federal-State partnership organization, created by the Congress in the Appalachian Regional Development Act of 1965. The Commission is composed of the 13 Governors of the participating States and a Federal representative, the Federal Co-Chairman, a position which I now hold. The statement of purpose of the Appalachian Regional Development Act is "to assist the region in meeting its specific problems, to promote its economic development, and to establish a framework for joint Federal and State efforts toward providing the basic facilities essential to its growth and attacking its common problems and meeting its common needs on a coordinated and concerted regional basis." The statement of purpose also expressly recognized the need for "the provision of essential health, education, and other public services." Thus, while the Commission, strictly speaking, is not a federal agency, as the term is generally used in federal statutes and regulations, the purpose of the Appalachian Act is

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Sincerely,

Jacqueline L. Phillips RKA

JACQUELINE L. PHILLIPS
Federal Co-Chairman

Enclosure

RECEIVED
1993 NOV 30 AM 10 05
HEALTH CARE CONSULTANTS
MARTINSBURG, WV

WILLIAMSON MEMORIAL HOSPITAL, INC.

Establishment of an Ambulatory Health Care Facility

Certificate of Need Applicant:

Health Management Associates of West Virginia, Inc.

CON File #93-2-4157-P

For further information, please contact:

Bill J. Crouch & Associates, Inc.
Health Care Consulting Services
1219 Virginia Street, East
Charleston, WV 25301
(304) 755-2104

The proposed service area outlined in the previous table consists of a portion of northern Mingo County and the southern portion of Wayne County. The HCCRA population projections for these two counties and the percent change in the population from 1990 to 1998, which was used to determine the 1998 magisterial district census projections are as follows:

County	1990	1998	% Change
Mingo	33,739	32,921	97.58%
Wayne	41,636	41,393	99.42%
Total	75,375	74,314	98.59%

(c) Capacity of the Proposed Services

The proposed capacity of the Kermit facility is based on the amount of time that the facility is open and the number of physicians available to provide services. The hours of operation of the proposed clinic will be 8:00 a.m. to 5:00 p.m., four days per week. Staffing will consist of two physicians and a registered nurse who will also function as the receptionist. Each physician will have office hours two days per week, as well as a hospital practice.

Due to the sub-specialties of the physicians who have been recruited for this facility, the applicant is assuming an average of 30 minutes per office visit. One physician, therefore, could see approximately 16 patients per eight (8) hour day, or 32 patients per two (2) day work week. Given these parameters, the capacity of the Kermit facility is estimated at 3,328 patient visits per year. The estimated patient caseload for the facility (i.e. office visits), and the patient visits for the hospital practice (i.e. visits to each physician's patients while they are hospitalized) has been projected as shown in Table 2 below.

Table 2

	FY 1994	FY 1995	FY 1996
Office Visits	1,800	2,000	2,100
Hospital visits	1,080	1,200	1,260
Total	2,880	3,200	3,360

(d) **Capital expenditure**

The capital expenditure for this project is estimated to be approximately \$24,000, which includes the purchase price of all necessary equipment and furniture for the clinic.

(e) **Projected annual operating expense**

The annual operating expenses that have been projected for the Kermit Clinic are as follows:

Table 3

	FY 1994	FY 1995	FY 1996	FY 1997	FY 1998
Operating Expenses	\$248,782	\$252,608	\$255,503	\$260,613	\$265,825

(f) **General organization and management structure**

The physicians recruited to practice at the Kermit clinic will be employed either directly or through contract by Williamson Memorial Hospital. The clinic will be managed by Health Management Associates, Inc. and the advisory Board of Directors identified in Section 2 of this application.

7. NEED ANALYSIS

Provide an analysis of the need for the proposed service based upon five year population projections for the service area and consistent with the State Health Plan objectives.

A. Need Methodology

The need methodology outlined in the State Health Plan, "Standards for Certificate of Need" approved by the Governor on October 5, 1992 which are applicable to this project can be summarized as follows:

- Demonstrate the unmet need for the project;
- Demonstrate that the proposed services will not have a negative impact on the community by significantly limiting the availability and viability of other services or providers; and,
- The proposed services are the most cost effective alternative.

As documented by the West Virginia Health Care Planning Commission, many rural areas of West Virginia have long had a shortage of primary care physicians, including internists, pediatricians and obstetricians. The area in and around Kermit in Mingo County is a good example of an area that experiences difficulty in recruiting and retaining physicians, and consequently has been designated as a health manpower shortage area and a medically underserved area by the U.S. Department of Health and Human Services as is shown in Exhibit 9 on page 33 and Exhibit 10 on page 34.

A report published by the National Association of Community Health Centers, analyzing 1990 data, reported that West Virginia ranks second in the nation (after Arkansas) with regard to the percentage of persons who are at risk for medical under service based on the composition of low income uninsured, non-elderly Medicaid and low income Medicare residents. West Virginia further, was documented as having 45 of its 55 counties with persons at risk for being medically underserved, including the service area proposed in this application. The applicant believes that the ability to provide internal medicine services by trained physicians with additional sub-specialties in cardiology and pulmonary medicine will enhance the quality of care available to the residents of the area in and around Kermit.

Included as Exhibit 11 on pages 35 through 40 are summary statistics from the West Virginia Health Statistics Center for Mingo and Wayne Counties. These data indicate that Mingo County ranks higher than the United States average with respect to most causes of death. In addition, Mingo County is ranked between worst in the state with regard to deaths from heart disease, and second for deaths related to lung cancer, both areas that can be positively impacted by the services of the physicians who will staff

the Kermit clinic. Although Wayne county in total, fares much better in comparison, the areas adjacent to Mingo County will be similar with regard to poor health profiles due to similar working conditions and socio-economic conditions in general.

Mingo County also exhibits poor health practices as shown by the number of births to teenage mothers, with a ranking of third worst in the state.

The major nongovernmental employer in this area consists of timber operations and some coal mines although mechanization has reduced the work force to a fraction of its original base. As a result, the remaining residents of the area are older than the average in West Virginia and will continue to require more medical care over time.

The terrain of the area is difficult, with two rivers, Big Sandy and Tug Fork creating barriers to travel and making physician access at existing hospitals in Logan and Williamson more difficult.

The 1998 projected population of the proposed service area is 16,335 as was shown in Section 3 on page 12. This population results in a physician to population ratio of 1:3,267 based on the five physicians currently practicing in that area. The addition of these two physicians in the service area, will result in a ratio of 1:2,334. The National Association of Community Health Centers recommends a physician to population ratio (i.e. primary care physicians to population) of 1:1,800¹.

Approval of this Certificate of Need Application will not have a negative impact on the community; in fact, should help, to improve the health status of the community and reduce unnecessary utilization to hospital emergency rooms by providing an alternative source of treatment for routine care. In addition, the ability to recruit and retain physicians with sub-specialties in cardiology and pulmonology will result in an opportunity to provide more specialized levels of care than would be possible with the status quo. Since these physicians have admitting privileges at Williamson Memorial Hospital, they will be able to provide a better continuum of care to the residents of the service area.

The alternatives to this project are to:

- Maintain the status quo;
- Provide the services at the hospital;
- Implement the service without using hospital staff.

None of the above alternatives is superior to the project being proposed. Since the area is both medically underserved and a health professional shortage area, the status quo has been determined to be less than satisfactory. Providing these services

¹ Lives in the Balance. A National, State and County Profile of America's Medically Underserved. National Association of Community Health Centers, March 1992.

J-1 Visa Waiver Policy Affidavit and Agreement

I, _____ M.D., being duly sworn, hereby request the Federal co-Chairman of the Appalachian Regional Commission to review my application for the purpose of recommending waiver of the foreign residency requirement set forth in my J-1 Visa, pursuant to the terms and conditions as follows:

1. I understand and acknowledge that the review of this request is discretionary and that in the event a decision is made not to grant my request, I hold harmless the Appalachian Regional Commission (ARC), the Federal Co-Chairman, any and all ARC employees, agents and assigns from any action or lack of action made in connection with this request.
2. I further understand and acknowledge that the entire basis for the consideration of my request is the ARC Federal Co-Chairman's voluntary policy and desire to improve the availability of primary medical care in regions designated by the United States Public Health Service (USPHS) as Health Professions Shortage Areas (HPSA) in Appalachia.
3. I understand and agree that in consideration for a waiver, which eventually may or may not be granted, I shall render primary medical care services to patients, including the indigent, for minimum of forty (40) hours per week within a USPHS designated HPSA located in the ARC jurisdiction. Such service shall commence not later than six (6) months after I receive notification of approval by both the United States Immigration and Naturalization Service (INS) and the United States Department of Labor and shall continue for a period of at least two (2) years.
4. I agree to incorporate all the terms of this J-1 Visa Waiver Affidavit and Agreement into any and all employment agreements I enter pursuant to paragraph 3 and to include in each such agreement a liquidated damages clause, of not less than \$250,000 payable to the employer. This damages clause shall be activated by my termination of employment, initiated by my employer for cause or by me for any reason, only if my termination occurs before fulfilling the minimum two year service requirement.
5. I further agree that any employment agreement I enter pursuant to paragraph 3 shall not contain any provision which modifies or amends any of the terms of this J-1 Visa Waiver Affidavit and Agreement.
6. I also agree to incorporate all terms of this J-1 Visa Waiver Affidavit and Agreement into any employment agreement I enter pursuant to paragraph 3.
7. I understand and agree that my primary medical care services rendered pursuant to paragraph 3 shall be in a Medicare and Medicaid certified hospital of primary health care clinic which has an open, non-discriminatory admissions policy and that will accept medically indigent patients.

8. I have read and fully understand the "ARC Federal Co-Chairman's J-1 Visa Waiver Policy", a copy of which is attached hereto and is specifically incorporated by reference.
9. I expressly understand that this waiver of my foreign service requirement must ultimately be approved by the INS, and I agree to provide written notification of the specific location and nature of my practice to the ARC Federal Co-Chairman at the time I commence rendering services in the ARC jurisdiction and on a semi-annual basis thereafter.
10. I understand and acknowledge that if I willfully fail to comply with the terms of this J-1 Visa Waiver Affidavit and Agreement, the Office of the ARC Federal Co-Chairman will notify the INS and recommend deportation proceedings be instituted against me. Additionally, any and all other measures available to the Office of the ARC Federal Co-Chairman will be taken in the event of my non-compliance.

I declare under the penalties of perjury that the foregoing is true and correct.

3/22/93
Date

Subscribed and sworn before me
this 22 day of March, 1993. gmc

Jean M. Chubb
Notary Public

3/22/93
Date

My Commission expires: 1/31/96



Via Fascimile

July 25, 1994

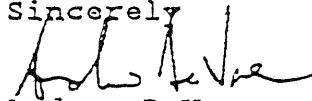
Charles S. Howard
Appalachian Regional Commission
1666 Connecticut Avenue, NW
Washington, D.C. 20235

Dear Charles:

Williamson Memorial Hospital would like to request an extension to the July 25, 1994 deadline for completion of J1 Waiver surveys. The Administrator of this facility is serving his annual reserve obligation and will return the second week of August. The surveys will be forwarded shortly thereafter.

I apologize for the timing of this request. Should you have any questions please do not hesitate to call.

Sincerely


Andrew DeVoe
Controller

No Further Response Received