



November 14, 2017

To: Federal Co-Chair
ARC Executive Director
ARC General Counsel
ARC Assistant General Counsel
From: Hubert Sparks, Inspector General

Subject: OIG Report 18-03; J-1 Waiver Program Visits in New York and Pennsylvania

Attached is the brief report on visits in connection with the J-1 Waiver Program.

The recommendation pertains to compliance with ARC policy for a notice identifying that services will be provided regardless of ability to pay.



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OIG visits to seven medical facilities in New York and Pennsylvania that employed eleven J-1 physicians disclosed the physicians were providing service at the approved locations and meeting the requirements of the J-1 program. This included nine physicians in New York, including seven at four facilities operated by one company and two in Pennsylvania. An issue was noted with respect to patient waiting room notices identifying medical services including services to patients without ability to pay.

The Appalachian Regional Commission supports the J-1 Visa Wavier program by requesting a waiver of immigration requirements for foreign-trained physicians doing residency work in the United States under a J-1 visa. Physicians receiving these waivers must practice for at least three years in rural Appalachian areas that suffer significant shortages of health care providers. These areas, call Health Professional Shortage Areas, are identified by the U.S. Public Health Service. Requests for waivers under the ARC J-1 Visa Program must be sponsored by the state within the Appalachian Region.

The sponsor (medical facility) must demonstrate efforts to attract a U.S. doctor, provide primary medical care for at least 40 hours per week in an eligible area, and provide service without discrimination, including inability to pay for services.

A notice must be posted in a conspicuous location in the patient waiting area at the practice site notifying patients of the charges for services and that health services will be provided at no charge, or at a reduced charge, to persons unable to pay for services.

In three facilities under the auspices of one sponsor in New York the notice included the phrase "Receive treatment without discrimination as to race, religion, sex, national origin, disability, sexual orientation, source of payment or age."

The phrase "source of payment" in the context of no discrimination with respect to the "source of payment" can be interpreted as some measure of payment is required and the notice does not clearly identify service to persons without the ability to pay.

The Corporate Compliance Officer for the sponsor (medical facilities) said the company followed New York State requirements as noted on the attached Patient Bill of Rights posted at the rear of the waiting area. A copy of the ARC J-1 Visa Waiver policy and sample notice was provided to this official.

In one instance a facility in Pennsylvania did not have a notice posted in the waiting area with respect to the ARC policy on service and staff was notified of this requirement.

We concluded that ARC policy with respect to notification about charges including inability to pay was applicable to the ARC J-1 Visa Waiver program.

Thus, ARC should review and determine if the patient notices meet program requirements and initiate actions where applicable to better assure compliance with ARC policy.

ARC concurred and will notify the medical center of the need to post a notice that provides specifically that health care services are provided to individuals without discriminating against them because (a) they are unable to pay for those services or (b) payment for those health services will be made under Medicare and Medicaid.