The Honorable Antony Blinken Secretary of State U.S. Department of State 2201 C Street NW Washington, DC 20520

Dear Secretary Blinken:

As you know, the U.S. currently has a labor shortage in many sectors, not the least of which is the health care industry. The COVID-19 pandemic deeply challenged the entire health care continuum: we are dealing with a significant staff shortage coupled with staff burn-out. To provide the needed care to our nation's frail, elderly, individuals with disabilities and most vulnerable, it is vital that the industry be able to retain and recruit as many employees as it can.

We have been hearing from our members on various issues with staffing shortages, and the implementation of a visa retrogression by the U.S. State Department earlier this year has only further amplified the health care workforce challenges. According to the Department's Visa Bulletin from this month, only green card petitions for international nurses (Employment Based 3rd Preference category) filed earlier than December 1, 2021 may proceed to the interview stage, and all other petitioners currently waiting for an interview are paused. This remains the same for the November Visa Bulletin, which the Department of State just released. Thus, we have now already faced 6 months of visa retrogression.

It is no secret that the United States is projected to experience an aging population surge in the coming years, significantly increasing the demand for health care services. Long term care employers will need to fill 7.9 million job openings in direct care from 2020 to 2030, including 1.2 million new jobs to meet rising demand, and another 6.7 million job openings to replace workers who leave the labor force or transfer to new occupations. With immigrants already making up approximately 1 in 4 direct care workers, the recent green card freeze impacting international nurses has created backlogs, further hindering the recruitment of much-needed workers. The freeze on EB-3 visas for internationally educated nurses has significant implications for health care organizations across the country, delaying their plans to onboard crucial nursing staff and exacerbating the shortage.

While immigration alone cannot resolve this labor crisis entirely, it represents a significant piece of the puzzle in finding a solution. Addressing immigration policies and ensuring a steady influx of qualified health care workers is imperative to meet the rising demand for care. Unfortunately, Congress has not addressed this critical issue through passage of relevant legislation. While the Department of State can't issue immigrant visas for those with priority dates beyond the date on the Visa Bulletin, the Department of State certainly has the authority to expedite appointments for those nurses who do have current visa dates. Thus, we are asking for the Department to help in this manner.

We would also ask the Department to bring the dates current for this important category (EB3). Those applicants who are outside the U.S. without a temporary visa option (like nurses) are at a disadvantage when the "Final Action" dates do not progress. Making the dates current could at least give those overseas a more equal footing with those applicants who are in the U.S. and able to proceed with I-485 filing (and receive work authorization).

Thus, our request is two-fold:

- 1. Prioritize nurse cases at Embassies and Consulates outside the U.S. for those nurses who have current priority dates; and
- 2. Consider moving the dates current effective for the December visa bulletin for at least the EB3 category, to allow nurses outside the U.S. to proceed with immigrant visa interviews.

If you have any questions or would like to visit with any of the undersigned organizations, please contact the American Health Care Association's Dana Ritchie at dritchie@ahca.org.

Sincerely,

Advancing Excellence in Long-Term Care Collaborative

ADVION (formerly National Association for the Support of Long Term Care)

AMDA – The Society for Post-Acute and Long-Term Care Medicine

American Assisted Living Nurses Association (AALNA)

American Association of Post-Acute Care Nursing (AAPACN)

American Health Care Association (AHCA)

American Seniors Housing Association (ASHA)

Argentum

Association of Jewish Aging Services (AJAS)

LeadingAge

Lutheran Services in America

National Association of State Veterans Homes (NASVH)

National Center for Assisted Living (NCAL)

National Rural Health Association (NRHA)

Pediatric Complex Care Association