

September 29, 2025

The Honorable Kristi Noem  
Secretary  
U.S. Department of Homeland Security  
3801 Nebraska Avenue NW  
Washington, D.C. 20528

**RE: Restriction on Entry of Certain Nonimmigrant Workers**

Dear Secretary Noem:

On behalf of the American Academy of Family Physicians (AAFP), representing 128,300 family physicians, residents, and medical students across the country, I write to express concern regarding the recent [Presidential Proclamation](#) imposing a \$100,000 fee on applications to the H-1B visa program and how it may impact America's healthcare workforce. While we appreciate the Administration's aims to prevent abuse of this program and protect American workers, if inappropriately applied to foreign-trained physicians, this policy could severely weaken the nation's healthcare workforce, threaten rural and underserved American's access to primary care, and undermine President Trump's mission to Make America Healthy Again.

President Trump has repeatedly made clear that addressing the nation's rising rates of chronic conditions is a [priority for his administration](#). Nearly 95 percent of adults 60 years and older have at least one chronic condition, and nearly 80 percent have two or more.<sup>i</sup> This is only projected to worsen in the coming years, as the population continues to age and the number of adults 50 years and older with at least one chronic disease is estimated to increase by almost 100 percent.<sup>ii</sup> The AAFP shares the administration's belief that it is critically important for the U.S. to work to prevent chronic illnesses and stop this projection from becoming a reality.

**Primary care is the only health care component where an increased supply is associated with better population health and improved patient outcomes.<sup>iii</sup>** Access to longitudinal, coordinated, comprehensive primary care has been shown to increase utilization of preventive care;<sup>iv</sup> improve outcomes for patients with chronic conditions;<sup>v</sup> and reduce costly emergency visits,<sup>vi</sup> hospitalizations,<sup>vii</sup> and unnecessary specialty outpatient visits.<sup>viii</sup>

Despite the overwhelming evidence to support primary care as the solution to the chronic disease crisis, **it is projected that the U.S. will face a shortage of up to 40,000 primary care physicians by 2036.<sup>ix</sup>** International Medical Graduates (IMGs) are indispensable to the U.S. primary care workforce. Due to U.S. medical graduates being less likely to practice in [rural](#) and underserved areas, IMGs are twice as likely to

September 29, 2025  
Page 2 of 3

practice primary care in the U.S. in these settings.<sup>x</sup> Further, recent data shows that more than 14,000 physicians with H-1B visas were practicing in the United States in 2022, with higher proportions serving in safety-net hospitals, rural communities, and states with lower physician density than U.S. medical graduates.<sup>xi</sup>

**We want a healthier America, just as this administration does, and a healthier America requires a robust primary care workforce to support patients.**

Section 1(c) of the Proclamation grants you, as Secretary, discretion to exempt workers whose entry is in the “national interest.” We strongly recommend that DHS create an exception to the \$100,000 H-1B application fee for physicians, especially those committed to practicing primary care, assign favorable weighting to these applications, and fast-track their processing. Doing so will help maintain a robust pipeline of international medical graduates and support the health and well-being of communities across America.

The AAFP appreciates your consideration of our concerns and suggested solutions. We remain committed to working with the Department and other stakeholders to advance responsible visa policies that will help bolster our health care workforce and advance access to high-quality primary care for every individual. For more information or questions, please contact Kate Gilliard, Sr. Manager, Federal Policy and Regulatory Affairs at [kgilliard@aafp.org](mailto:kgilliard@aafp.org).

Sincerely,



Steven P. Furr, MD, FAAFP  
Board Chair  
American Academy of Physicians

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<sup>i</sup> National Council on Aging. Chronic Inequities: Measuring Disease Cost Burden Among Older Adults in the U.S. A Health and Retirement Study Analysis. Page 5, Figure 2. April 2022.

<https://ncoa.org/article/theinequities-in-the-cost-of-chronic-disease-why-it-matters-for-older-adults>.

<sup>ii</sup> Ansah JP, Chiu CT. Projecting the chronic disease burden among the adult population in the United States using a multi-state population model. *Front Public Health*. 2023 Jan 13;10:1082183. doi: 10.3389/fpubh.2022.1082183. PMID: 36711415; PMCID: PMC9881650.

<sup>iii</sup> National Academies of Sciences, Engineering, and Medicine. 2021. *Implementing High-Quality Primary Care: Rebuilding the Foundation of Health Care*. Washington, DC: The National Academies Press. <https://doi.org/10.17226/25983>.

September 29, 2025  
Page 3 of 3

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<sup>iv</sup> *Implementing High-Quality Primary Care: Rebuilding the Foundation of Health Care*. Washington, DC: The National Academies Press. <https://doi.org/10.17226/25983>

<sup>v</sup> Zhang, Y., Stokes, J., Anselmi, L., Bower, P., & Xu, J. (2025). Can integrated care interventions strengthen primary care and improve outcomes for patients with chronic diseases? *Health Research Policy and Systems*, 23(5). <https://doi.org/10.1186/s12961-024-01260-1>

<sup>vi</sup> O'Lawrence, H., Vargas, A., Martinez, L., & Perley, R. M. (2024). Impact of primary care utilization and insurance on emergency department visits. *Journal of Community Medicine and Public Health Reports*, 5(4). <https://doi.org/10.38207/JCMPHR/2024/FEB05040128>

<sup>vii</sup> Lyhne, C. N., Bjerrum, M., Riis, A. H., & Jørgensen, M. J. (2022). Interventions to prevent potentially avoidable hospitalizations: A mixed methods systematic review. *Frontiers in Public Health*, 10, 898359. <https://doi.org/10.3389/fpubh.2022.898359>

<sup>viii</sup> Hostetter, J., Schwarz, N., Klug, M., Wynne, J., & Basson, M. D. (2020). Primary care visits increase utilization of evidence-based preventative health measures. *BMC Family Practice*, 21, Article 151. <https://doi.org/10.1186/s12875-020-01216-8>

<sup>ix</sup> GlobalData Plc. March 2024. The Complexities of Physician Supply and Demand: Projections From 2021 to 2036. AAMC. <https://www.aamc.org/media/75236/download>.

<sup>x</sup> American Medical Association. October 19, 2021. How IMGs Have Changed the Face of American Medicine. <https://www.ama-assn.org/education/international-medical-education/how-imgs-have-changed-face-american-medicine>.

<sup>xi</sup> Ying X, Reznik E, Chen V, Lee M, Rosenblatt R, Jesudian A. Geographic Distribution of Physician Workforce with H-1B in the United States. *Journal of General Internal Medicine*. Published online July 22, 2025. doi:10.1007/s11606-025-09757-3.