

# STATE OF CONNECTICUT

## DEPARTMENT OF PUBLIC HEALTH

### J-1 Visa Waiver

The Connecticut Department of Public Health participates in the J-1 Visa waiver program, also known as the “Conrad 30” program. Under this program the Department may recommend up to thirty (30) applications, per federal fiscal year, for waiver of the two (2) year home residency requirement, pursuant to Section 220 of Public Law 103-416 and the Regulations of Connecticut State Agencies 19a-2a-24 through 19a-2a-26 (attached). The program requirements are:

1. The Connecticut licensed foreign medical graduate (FMG) must commit to three (3) years of full-time professional service at a health facility in an area in Connecticut designated by the Secretary of the United States Department of Health and Human Services (USDHHS) as a Health Professional Shortage Area (HPSA), Medically Underserved Area (MUA) or Medically Underserved Populations (MUP).

2. The Chief Administrator (Chief Administrative Officer/President/Administrator) of a Connecticut health care facility located in an HPSA, MUA or MUP shall file a completed application to the Department on behalf of the prospective physician. The application shall be in support of a physician licensed in Connecticut pursuant to Chapter 370, Connecticut General Statutes.

3. A health care facility means a medical facility for the delivery of health services located in an area designated by the United States Secretary of Health and Human Services as having a shortage of health care professionals and includes: (1) a community health center, public health center, outpatient medical facility, or community mental health center; (2) a hospital, state mental hospital, facility for long-term care, or rehabilitation facility; (3) a migrant health center of an Indian Health Service facility; (4) a facility for the delivery of health services to inmates in a U.S. penal or correctional institution (under the Public Health Service Act) or a state correctional institution; (5) a Public Health Service Medical Facility used in connection with the delivery of health services under section 320 through 326 of the Public Health Services Act; or (6) any other Federal medical facility.

4. If an application contains all of the necessary documentation, the application may be approved by the Department and forwarded to the United States Department of State. If information is missing from the application, the Department shall not approve the application.

5. The submission of a complete waiver application to the Department does not ensure that the Department will recommend a waiver be issued. In all instances the Department reserves the right, pursuant to the Regulations, to recommend or decline any waiver request.

6. The Department shall forward to the United States Department of State the first thirty approved applications in the fiscal year. The Department shall request the United States Department of State to recommend that the United States Attorney General grant J-1 VISA waivers to such twenty applicants.

7. Applications not referred to the United States Department of State will be kept on file and may be referred to the United States Department of State later in that same fiscal year, in the event that any of the first twenty applications sponsored by the Department are denied at the federal level.

*Phone: (860) 509-7590  
Telephone Device for the Deaf (860) 509-7191  
410 Capitol Avenue – MS # 12 APP  
P.O. Box 340308 Hartford, CT 06134  
An Equal Opportunity Employer*

## APPLICATION

Waiver applications will only be considered for the federal fiscal year (October 1 through September 30) in which they are marked by this office to the United States Department of State.

### PLEASE DO NOT STAPLE OR USE PAPER CLIPS IN ANY WAY

To apply for a waiver, the applicant must first obtain a waiver review number from the United States Department of State. Please refer to the State Department's web site [http://www.travel.state.gov/visa/tempvisitors\\_info\\_waivers.html](http://www.travel.state.gov/visa/tempvisitors_info_waivers.html). Current instructions for obtaining a waiver review number may be found at this site. Please follow the instructions for a "Request by a designated State Department of Health, or its equivalent". **Please insure that your waiver review number is on each page submitted in support of your application.**

The waiver application shall consist of the following and be sent directly to this office:

1. A completed Data Sheet (a current Data Sheet may be downloaded at the U.S. Department of State's web site at [www.travel.state.gov](http://www.travel.state.gov)) **AND** Form DPH-1 (DPH-1 enclosed);
2. A statement, on facility letterhead, from the Chief Administrator (Chief Administrative Officer/President/Administrator) of the Connecticut health care facility located in a HPSA, MUA or MUP indicating the name of the facility, the name of the physician on whose behalf the application is being submitted, the name of the facility contact person who this Department may contact regarding the application and such person's telephone and fax numbers;
3. A signed copy of the employment contract between the licensed FMG and the employing institution that indicates the name and address of both parties and the specific geographic area or areas, designated by the USDHHS as having a shortage of health care professionals, in which the licensed physician will practice primary care medicine. The employment contract shall include a statement by the foreign medical graduate that he or she agrees to meet the requirements set forth in section 214(1) of the Immigration and Nationality Act and that the physician agrees to begin employment in such facility within ninety days of issuance of the waiver. The contract shall stipulate that the physician will work for no less than three (3) years in a primary medical service for at least forty (40) hours per week;
4. Legible copies of all IAP-66 forms issued to the licensed FMG requesting the waiver;
5. Current evidence of the shortage area designation, along with the Census Tract number for the HPSA, MUA or MUP of the health care facility in which the J-1 Visa applicant will be practicing (Form DPH-1 enclosed);
6. Evidence that efforts to recruit an American physician have failed (i.e. copies of advertisements for vacant positions);
7. A current curriculum vitae, including Connecticut license number, date issued, specialty area of practice and exact dates of post graduate medical training completed.

Should you have questions regarding the application process, please contact the Office of Practitioner Licensing and Certification, Bureau of Healthcare Systems at (860) 509-7563.

Should you have questions regarding the HPSA, MUA or MUP status of a health care facility, you may access information from the United States Department of Health and Human Services, Health Resources and Services Administration, Bureau of Primary Health Care, Division of Shortage Area Designation or contact this Department's Planning Branch at (860) 509-7658.

Please forward the unbound, completed application to:

Department of Public Health  
J-1 Visa Waiver  
410 Capitol Ave., MS# 12 APP  
P.O. Box 340308  
Hartford, CT 06134-0308

# STATE OF CONNECTICUT

## DEPARTMENT OF PUBLIC HEALTH

### FORM DPH-1 Evidence of Current Shortage Area Designation

The Chief Administrator (Chief Administrative Officer/President/Administrator) of the health care facility shall complete the information required below and include this form with the application.

Name of Facility: \_\_\_\_\_ License No.: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Facility Census Tract No.: \_\_\_\_\_ Type of Shortage Area: \_\_\_\_\_  
(i.e. Primary Care or Mental Health)

HPSA  yes  no Service Area Number, including Census Tract Numbers: \_\_\_\_\_  
If population designation, please describe group: \_\_\_\_\_

MUA  yes  no Service Area Number, including Census Tract Numbers: \_\_\_\_\_  
If population designation, please describe group: \_\_\_\_\_

MUP  yes  no Service Area Number, including Census Tract Numbers: \_\_\_\_\_  
If population designation, please describe group: \_\_\_\_\_

Name of Foreign Medical Graduate: \_\_\_\_\_ Specialty: \_\_\_\_\_

Connecticut License No.: \_\_\_\_\_

Country of Origin: \_\_\_\_\_

\*\*\*\*\* (FOR OFFICE USE ONLY)\*\*\*\*\*

The Department of Public Health has determined that the facility referenced above is located in an area designated by the United States Department of Health and Human Services as a health professional shortage area.

\_\_\_\_\_  
Signature of Authorized Representative of BCH

\_\_\_\_\_  
Date

Comments (Only required if the above IS NOT designated as a shortage area): \_\_\_\_\_  
\_\_\_\_\_

Phone: (860) 509-7590  
Telephone Device for the Deaf (860) 509-7191  
410 Capitol Avenue – MS # 12 APP  
P.O. Box 340308 Hartford, CT 06134  
An Equal Opportunity Employer

## FEDERAL SHORTAGE DESIGNATION INFORMATION\*, CT. TOWNS

COUNTY NAME	TOWN NAME	MUA/MUP			HPSA			
		MUA/P ID #	Census Tracts Range	Type: Population, Area, or Governor's	HPSA Shrtg Area #	Census Tracts Range	Type: Area, CHC, Facility, or Population	Discipline Primary Care (PC) or (MH) Mental Health
New Haven	Ansonia				933	1252-4	population	PC:low income
New Haven	"				917	1252-4	population	MH:low income
New London	Bozrah	(473)	7131	population				
Fairfield	Bridgeport	484	702-6;708-10	area	905	702-712	area	Primary Care
Fairfield	"		713-17;735-6; 485 738-742	area	923	713-714; 716-719; 735-740;743-744	area	Primary Care
Fairfield	"				963+	Community Health 952 Centers	CHC	Primary Care
Fairfield	"				926	Community Health Center	CHC	Mental Health
Hartford	Bristol	4013	4057, 4061	area	956	4051,4057,4060.01, 4061	population	PC:low income
Fairfield	Danbury	465	2101-2114	population	932	2101-2, 2106-7	population	PC:low income
Fairfield	"				945	Danbury FCI	prison	Primary Care
Hartford	East Hartford	469	5101-5114	population	940	5102-8, 5112-13	population	PC:low income
Hartford	"				955	Community Health Center	CHC	Primary Care
Hartford	"				929	Community Health Center	CHC	Mental Health
New London	East Lyme				916	York CCI of Niantic	prison	Mental Health
Tolland	Ellington				(964)	Ellington Town	area	Primary Care
Hartford	Enfield				942	4805-7	population	PC:low income
New London	Franklin	(473)	7121	population				
New London	Griswold	(473)	7091-7092	population				

  

COUNTY NAME	TOWN NAME	MUA/MUP			HPSA			
		MUA/P ID #	Census Tracts Range	Type: Population, Area, or Governor's	HPSA Shrtg Area #	Census Tracts Range	Type: Area, CHC, Facility, or Population	Discipline Primary Care (PC) or (MH) Mental Health
New London	Groton	487	7022-7023	area	958	7022.01-.02; 7023; 7025; 7027	area	Primary Care
Hartford	Hartford	488, 5005, 489	5020	area	902	5005; 5008-18; 5020- 22; 5031-42; 5044	area	Primary Care
Hartford	"		5008-15; 5017-19; 5028-30; 480 5035;5037	area	912	5001-4;5019;5027- 30; 5043; 5045-6; 5049	area	Primary Care
Hartford	"		481 5045-6; 5049	area	931	5001-5; 5009-15; 5017-8; 5021;5023-4; 5026-37;5045;5048-9	population	MH:low income

Hartford	"				951 +953	Community Health Centers	CHC	Primary Care
Hartford	"				925 +927	Community Health Centers	CHC	Mental Health
Windham	<b>Killingly</b>	(475)	9041	population	(943)	9044-5	population	PC:low income
New London	<b>Lisbon</b>	(473)	7101	population				
Tolland	<b>Mansfield</b>					957 8812-8813	population	PC:low income
			1701.01-.02; 1702.01-.02;			1701.01-.02; 1702.01-.02; 1703,		
New Haven	<b>Meriden</b>	477	1703-1717	Governor's	924	1710,1714-15	population	PC:low income
Middlesex	<b>Middletown</b>	479	5416	area	946	Community Hlth Ctr	CHC	Primary Care
Middlesex	"				920	Community Hlth Ctr	CHC	Mental Health
New London	<b>Montville</b>	(473)	6951-6952.02 4159-62; 4166; 4168;4171-2;	population				
Hartford	<b>New Britain</b>	468	4174-5	population		4153-63; 4165-7; 935 4171-3	population	PC:low income
New Haven	<b>New Haven</b>	482	1402-8;1415-6	area	(936)	1401-1409; 1412-20 1421-5;1426.01-.02;	population	PC:low income
New Haven	"	483	1421-1426.02	area	910	1427	area	Primary Care
			<b>MUA/MUP</b>				<b>HPSA</b>	
			<i>Medically Underserved</i>				<i>Health Professional Shortage Area</i>	
			<b>Type:</b>				<b>Type:</b>	<b>Discipline</b>
			Population, Area, or Governor's		<b>HPSA</b>		Area,CHC, Facility,or Population	Primary Care (PC)or (MH) Mental Health
<b>COUNTY NAME</b>	<b>TOWN NAME</b>	<b>MUA/P ID #</b>	<b>Census Tracts Range</b>		<b>Area #</b>	<b>Census Tracts Range</b>		
New Haven	N.H.(cont.)				947+			
New Haven	"				948	Community Hlth Ctrs	CHC	Primary Care
New Haven	"				921 +922	Community Hlth Ctrs	CHC	Mental Health
New London	<b>New London</b>	486	6902; 6905-6	area		911 6901; 6903-5; 6907-8	population	PC:low income
Fairfield	<b>Norwalk</b>	466	440-2; 444-5	population		959 CHC Look-alike	CHC	Primary Care
Fairfield	"					933 CHC Look-alike	CHC	Mental Health
New London	<b>Norwich</b>	(473)	6961-70	population		928 6961; 6964-6970	population	PC:low income
New London	"					961 CHC Look-alike	CHC	Primary Care
Windham	<b>Plainfield</b>	(475)	9071-9073	population	(943)	9071-2	population	PC:low income
New London	<b>Preston</b>	(473)	7001-2	population				
New London	<b>Sprague</b>	(473)	7111	population				
Fairfield	<b>Stamford</b>	476	222,223	area		201;214-217;218.01; 941 218.02; 220-223	population	PC:low income
Fairfield	"					201;214-15;217; 932 218.02; 220-3	population	MH:low income
Windham	<b>Sterling</b>	(475)	9081	population				
Fairfield	<b>Stratford</b>	467	801-804	population		934 803-804	population	PC:low income
Tolland	<b>Tolland</b>				(964)	Tolland Town	area	Primary Care
			3101-3;3105;			3101-3; 3105;		
Litchfield	<b>Torrington</b>	470	3108.01	population		944 3108.01-3108.02	population	PC:low income
Litchfield	"					962 CHC Look-alike	CHC	Primary Care
Tolland	<b>Vernon</b>	474	5301-5302	population	(964)	Vernon Town	area	Primary Care
New London	<b>Voluntown</b>	(473)	7081	population				

COUNTY NAME	TOWN NAME	MUA/P ID #	Census Tracts Range	MUA/MUP <i>Medically Underserved</i> <b>Type:</b> Population, Area, or Governor's	HPSA Shrtg Area #	Census Tracts Range	HPSA <i>Health Professional Shortage Area</i>		
							Type: Area,CHC, Facility,or Population	Discipline Primary Care (PC)or (MH) Mental Health	
New Haven	<b>Waterbury</b>		490, 3501, 472 3502-5;3514	area		3501-6; 3508; 3512;	920 3514; 3517	population PC:low income	
New Haven	"		491, 3508, 492 3512	area		954 Community Hlth Ctr	CHC	Primary Care	
New Haven	Wtby(cont.)					928 Community Hlth Ctr	CHC	Mental Health	
New Haven	<b>West Haven</b>		471 1541-1551	population	(936)	1544-45		population PC:low income	
Windham	<b>Windham</b>		478 8001-8005	Governor's		925 Windham Town		population PC:low income	
Windham	"					949 Community Hlth Ctr	CHC	Primary Care	
Windham	"					930 Windham Town		population MH:low income	
Windham	"					923 Community Hlth Ctr	CHC	Mental Health	

See below for Source information and other Notes.

### Source information and other Notes

**Sources:** USDHHS,HRSA,BHP,SDB a)for HPSA data: 2/20/2002 Federal Register with updates on-line at the Internet site thru Dec.5, 2006 <http://hpsafind.hrsa.gov/> and b)for MUA/MUP data:on-line at the Internet site <http://muafind.hrsa.gov>

**CENSUS TRACT** information is available from the U.S.Bureau of the Census at (301)457-1128 or at their web site <http://www.census.gov> where you click on 1) "American Factfinder" from the left-hand column of the home page, and 2) "Enter a street address" from the column of the next page which will bring you to the screen where you enter the address you have in mind to learn its census tract number. The final Census web page also offers more demographic information[Go button] and a map[map button] of the census tract or minor area you highlight.

A street address' corresponding census tract may also be determined at <http://www.ffiec.gov/geocode/default.htm> <http://www.census.gov/>

**\*NOTE:Designation status is subject to change.** MUA/P data effective Dec,2004. All HPSA data are based on the Federal Register of February 2002 with updates from the federal web site through December 5, 2006. Dental HPSA information is available on the Internet, but not included in this spreadsheet. For updates refer to: 1) federal information number 1-800-400-BPHC, 2) Internet location or 3) call CT. Dept. of Public Health,Planning Branch, Hartford (860)509-7658. MUA/P ID and HPSA Shrtg Area numbers that appear in parentheses are part of a multi-town designation.

Recent legislation has made federally-recognized Community Health Centers eligible for "automatic" CHC type HPSA designations. The federal website is not reflecting all of these changes yet.