



NATIONAL
RURAL HEALTH
RESOURCE CENTER

Rural Health Workforce Resources: Delta Doctors and AmeriCorps NCCC

June 2, 2022



NATIONAL
RURAL HEALTH
RESOURCE CENTER

Delta Region Community Health System Development (DRCHSD) Program Supported By:



Delta Regional Authority

U.S. Department of Health & Human Services



HRSA

Federal Office of Rural Health Policy

This project is supported by the Health Resources and Services Administration ([HRSA](#)) of the U.S. Department of Health and Human Services ([HHS](#)) under grant number U65RH31261, Delta Region Health Systems Development, \$10,000,000 (0% financed with nongovernmental sources). This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by [HRSA](#), [HHS](#) or the U.S. Government.



NATIONAL
RURAL HEALTH
RESOURCE CENTER

Diversity, Equity, Inclusion, & Anti-racism



Building a culture where difference is valued.

The Center is committed to DEI and anti-racism. We create an environment that reflects the communities we live in and serve; a place where everyone feels accepted and empowered to be their full, authentic selves; and where everyone belongs.

We understand the impact of and seek to defeat racism and discrimination in ourselves, our workplace, and the world. This guides how we cultivate leaders, build our programs and resources, and deliver our technical assistance.

We are an organization that honors, celebrates, and respects all dimensions of diversity. These principles are central to our mission and to our impact.

[Read more at ruralcenter.org/DEI](https://ruralcenter.org/DEI)



NATIONAL
RURAL HEALTH
RESOURCE CENTER

Today's Speakers



Christina Wade
Health Program Manager,
Delta Regional Authority



Tamika Eatmon
Assistant Program Director,
AmeriCorps NCCC Southern
Region



**CREATING JOBS.
BUILDING COMMUNITIES.
IMPROVING LIVES.**



Alabama | Arkansas | Illinois | Kentucky | Louisiana | Mississippi | Missouri | Tennessee

DELTA DOCTORS



Delta Doctors

A Program of the Delta Regional Authority

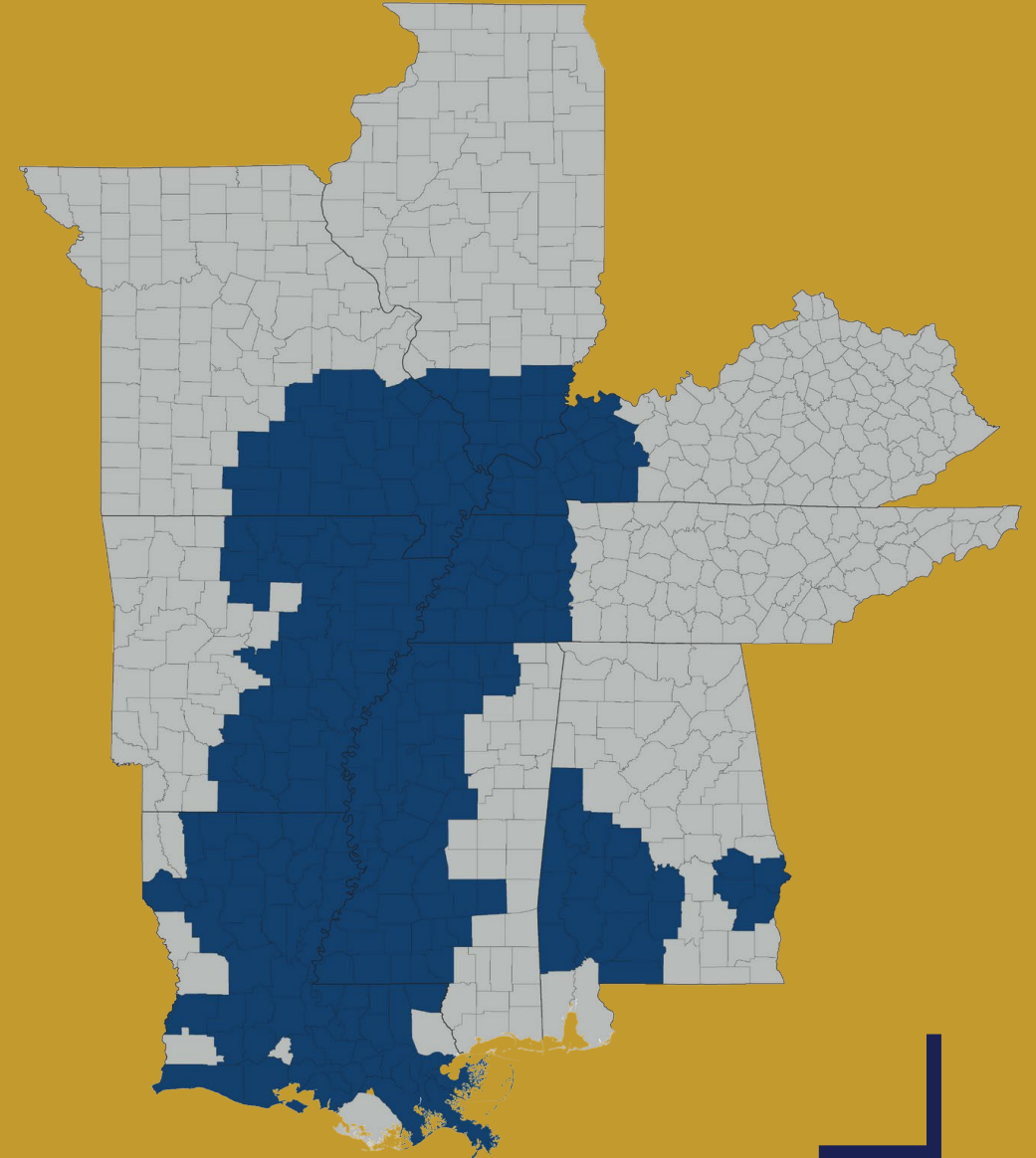
About the Delta Regional Authority

Established in 2000 by Congress, the Delta Regional Authority (DRA) makes strategic investments of federal appropriations into the physical and human infrastructure of DRA communities. These investments strengthen basic public infrastructure, transportation improvements, workforce training, and small business development. DRA supports economic development and job creation through innovative approaches to fostering local and regional leadership, training workers for in-demand careers, diversifying opportunities for small businesses and entrepreneurs seeking affordable capital and increasing access to quality healthcare.



THE DRA REGION

The 252 counties and parishes served by DRA make up one of the most distressed areas in the country. DRA is poised to work with local, state, and federal leaders to bring investments and opportunities that support job creation, build communities, and improve the lives of those living in the DRA Region.





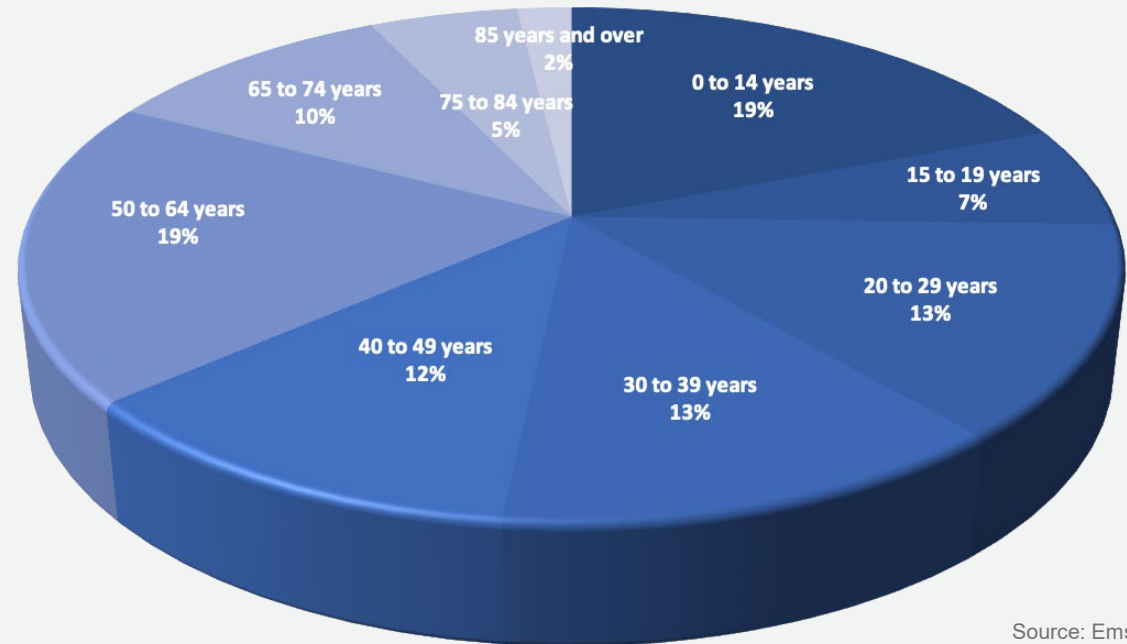
POPULATION SNAPSHOT

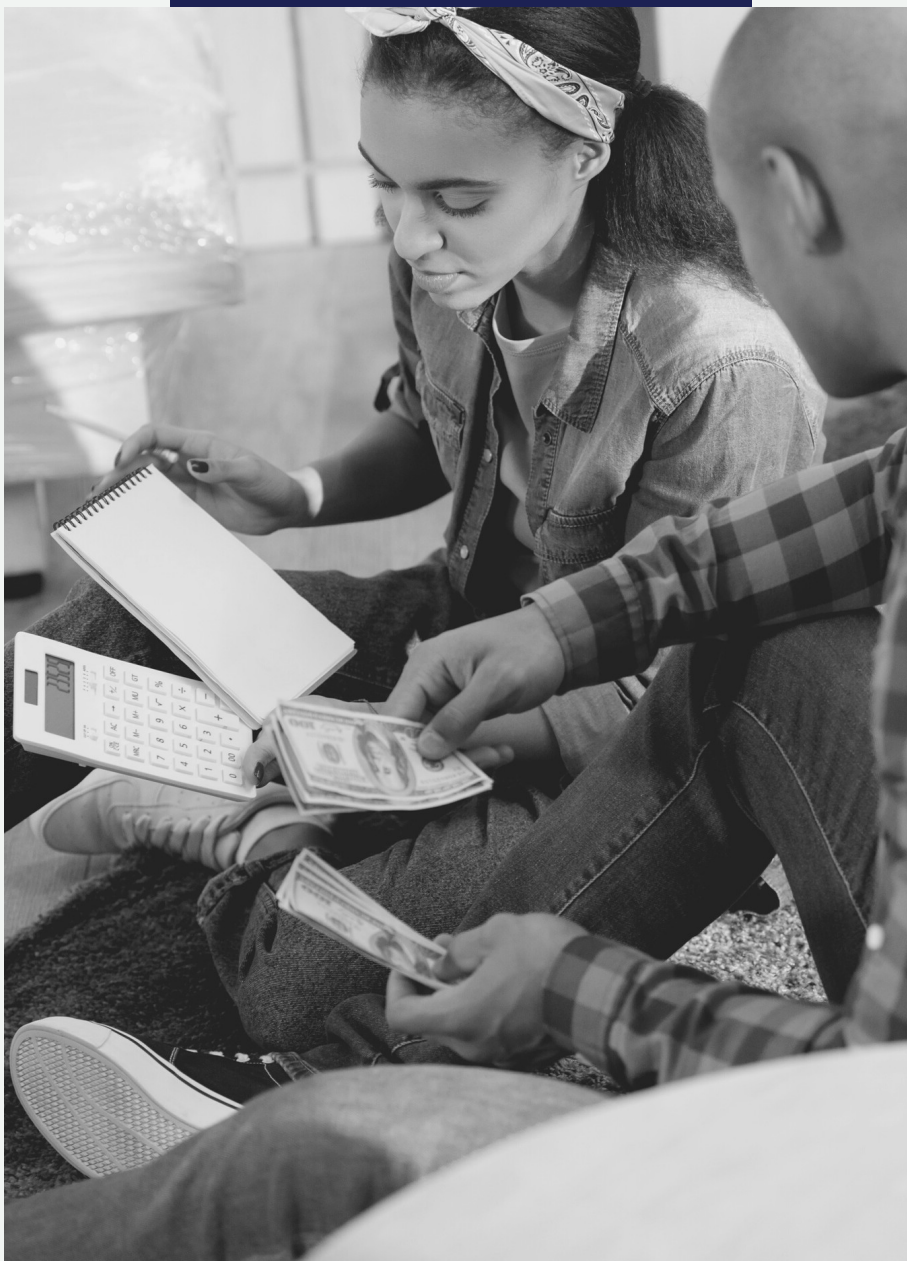


Total Population (2020): 10,019,628

Female: 5,137,509

Male: 4,882,119

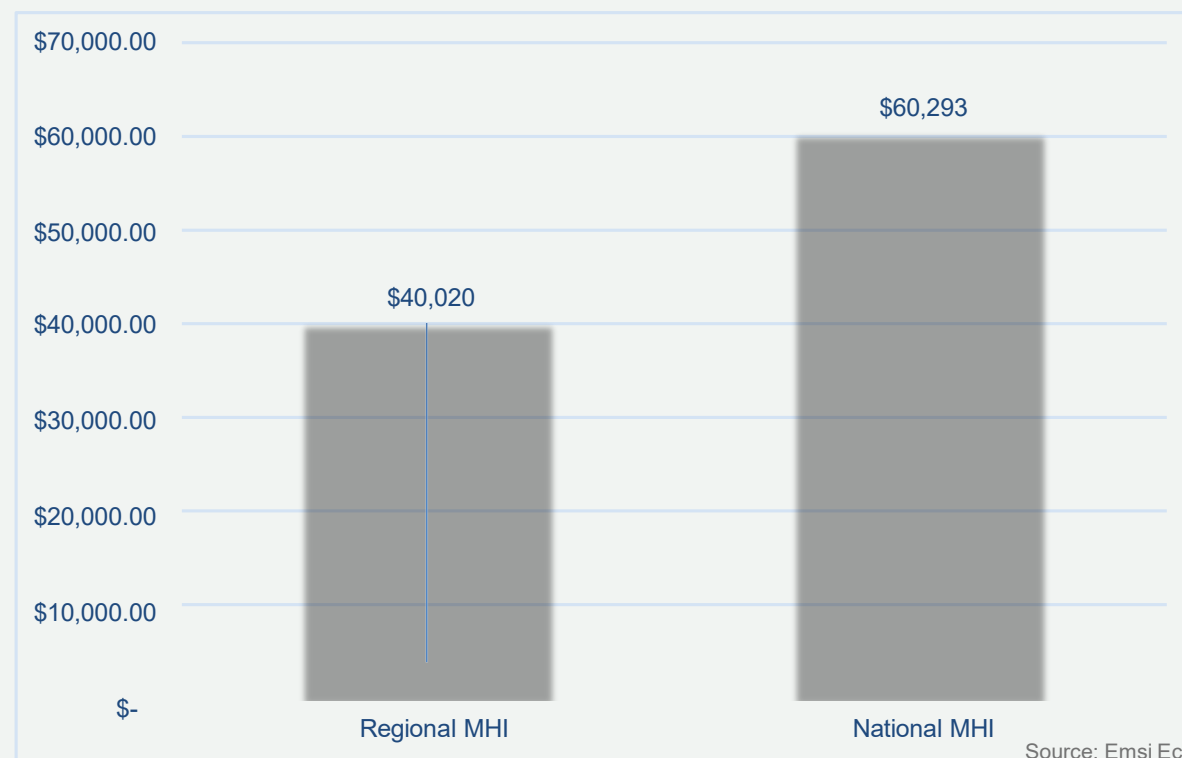




INCOME IN THE DELTA

Median Household Income (2020)

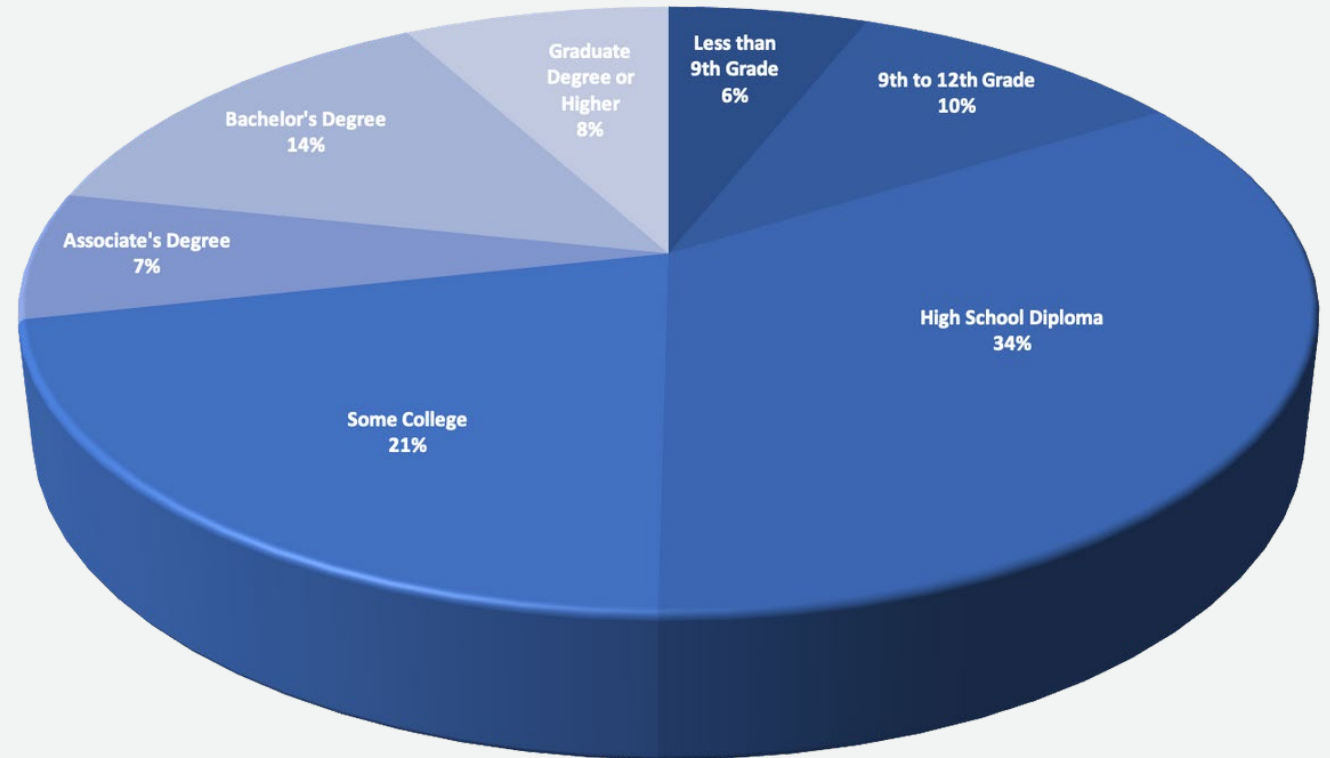
Of the 252 DRA counties and parishes, 245 (97%) have a MHI below the national median. The lowest county-level MHI is Jefferson County, MS (\$20,188). The highest is Ascension Parish, LA (\$76,589).



Source: Emsi Economic Modeling



EDUCATION IN THE DELTA



Concerning educational attainment, 14% of residents possess a Bachelor's Degree (*5% below the national average*), and 7% hold an Associate's Degree (*1.5% below the national average*).



COMMITTED TO PROMOTING A HEALTHY DELTA



HEALTH IN THE DELTA

DRA is committed to improving health outcomes throughout the region. Our belief is that health is an economic engine and will drive future economic growth. However, the growing incidence of chronic disease in DRA communities poses a threat to the lives, livelihoods, productivity, and economic vitality of the region. In recent years, commissioned studies have shown a direct correlation between economic vitality and health, measured through changes in life expectancy, emphasizing the link between poor health outcomes and poverty.

Healthcare Access in the Delta



241

Health Professional Shortage Area

All or parts of 241 DRA counties and parishes are considered primary care Health Professional Shortage Areas (HPSAs) - defined as having shortages of primary medical care, dental or mental health providers and may be defined as geographic, population or facilities.

244

Medically Underserved Areas

All or parts of 244 DRA counties and parishes are considered Medically Underserved Areas (MUAs) - defined as having too few primary care providers, high infant mortality, high poverty or a high elderly population.



Access to Primary Care Providers

1504:1

Ratio of Population to Primary Care Physician

Access to care requires not only financial coverage, but also access to providers. While high rates of specialist physicians have been shown to be associated with higher utilization, sufficient availability of primary care physicians is essential for preventive and primary care, and, when needed, referrals to appropriate specialty care. The World Health Organization (WHO) has promulgated desirable population-doctor ratio as 1000:1.

DELTA DOCTORS

To increase access to quality healthcare in DRA communities, DRA established the Delta Doctors program, which allows foreign physicians who are trained in this country to work in medically underserved areas or health professional shortage areas for three years through a J-1 visa waiver. Those in the Delta Doctors program do not take jobs away from U.S.-born physicians. Instead, these physicians provide critical medical services in areas with a physician shortage.

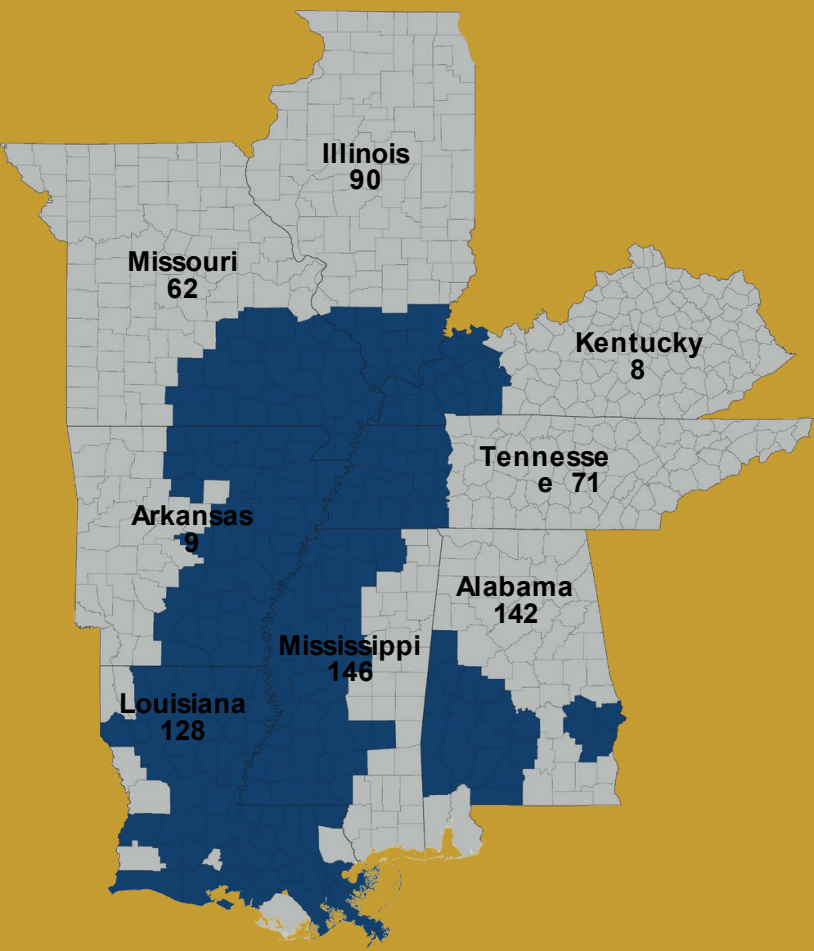


U.S. Department of State

DRA is able to recommend J-1 visa waivers to the U.S. Department of State. Medical school graduates from other countries normally are required to return to their home countries for at least two years after they complete their education; however, the J-1 visa waiver obtained under the Delta Doctors program allows graduates to stay in the United States if they spend at least three years in a medically underserved area.

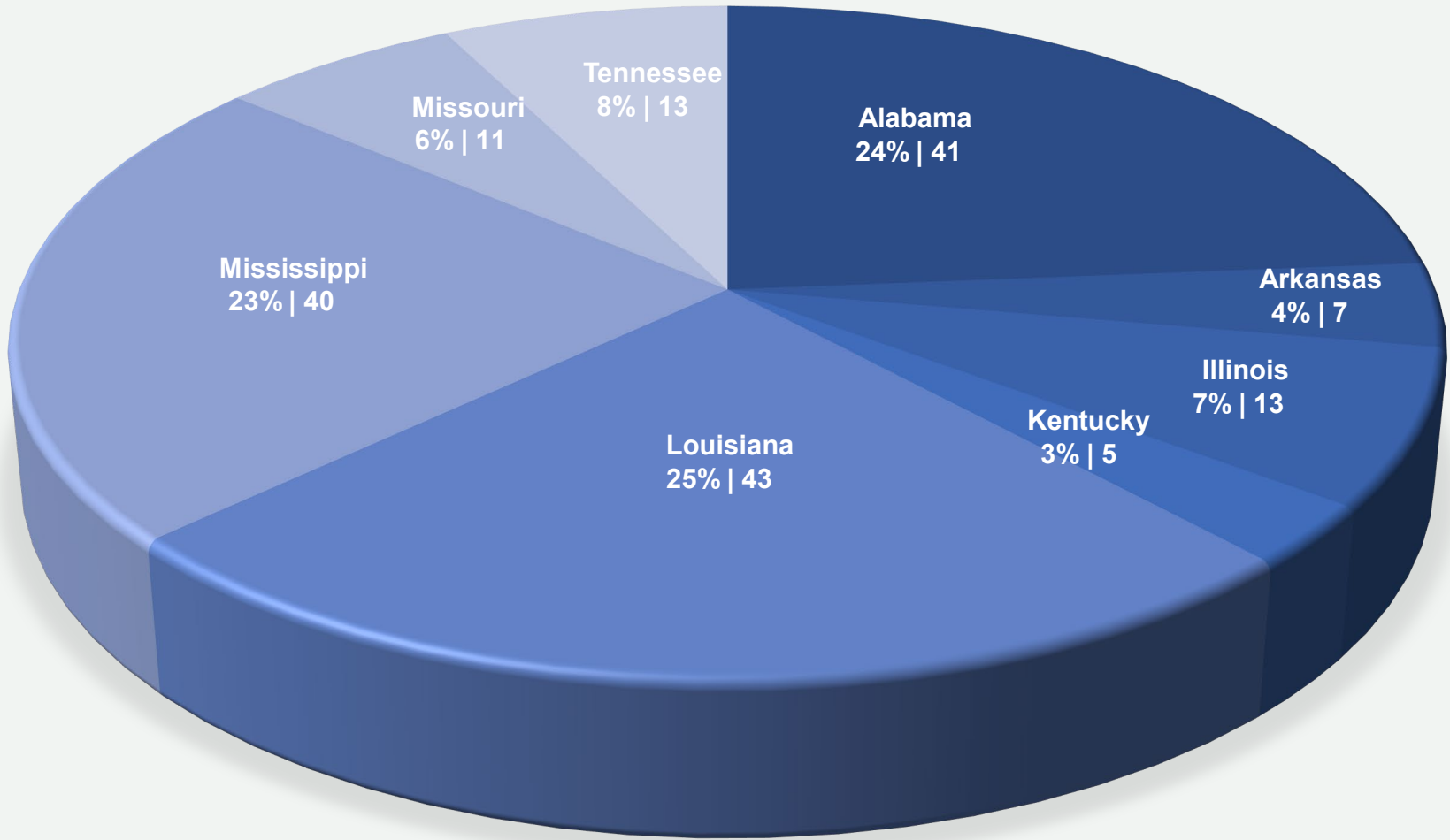


Delta Doctors Physician Placement | 2016 - 2020



2020 Physician Placement

In 2020, DRA processed 173 applications for the Delta Doctors program.



Who may apply for this program ?

Foreign physicians, both primary care physicians and specialists, who are trained in the United States. Physicians must agree to the following:

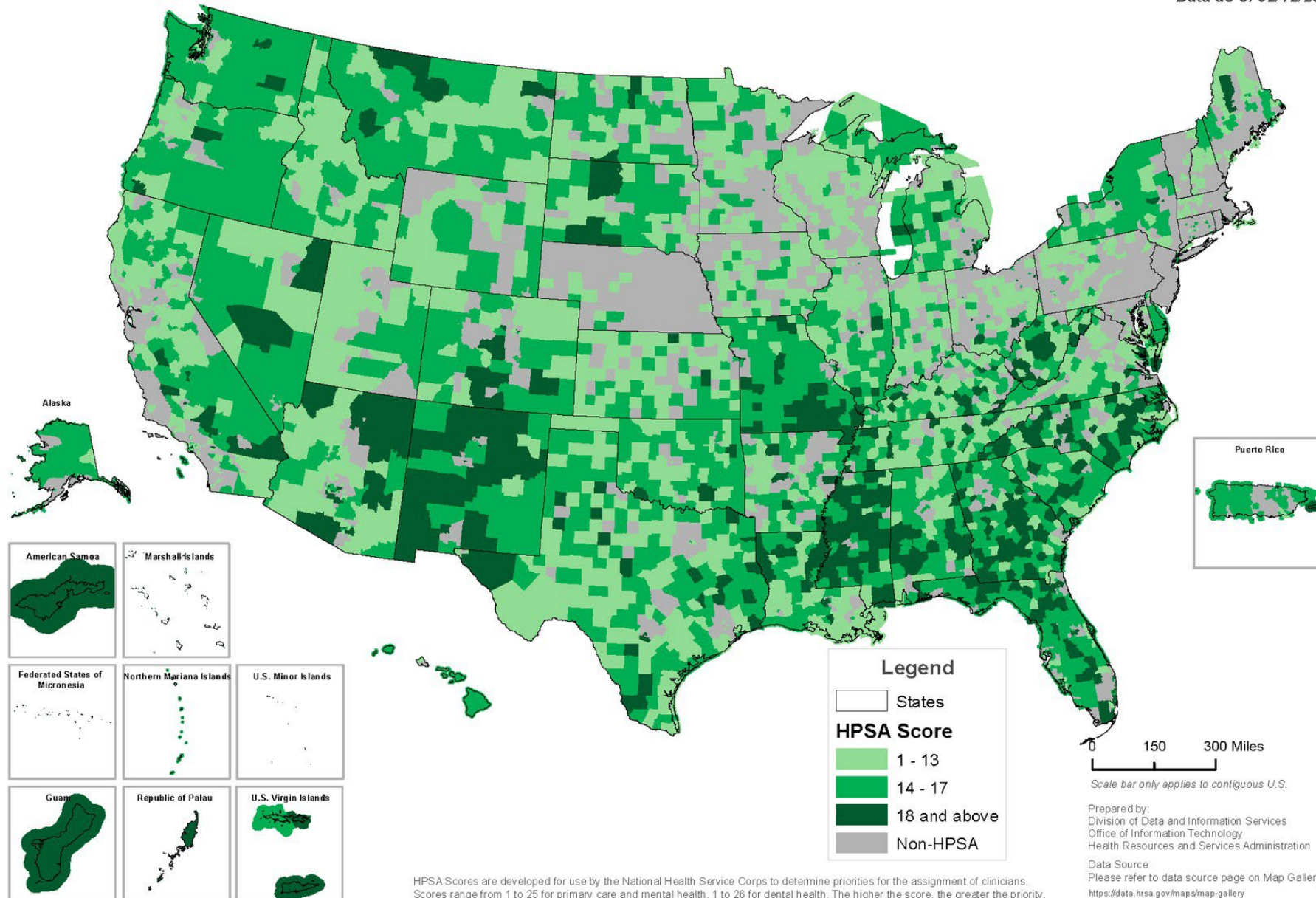
- Provide direct patient care for a term of 3 years;
- Provide direct patient care for 40 hours per week or 160 hours per month;
- Provide direct patient care to individuals without discriminating against them because (a) they are unable to pay for services or (b) payment for those health services are made under Medicare and Medicaid, or a state equivalent indigent healthcare program; and
- Comply with policies and provisions set forth in the Delta Doctors Program Guidelines



What is an eligible area?

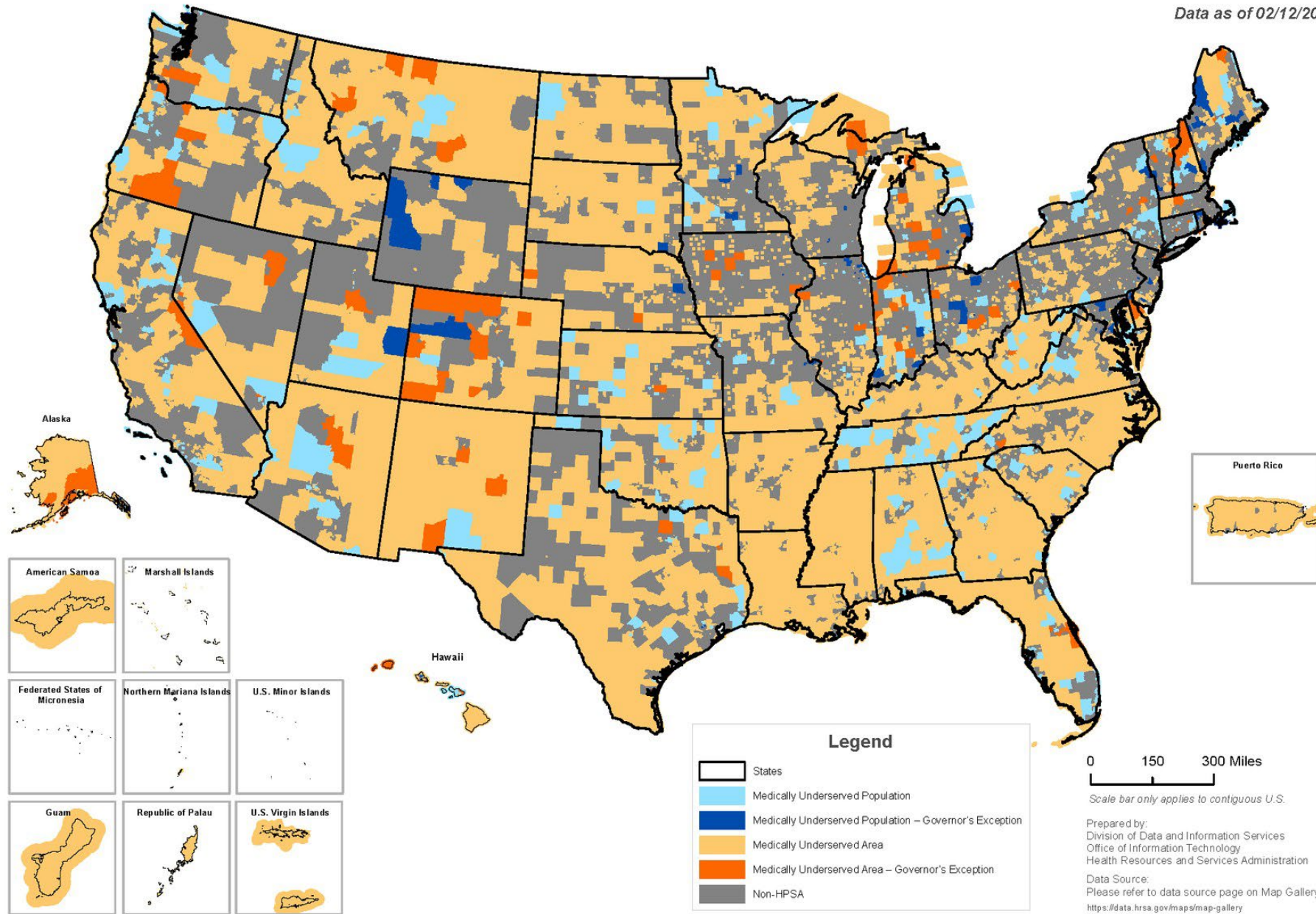
Facilities located in a Health Professional Shortage Area (HPSA) or Medically Underserved Area (MUA) within the 252 counties and parishes of DRA's eight state region.

Data as of 02/12/2021



Medically Underserved Areas/Populations

Data as of 02/12/2021



HOW DO WE GET STARTED?

DRA accepts J-1 visa waiver requests on a continuous basis, year-round. Facilities must make a good faith effort to recruit an American physician for the opportunity in the same salary range, without success for at least 45 days. Requests are submitted on behalf of physicians and employers directly to DRA by immigration attorneys.



Application Process

If you are interested in submitting an application, please review the Program Overview Packet at www.dra.gov. For your convenience, the individual program documents are available for download.

This program is not a residency program, nor is DRA able to assist in the placement of non-domestic medical students into residency programs. Physicians must practice at worksites located within DRA's congressionally mandated footprint.



DELTA DOCTORS

Application Checklist

The Delta Regional Authority requires two packets for submission.

Packet 1: Must include Items 1 through 9 and Item 14.

Packet 2: Must include Items 1 through 25.

1. G-28: Notice of Entry of Appearance as Attorney

2. Cover letter from employer/facility

- a. HPSA number
- b. MUA number
- c. Physician information
- f. Medicare/Medicaid/Indigent population (3-year data)
- g. Patient to physician ratio



Application Checklist

3. DOS data sheet and case number sheet

4. CV with Social Security number

5. DOS exchange visitor attestation form

a. Signed/dated by physician and notarized

6. Copy of executed contract

a. Signed/dated by physician and employer

b. 3-year service; 5-year service (NIW)

c. No non-compete clause

d. 160 hours/month of primary/specialty medical care

e. Service to Medicare/Medicaid/Indigenous population

f. Base salary

g. Name and address of each worksite



Application Checklist

- 7. Verified proof of HPSA/MUA status**
- 8. IAP-66/DS-2019**
- 9. Copy of I-94**
- 10. Letter of opinion from legal representation**
- 11. DRA J-1 Program Guidelines**
- 12. DRA Affidavit and Agreement**
- 13. Proof of prevailing wage data**
 - a. Level I
 - b. Level II



Application Checklist

14. Recruiting documentation

- a. Recruitment overview
- b. National, state, state medical schools, other

15. Letters of community support

- a. Two local, unaffiliated physicians
- b. One local elected official

16. Letters of recommendation

17. Copy of diploma(s), board certification(s), USLME scores, etc.

- a. State medical license or application for license

18. Proof of existence for each facility



Application Checklist

- 19. Copy of posted public notice of sliding fee payment for each facility**
- 20. List of primary care or specialty physicians in county/parish**
- 21. Passport(s)**
- 22. Physician's Statement**



Application Checklist

If applicable (Specialty physician):

23. Sponsor's letter

24. Service area description

25. Letter of support

a. Chief medical officer



Compliance Guidelines

The Delta Regional Authority will administer compliance of the J-1 Visa Waiver Program in three steps:

- The Physician Employment Verification Form must be provided to the Delta Regional Authority within the physician's first week of practice.
- Physician and Employer Compliance Surveys are due twice per year on June 30th and December 31st, for the entire duration of the three-year employment period.
- The DRA or an agent representing the DRA may conduct unannounced site visits at random during the three-year employment period.



J-1 Visa Waiver Program

Compliance Guidelines

The Delta Regional Authority will administer compliance of the J-1 Visa Waiver Program in three steps:

1. The administrator of the facility and the physician will sign and return the "Physician Employment Verification Form", within the first week that the physician begins work. Include copies of documentation that physician is in H-1B status including approval notices from USCIS, the physician's I-94 forms and a copy of the H-1B visa stamp from the physician's passport if the physician has already been granted an H-1B visa. If the physician was not licensed in the state of practice at the time the application for the waiver was submitted, a copy of the physician's state medical license must be included with this form.
2. Compliance Surveys are due on June 30th and December 31st of each year. The surveys will be completed and returned separately to the DRA by both the J-1 physician and the administrator of the facility. The surveys are not identical and will ask confidential questions to both the J-1 physician and the administrator. This survey also requests the number of Medicare, Medicaid, and indigent patients that the facility and the physician has treated in that six-month period, and whether both parties have otherwise complied with the terms of the DRA J-1 Visa Waiver Program.

The DRA has established formal deadlines for these surveys. Both surveys should be returned to the DRA within 15 business days from the due date. If both surveys are not returned within the initial 15 business days, the DRA will notify the employer that the survey(s) should be returned within an extension period of 15 business days. If the surveys are not returned within the extension period and if the employer has made no effort or attempt to comply with DRA Compliance Guidelines, DRA will notify the appropriate agencies that compliance efforts were unsuccessful and recommend the taking of appropriate enforcement actions.

3. The DRA or an agent representing the DRA will conduct unannounced site visits at random during the three-year employment period. If the physician or employer is found to be out of compliance, the DRA will immediately notify the appropriate agencies and recommend the taking of appropriate enforcement actions.

Delta Doctors Program – J-1 Visa Waiver Compliance Guidelines
Effective: September 4, 2020



CONRAD 30 WAIVER PROGRAM

The Conrad 30 waiver program allows J-1 foreign medical graduates (FMGs) to apply for a waiver of the 2-year foreign residence requirement upon completion of the J-1 exchange visitor program. The Conrad program addresses the shortage of qualified doctors in medically underserved areas by allowing each State's Department of Health to sponsor up to a certain number (initially 20, and now 30) FMGs each year for waiver of the two-year home residency requirement of the physician's J-1 visa. The approved Conrad J-1 waiver applicants are required to serve in federally designated shortage area (either rural or urban).



CONRAD 30 WAIVER PROGRAM (cont.)

NATIONAL www.uscis.gov

ALABAMA www.alabamapublichealth.gov

LOUISIANA www.ldh.la.gov

ARKANSAS www.healthy.arkansas.gov

MISSISSIPPI www.msdh.ms.gov

ILLINOIS www.dph.illinois.gov

MISSOURI www.health.mo.gov

KENTUCKY www.chfs.ky.gov

TENNESSEE www.tn.gov

Book Recommendations

The Physician Immigration Handbook

by Gary Siskind & Elissa J. Taub

Foreign Physician's Immigration Handbook: A Guide for Administrators and Physician Recruiters

by Barry Walker





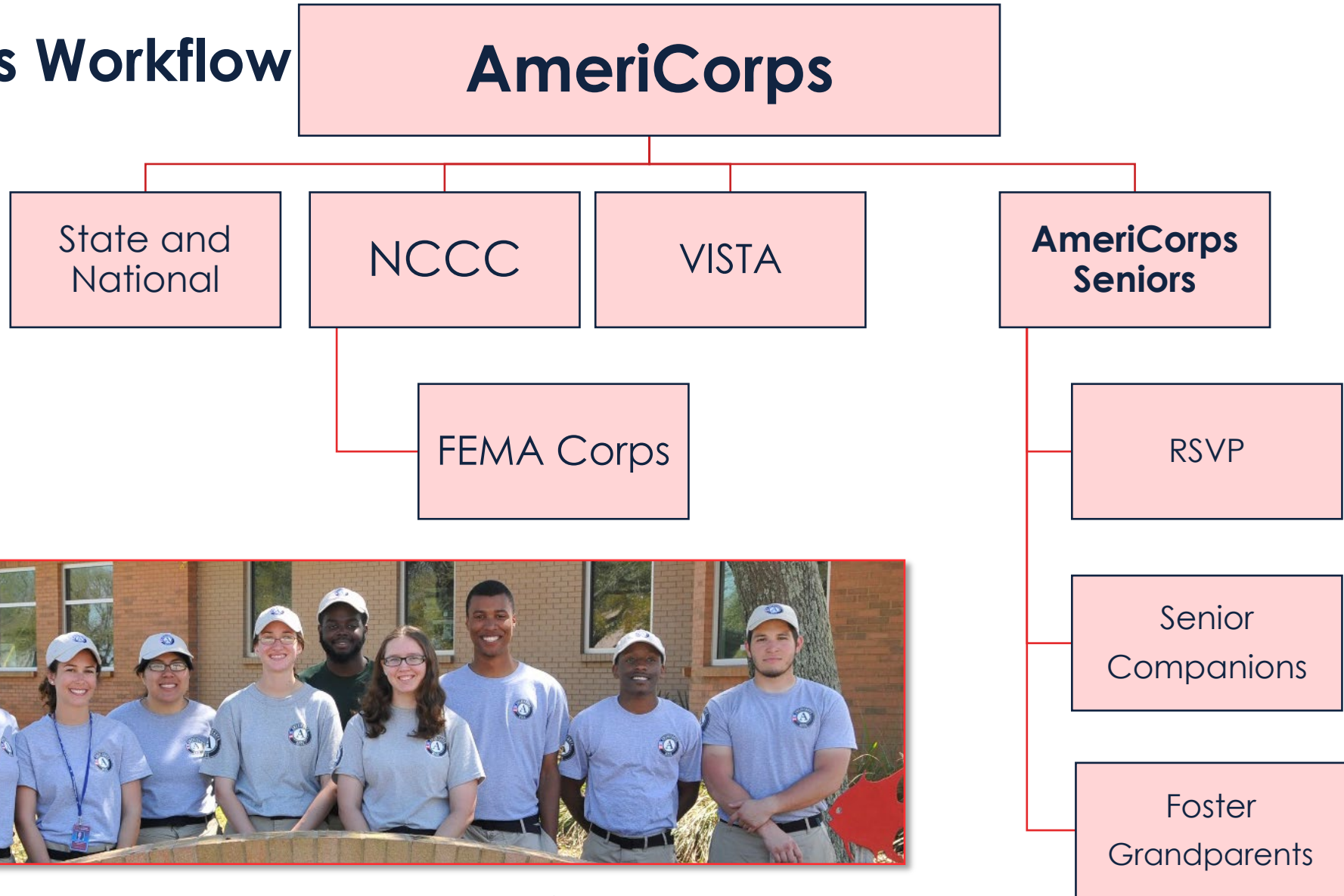
QUESTIONS AND ANSWERS

Expand Your Reach Tenfold:

Partnering with AmeriCorps NCCC to Accomplish Your Organizational Goals

June 2, 2022

AmeriCorps Workflow



Bringing out the best of America

AmeriCorps

Diverse Structure for Diverse Needs



Volunteers in Service to America

VISTA
Poverty focus
Capacity building

VISTA
Year-round support
Summer Associates

State & National

State & National
Year-round support
Largest AmeriCorps branch

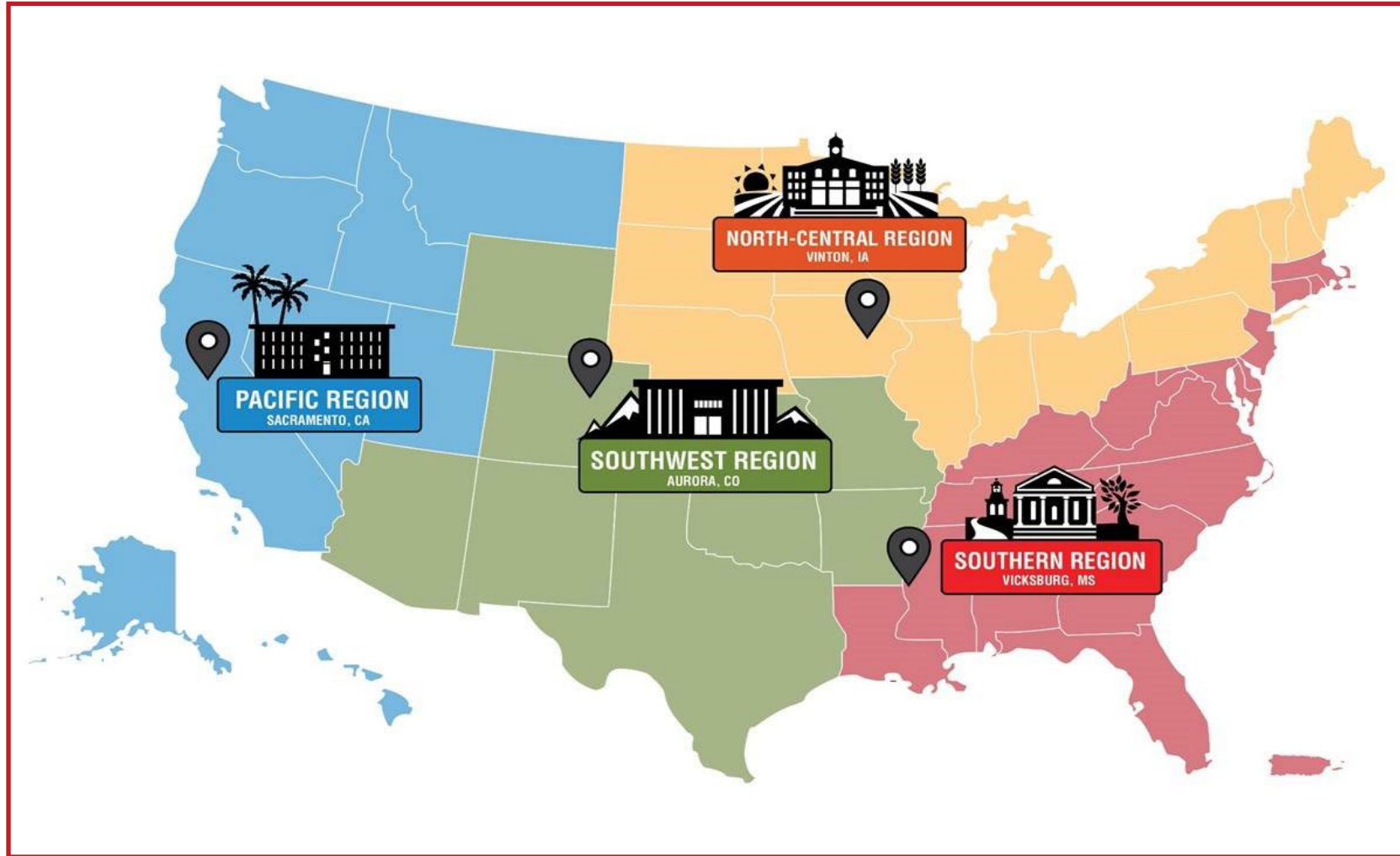
State & National
Programs focus on variety of specific needs
Education, Conservation & more

National Civilian Community Corps

NCCC
Team-based
Relocate swiftly anywhere in U.S.
Residential, intense member development

NCCC
High-personnel, short-term needs
Disasters, Environmental Stewardship & more

NCCC Organizational Structure



Headquartered in Washington, DC.

4 Regional Campus Locations.

- **Southern Region:**
Vicksburg, MS (Red)
- **North Central Region:**
Vinton, IA (Gold)
- **Southwest Region:**
Aurora, CO (Green)
- **Pacific Region:**
Sacramento, CA (Blue)

Who are NCCC Members?



All Corps Members must be 18 to 26 years old.
Average 20-21

- Hail from across the U.S., representing diverse backgrounds and ethnicities
- 1/3 recent high school graduates
- 1/3 have some college experience
- 1/3 recent college graduates
- Team Leaders typically in their mid/late 20s
- Well-disciplined with a great interest in service, but only beginner-level skills

How is the Year Organized?



- Each team will serve on 4-8 projects during their service year
- Projects are 4-8 weeks in length, organized into four rounds
- Areas of Service:
 - Urban and Rural Development
 - Infrastructure Improvement
 - Natural and Other Disasters
 - Environmental Stewardship and Conservation
 - Energy Conservation

Examples of Work

- Food Prep & Meal Delivery
- Screening & Switchboard Operation
- Stocking of Food Shelves, Oxygen Tanks, & Isolation Cadies
- Environmental Services Support
- Public Facility Rehabilitation
- Beautification & Grounds Enhancement
- Event & Volunteer Coordination
- Assessments & Community Outreach
- Call Center Coordination
- COVID-19 Logistical Support at Vaccination Sites



2022-2023 Projects



If your organization has experienced or anticipates any of the following due to the pandemic, please apply:

- Significant loss of volunteers, funds and other support which interferes with your ability to provide services
- Increase in deferred maintenance or resource management, especially those impacting safety
- Increase in clients/visitors that is putting a strain on staff or resources
- Need for assistance with providing services that directly impacts disease mitigation or prevention
- Other challenges sustaining your day-to-day operations



How Do I Apply for a Team?



(1) Contact your regional campus

Determine the appropriate AmeriCorps NCCC Regional Campus for your point of contact. Reach out to campus staff to discuss your ideas for a project, clarify questions, and learn more about the NCCC program, as well as other AmeriCorps programs.

(2) Complete a concept form

Complete and submit an AmeriCorps NCCC Project Concept Form*. This form provides a brief overview of the applying organization and a tentative project plan for the team.

*Not required for immediate disaster response projects.

(3) Submit an application

Upon review of the Project Concept Form, AmeriCorps will invite the organization to submit a full application or request additional information.

How Do I Apply for a Team? (cont.)



Southern →

2022-2023 Project Dates	Step 1: Concept Form Due	Step 2: Full Application Due
Round 1: (2022) Aug. 11 – Oct. 11	Apr. 21, 2022	June 2, 2022
Round 2: (2022) Oct. 19 – Dec. 13	June 29, 2022	Aug. 10, 2022
Round 3: (2023) Jan. 9 – Feb. 24	Sept. 9, 2022	Oct. 21, 2022
Round 4: (2023) Mar. 3 – May 10	Nov. 4, 2022	Dec. 12, 2022

Southwest →

Round 1: (2022) Nov. 5 – Dec. 17	July 1, 2022	Aug. 26, 2022
-------------------------------------	--------------	---------------

North Central →

Round 1: (2023) Mar. – Apr. TBD	Nov. 2022 TBD	Dec. 2022 TBD
------------------------------------	---------------	---------------

What is the role of the sponsor?



There is No Charge for sponsoring an NCCC team.

However, sponsors must provide:

- **Lodging** (Can be with a partner organization. Collaborate! Share the team! Most common: churches, summer camps, vacant homes, empty office or program space.)
- **Project materials**
- **Training and orientation**
- **Supervision**
- **At least 40 hours a week of enriching service**

To Assist the Sponsor, NCCC Provides:



- All members have passed a federal background check, TB test, & a 10-panel drug screen, and must be fully vaccinated
- Team Leader to handle team concerns and serve as a liaison between sponsor and the rest of the team
- Transportation (via a 15-passenger van)
- Worker's Comp, Health Benefits, and Torts Coverage for members while they serve
- Budget for Food, Laundry, and Tolls if needed

Testimonials

- “Delta 6 worked the first half of the round four in Louisville, KY with Baptist Heath. The team was split up to complete many different tasks such as inventory, cold food prep, and delivering meal trays to patients. There was never a dull moment, and staff always kept members on the go. Delta 6 saw firsthand just how important each department is within the hospital and how effective communication is key in order for the operation to run smoothly. It was rewarding for the corps members to take care of the patients and be a part of brightening their day.”

-Class 27B Corps Member

“The NCCC team helped us to be more prepared for our annual workday and to provide better quality services for our clients. The team members came to us full of energy and ideas. They brightened our lives and the lives of our clients. Think of all the things you wish you could do but can't. Then think of how an NCCC team might be able to help you do them.” -Bonnie Bessor



Who can you contact at NCCCC?

<u>Southern Region</u> States Served: AL, CT, DC, DE, FL, GA, KY, LA, MA, MD, MS, NC, NJ, RI, SC, TN, VA, WV, USVI, PR Tel: 601-630-4040 Email: NCCCCSouthern@cns.gov	<u>Southwest Region</u> States Served: AR, AZ, CO, KS, MO, NM, OK, TX, WY Tel: 303-844-7400 Email: NCCCCSouthwest@cns.gov
<u>North Central Region</u> States Served: IA, IL, IN, MI, ME, MN, ND, NE, NH, NY, OH, PA, SD, VT, WI Tel: 319-472-9664 Email: NCCCNorthCentral@cns.gov	<u>Pacific Region</u> States Served: AK, CA, HI, ID, MT, NV, OR, UT, WA, Pacific Territories Tel: 916-640-0310 Email: NCCCCPacific@cns.gov

Assistant Program Directors:
SOUTHERN
(AL, LA, MS, TN) – Tamika Eatmon 202-489-5097 teatmon@cns.gov
(KY) – Stephanie Chan 202-528-3506 schan@cns.gov
SOUTHWEST
(AR) – Brian Wegner 202-948-5899 bwegner@cns.gov
(MO) – Alyssa Gallo 202-355-2197 agallo@cns.gov
NORTH CENTRAL
(IL) – Alana Svensen Hults 202-409-6797 asvensen@cns.gov