

# COVID-19 - Possible Solutions for Temporary Healthcare Needs

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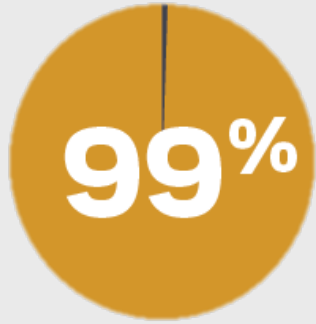


# Agenda

- Quick Update on Impacts of Coronavirus
  - Department of State
  - Department of Labor
  - Department of Homeland Security
- Options for hiring of Foreign National Healthcare workers inside or outside of the U.S.



# Our Value Proposition



**Over 99% Success  
Rate**

Brown continues to succeed at over a 99% success rate every year



Maintain excellent relationship with

**USCIS/DOS**

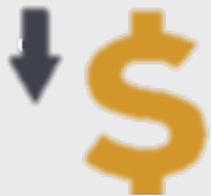
Focus exclusively on **Immigration**

Serve all U.S. time zones in a  
**central location**



**12 Attorneys, 30 staff** – largest stand-alone boutique business immigration law firm in Midwest

Approach each case with a **bespoke strategy**



Provide a highly skilled legal team at a

**lower cost** by Midshoring



Utilize the **latest tech**  
available to support you



# Caveat - Immigration System Not Functioning

- Immigration system is reliant on normal commercial rules
  - planes flying, countries keeping borders open, trade unrestricted
- We don't control government actions - changes have happened quicker than we can report
- Travel could result in quarantine, shelter in place, inability to fly, significant economic consequences for individual or company ([travel.state.gov](https://travel.state.gov))
- Dates are fluid/don't rely on them - chance of extension renders them meaningless





# Department of Labor Updates

- PERMs through June will be issued electronically (will speed up rec't by a week) & recruitment period extended for certain PERMs
- LCA posting requirements remain (3.20 guidance) - pivot to electronic LCAs where possible; short-term and home placements require different solutions
- PERM - Internal posting requirements remain - not replaced by electronic means [wait for resumption of business vs. post now]
- Reminder - prevailing wages will be limited to 90 days now, so timeliness of recruitment is key
- Generally prevailing wage determination is very slow
- I-9 - original document verification suspended, eVerify - can delay on tentative nonconfirmations



# Department of State

- Officially all U.S. consulates currently closed for routine visa and immigrant visa processing
- Hearing of some urgent matters being considered - and some countries are easing restrictions (Singapore)
- No date set for resumption of normal schedule
- Some consulates are allowing future visa appointments in May (Europe), others not showing appts (monitor consular websites)
- J-1 programs on 60-day pause



# Department of State (Cont.)

- What we can do - prep cases in advance of consular reopening/file E-2s and continue processing
- Client takeaway - do not leave US if you need a visa (no guarantee on when you can return)
- Real issue - individuals who traveled and are awaiting a visa to return are stuck pending visa [hail mary - entry without visa]
- Potential to push Dept of State in direction of video-based consular interviews





# Department of Homeland Security

- Restriction on processing at ports of entry (US/Canada border - no visitors - L/TNs still allowed at port of entry); China; Europe (incl UK/Ireland); Mexico
- USCIS suspends Premium Processing - no advance warning
- Announced loosening of response times (already advised on one case) - extra 60 days
- Wet signatures no longer required on petitions (at filing)
- Local offices closed, appts canceled and pending rescheduling (includes trusted traveler programs) - limits inquiry options and chance to fix simple gov't errors





# Current Impact of COVID/Future Impact

- Immediate need - medical personnel (doctors/nurses/technicians/respiratory therapists)
- Future needs - more support - doctors/respiratory/psychological, and planning and prevention
- Training of such staff takes years - only surge capacity exists in existing states (sharing talent federally), FN populations currently in existence, and globally
- Ultimately we have an immediate need, and a future need that must be planned for



# The Foreign National Option

- Each State has own licensing restrictions - key that each State examine needs either lift restrictions temporarily or amend to create openings
- Underlying restriction - still must meet Federal requirements for Physicians and Allied Health Care workers (Nurses/PTs/OTs/SLTs&Audiologists/Med Techs/Technicians/Physician Assistants)
- Tools in toolbox
  - Key countries - Canada/Mexico/Australia/Singapore/Chile
  - H-1B exempt facilities - teaching hospitals (non-profit affiliated with College or University system)
  - Existing J-1 FMGs - availability within a hospital system



# Possible Scenarios

- Consider licensed physicians/nurses already in another country [can expedite USCIS and DOS] - e.g. med tech with CGFNS in Philippines - if H eligible, can fast-track both cases;
- Consider pool of available RNs in Phil - could qualify for H-1B in more advanced positions - APRNs, critical care nurses, or emergency room nurses [must be specialty occupation], or expedite existing GC application [subject to visa bulletin]
- Consider licensed physicians/nurses already in U.S.
  - Nurses - typically enter on GC process - maintain employment in existing location (contract with hospital for temporary need)
  - Physician in H-1 (no waiver) - allowed 60-day placement outside of regular location (cover accommodation/incidentals/travel);





# Additional Options/Way Forward

- H-1B Physician in Shortage area - determine location of need and level of flexibility
- TNs have complete location flexibility
- Note: E-3/H-1B1 Physician or Nurse lack location flexibility for placement - need amendment or approval of new case [can get on expedited basis] - Volunteerism?
- Health care workers with EADs - may have significant flexibility (either as dependant or through AOS process)
- Know when to bring in outside legal team:
  - If find qualified individual in country/outside
  - If immigration issue/compliance exists
  - If licensing restrictions are covered/flexible



# Final Thoughts

- Our goal - to get everyone we can through this time of disruption unscathed, and clean up issues as soon as government “re-opens”
- This will return to normal - I give it six months of additional disruption before system returns to normal hours of operation
- Still may be pockets of issues in the globe
- Then give it 12 months for system to catch up
- There will be ongoing delays for appointments (USCIS and DOS) and case processing
- Each case has become more unique requiring more involvement/skill





# Questions?

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