

## ADVOCATE. ADVANCE. LEAD.

5510 Research Park Drive
P.O. Box 259038
Madison, WI 53725-9038
608.274.1820 | FAX 608.274.8554 | www.wha.org

October 22, 2025

The Honorable Kristi Noem
Secretary
U.S. Department of Homeland Security
2707 Martin L. King Avenue, SE
Washington, DC 20528

Dear Secretary Noem,

On behalf of our more than 150 member hospitals and integrated health systems, the Wisconsin Hospital Association (WHA) writes to you with concern over the recent announcement by the Trump Administration regarding proposed changes to the H-1B Visa program.

WHA was established in 1920 and is a voluntary membership association. We are proud to represent all of Wisconsin's hospitals, including small Critical Access Hospitals, mid, and large-sized academic medical centers. We have hospitals in every part of the state—from very rural locations to larger, urban centers like Milwaukee. In addition, we count close to two dozen psychiatric, long-term acute care, rehabilitation and veterans' hospitals among our members.

## H-1B Visa Proposed Changes Will Likely Increase Costs and Exacerbate Workforce Shortages

On September 19<sup>th</sup>, President Trump issued a Proclamation entitled "Restriction on Entry of Certain Nonimmigrant Workers," which announced a new policy requiring the payment of \$100,000 for H-1B specialty occupation workers seeking entry into the United States. According to the proclamation, the administration's policy goal is to restore the program's function to that of bringing in supplemental or additive labor, rather than replacing American workers with lower-paid, lower-skilled labor.

WHA has heard concerns from its member hospitals and health systems that, however well-intentioned the goals of this policy may be, its impact on provider, staff and medical student recruitment will limit the supply for foreign-born people who are able to fill significant gaps in our state's healthcare workforce. The ultimate effects of this will be to either increase costs or decrease access as resources that could go to hire more providers would be spent on government fees.

Wisconsin hospitals and health systems are aligned with the Trump administration and other policy makers in desiring to "grow our own" workers right here in Wisconsin. We have employed a variety of strategies to grow the health care workforce, including a Wisconsin "Grow Our Own" matching grant program which matches state and federal funding with hospitals' own financial contributions to grow Wisconsin medical residencies in both urban and rural areas. The results speak for themselves – nearly 9 in 10 physicians with ties to Wisconsin that go to a Wisconsin medical school and train in a Wisconsin-based residency will stay and practice in Wisconsin.

Thanks to Wisconsin's "Grow Our Own" grants, we have 193 more graduate medical education (GME) residency slots to train new physicians producing 86 new physicians each and every year. In fact, the program has been such a success, that policymakers worked with WHA to create a similar program for advanced

practice clinicians like physician assistants and nurse practitioners, and allied health professionals, including nurses, surgical technicians, radiographers and lab techs.

The Wisconsin Hospital Association Foundation has also developed a public relations campaign called "So Many Options," which stresses the options available to anyone interested in pursuing a career in health care, aimed particularly at students who may not know what career they want. The campaign highlights the upward mobility and career progression opportunities available in Wisconsin health care fields.

WHA members themselves work closely with private and public K-12 schools, technical colleges, four-year campuses and graduate schools to develop home-grown training and education programs that grow the healthcare workforce. This past year, the WHA Foundation provided grants to 21 Wisconsin middle and high schools to start their own *HOSA – Future Health Professionals* student chapters, going even further upstream to support young students as they explore career choices.

Yet, despite all these efforts, Wisconsin still faces physician, nursing, and allied health workforce shortages that must be bridged. These shortages are due largely to demographic factors beyond our control: the aging of our population as the immense baby boom generation reaches retirement age. This demographic shift, sometimes termed the "Silver Tsunami", is impacting every state and every industry, but health care and Wisconsin face added challenges as health care demand increases exponentially as we age.

Wisconsin Hospital Association Information Center data shows individuals 65 and older average 6 health care encounters to every 1 for those less than 45 years of age. As the 8<sup>th</sup> oldest state in the country in terms of the percentage of its population aged 65 and older and on Medicare, Wisconsin's health care workforce must be supported to sustain the high-quality health care Wisconsinites have become accustomed to and deserve.

## The Trump Administration Should Create an Exemption for Health Care

WHA requests the Trump Administration creates an exemption for health care workers, at the very least for states like Wisconsin that have made extensive efforts to grow their own workforce and yet are facing daunting demographic trends where the supply of new health care practitioners cannot keep up with the growing demand for care. Wisconsin hospitals and health systems are using the H-1B visa waivers program as intended, to supplement and add to the labor market in a way that improves the delivery of health care and meets health care access needs in Wisconsin – not in a way that displaces American workers.

While we understand the Trump Administration issued guidance on October 20<sup>th</sup> suggesting there could be case-by-case exceptions, we believe this process will be inefficient and burdensome both for employers and the federal government due to the labor intensive nature of building and reviewing each case. A more efficient process that would still align with the goals of the policy would be to allow fields important to the health, wellbeing, and productivity of the country, such as health care, to obtain blanket exceptions.

Knowing the important link between ties to Wisconsin, a Wisconsin education, and Wisconsin clinical training at our hospitals, health systems and GME programs make every effort to recruit physicians and health care professionals trained in Wisconsin and the U.S. but are still unable to fill residency slots or open positions.

According to the Association of American Medical Colleges (AAMC) one in five members of the Wisconsin physician workforce is a graduate of an international medical school, and often their entry into the health care workforce relied upon a H-1B visa. A large health system in Milwaukee currently relies on H-1B visas for about ten physician residents and interns per year; a large rural health system relies on double that number to grow the workforce their rural hospitals rely on.

As you know, hospitals must staff their facilities 24 hours a day, seven days a week. There are simply not enough American-trained workers with the requisite skills and training to meet the health care needs of our

## population at this time, despite our previously mentioned efforts to grow this segment of our workforce.

If hospitals are required to pay an additional \$100,000 for each worker they bring into the U.S. in this supplementary role, it will significantly increase costs for health care consumers or decrease access for patients.

This policy could be particularly detrimental for certain specialties such as anesthesiology, which can have far reaching impacts on the rest of the health care workforce due to their importance across specialties such as surgery and labor and delivery. For instance, one health system in Wisconsin mentioned they had a large number of anesthesiologists currently on H-1B visas due to their inability to recruit U.S. residents. Hospitals across Wisconsin that have closed labor and delivery units in rural communities have cited shortages to anesthesia care as a leading factor in this decision.

On behalf of our members across the state, we respectfully request the Trump Administration provide a blanket-exception to this policy for health care providers.

Sincerely,

Kyle O'Brien
President & CEO

397am

Cc: Members of Wisconsin's Congressional Delegation