

# J-1 Visa Waiver Program Guidance

Updated September 2025

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This reference guide is intended to provide instructions for attorneys/authorized representatives or J-1 providers on how to properly submit a J-1 Visa Waiver Application through the Arizona Primary Care Office (PCO) Provider Management System (PMS) portal, <https://app3.azdhs.gov/PCO/Account/Login/>.

If you need technical assistance or have questions on the application process email the program at [j1@azdhs.gov](mailto:j1@azdhs.gov).

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## **Overview**

The United States Citizenship and Immigration Services (USCIS) of the U.S. Department of Homeland Security, successor to the Immigration and Naturalization Service of the U.S. Department of Justice, is the federal agency that grants J-1 Visa Waivers.

The goal of the J-1 Visa Waiver Program is to improve accessibility to health care for underserved areas by supporting J-1 visa waiver requests on behalf of foreign medical graduates who have obtained a J-1 visa for graduate medical studies in the United States (“J-1 physicians”). Based on the information provided with a request, ADHS may recommend a waiver of the requirement that a J-1 physician must return to the physician’s home country for a period of two years after completing graduate medical studies.

The J-1 Visa Waiver Program supports waivers for primary care physicians (family medicine, pediatrics, obstetrics/gynecology, and general internal medicine) or specialists in federally designated Health Professional Shortage Areas (HPSA), Medically Underserved Areas (MUA), or Medically Underserved Populations (MUP), and for psychiatrists in mental health HPSAs.

Primary care physicians or psychiatrists may fill at least 22 of the 30 slots and up to 7 slots may be available to specialists providing full-time (40 hours/week) services in federally designated Health Professional Shortage Areas (HPSA), Medically Underserved Areas (MUA), or Medically Underserved Populations (MUP).

The program does not support waivers for J-1 physicians in research positions or practicing in long-term care facilities, chronic care facilities, or rehabilitation facilities.

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## **Physician Eligibility**

To be eligible, a J-1 physician must meet the following requirements:

- Have an offer of full-time employment at an eligible service site located in a federally designated Health Professional Shortage Area (HPSA), a federally designated Medically Underserved Area (MUA), or Medically Underserved Population (MUP),
- Sign a contract to work at an eligible service site full-time for a period of not less than three years
  - Full-time employment is defined as a minimum of 40 hours per week or a total minimum of 160 hours per month.
- Be eligible for an Arizona medical license.

## **Service Site Eligibility**

To be eligible, a service site must:

- Be located in a federally designated HPSA, a federally designated MUA, or a federally designated MUP;
- Have been operational and providing care for at least three(3) months as of the date of the request for an ADHS recommendation;
- Have tried to recruit a U.S. based physician (defined as a physician who is legally able to work in the United States such as a U.S. or naturalized citizen and do not require J1-visa sponsorship) for at least three(3) months prior to the application submission and must be able to document recruitment efforts (narrative is allowable);
- Use a sliding fee scale based on ability to pay for all patients at the facility who are uninsured and at or below 200% of current Federal Poverty Guidelines. They are available at <https://aspe.hhs.gov/poverty-guidelines>. The sliding fee scale must be based on the current U.S. Department of Health and Human Services Federal Poverty Guidelines as published in the Federal Register and adhere to A.A.C. R9-1-504 sliding fee schedule submission and contents available at: [http://apps.azsos.gov/public\\_services/Title\\_09/9-01.pdf](http://apps.azsos.gov/public_services/Title_09/9-01.pdf)

If a service site does not meet all the requirements listed, the site is not eligible, and an application WILL NOT be processed.

## **Policy**

Providing that the J-1 Visa Waiver Program is reauthorized by Congress, each federal fiscal year from October 1 through November 30, Arizona has 30 available slots for J-1 physicians.

Primary care physicians or psychiatrists may fill at least 22 of the 30 slots. Specialists providing full-time specialty services may fill up to seven slots. The program will retain one slot to be used at the discretion of ADHS. ADHS may use the discretionary slot at any time. ADHS will give priority to primary care physicians. At its discretion, ADHS may support more than 22 primary care physicians per year if there is an increased primary care demand for a waiver slot during the application year.

While waiver slots are not guaranteed, each service site could receive a maximum of two approved J-1 physicians per site per year. Employers may submit two J-1 applications for the same service site during the first application cycle typically between October 1 and November 30 of each year. ADHS will consider additional J-1 applications from the same service site after the conclusion of the first application cycle and if slots remain available.

The application and supporting documents must be received by ADHS through the Arizona Primary Care Office (PCO) portal, <https://app3.azdhs.gov/PCO/Account/Login/> on or before the due date for the application to be considered for a waiver slot. If any slots remain to be filled after the first application period, an announcement will be made through the program's website at <http://www.azdhs.gov/j1visawaiver>.

Each federal fiscal year, the J-1 Visa Waiver Program will close when all slots are filled.

### **Application Review Process**

Requests for an ADHS waiver recommendation will be reviewed for completeness, inclusion of all required supporting documents, eligibility of the provider and the service site, the J-1 physician's type of practice or specialty, and adherence to the J-1 Visa Waiver Program and to federal guidelines.

A decision for a letter of support typically takes approximately eight to twelve weeks from the program application cycle deadline. Processing times may be extended if ADHS receives an incomplete application where additional documents must be obtained to complete the application. The J-1 physician, sponsoring employer, and legal representative will be notified by ADHS via email regarding the status of the application when ADHS has made its final decision.

### **Scoring**

ADHS will conduct a scoring method when there is competition among primary care physicians or among specialists for the available waiver slots. Eligible J-1 primary care physicians will be prioritized such that ADHS could at its discretion fill all slots with primary care physicians if the demand exists during the program year and if warranted based on the need in the state.

Scoring of all complete applications will be conducted only when there are more applications within each physician category (primary care versus specialists) received than slots available. An application for a J-1 visa waiver recommendation will receive weighted points based on the information in the application and the total weighted score for all criteria will be obtained. ADHS will identify the top scoring primary care or specialist physicians for consideration for a J-1 visa waiver recommendation. ADHS may consider other factors in the selection process that impact access to specific health care services, for example, service availability and accessibility, prevalent health issues in the community, etc.

For details regarding the weighted Scoring System:

<https://www.azdhs.gov/prevention/health-systems-development/workforce-programs/j-1-visa-waiver/index.php#applications-preference-points>

## **Ad Hoc Review Committee**

An ad-hoc review committee may be convened if needed to ensure slots were awarded based on the State's need. A two to four-member review committee will consist of ADHS program staff and other individuals identified to have knowledge and expertise on the State's workforce shortages and health care needs. The ad-hoc committee may review requests for a J-1 visa waiver recommendation if:

- ADHS receives more than twenty-two (22) primary care or more than seven (7) specialist applications for the J-1 visa waiver slots, and two or more applicants within the primary care or specialty category have equal total weighted scores, but only one primary care or specialist slot remains to be filled. ADHS receives more than two (2) complete applications for the same service site and all applications are on equal ranking resulting from the scoring process.
- While a service site could receive 2 J-1 physician placements per site per year, ADHS may, at its discretion, approve or deny any J-1 application. The committee's decision will be discretionary and will be based on the needs of the community, where each J-1 physician with equal score proposes to practice and the physician's ability to meet the needs.

## **ADHS Held Harmless**

ADHS reserves the right to deny support of a J-1 visa waiver application. If support is denied, ADHS will not forward the application to the U.S. Department of State (DOS) Waiver Review Division. ADHS does not bear any liability for the denial of support of a J-1 visa waiver application, which includes, but is not limited to, the consequences arising from any practice arrangements or contracts entered into by the J-1 physician or proposed employer before or after requesting a J-1 visa waiver recommendation from ADHS.

In the event that an application is denied, ADHS will notify the Attorney/Authorized Representative or J1 provider via e-mail and deny the application via the PCO Portal.

In the event that a waiver support is granted and an employment situation arises that leads to a break in service or noncompliance with the program's service requirements, the J-1 physician's obligation may be extended to satisfy the 3-year full time (a minimum of 40 hours per week or a total minimum of 160 hours per month) service obligation required by the J-1 Visa Waiver Program. The service obligation is specific to a Federally Designated Health Professional Shortage Area (HPSA), Medically Underserved Area/Population (MUA/MUP) in Arizona.

## **Procedure**

***Be sure to include the full case number on all documentation submitted.***

**STEP 1.** Apply for a case number from the United States Department of State (DOS).

**STEP 2.** Receive your case number and an instruction sheet from DOS. The instruction sheet from DOS may include a list of documents that are required by the Waiver Review Division (ADHS requires items 1–13 of the Requirements in order to consider the request for a letter of support). If the DOS Waiver Review Division asks for an item that is not on the ADHS Requirement list, be sure to include that item.

**STEP 3.** Submit all required documents 1-16 to ADHS via the application portal. Please note that all documents must be submitted to ADHS on or before the deadline. Otherwise, it will not be considered for a waiver slot.

**STEP 4.** If ADHS decides to support a J-1 visa waiver application, ADHS will submit a support letter with all required documents enclosed to the DOS Waiver Review Division. At this point, the ADHS is no longer directly involved in the process. The ADHS will inform the J-1 physician or the lawyer of record when this happens. The J-1 physician may check on application status ONLY by calling DOS at (202) 663-1600 and by providing the case number.

In the event that an application is denied, ADHS will notify the lawyer of record or the J-1 physician of the denial via e-mail or to the J-1 physician, if the physician is not represented by a lawyer.

**STEP 5:** The DOS Waiver Review Division will send its recommendation directly to USCIS. The J-1 physician should receive a copy of that recommendation at the address listed on the J-1 physician's data sheet. ***The J-1 physician must provide a copy to the J-1 Visa Waiver Program Manager of the J-1 Visa Waiver approval notice from USCIS once obtained.***

*Thank you for your interest in serving the medically underserved in Arizona.*

## **Appendix A: Requirements Checklist**

All J-1 applications are to be submitted via the [PCO Portal](#).

PLEASE AFFIX THE CASE NUMBER ON EACH PAGE OF ALL DOCUMENTS.

1. **DS-3035, Review Application Form, Data Sheet (Current Edition)**.

<https://travel.state.gov/content/visas/en/study-exchange/student/residency-waiver/ds-3035-instructions.html>. Link to 'J-1 Visa Waiver Review Application' for the current data sheet and processing instructions. Please note: DOS WILL ACCEPT ONLY CURRENT DATA SHEET APPLICATIONS. Applications with other versions of the Data Sheet will not be processed.

2. **A letter from the head of the organization that wishes to hire the J-1 physician**. The letter on company letterhead should include this wording verbatim: *“(Name of Organization) requests the Arizona Department of Health Services act as an interested government agency and recommend a waiver for the physician”*.

3. **A signed valid contract of full-time employment from the time USCIS grants a waiver of the two-year home-country residency requirement**.

- The contract must specify the name and address of the service site(s) where the J-1 physician will provide services.
- The contract must be for at least three (3) years from the estimated start date of the contract and within 90 days of the J-1 physician receiving a J-1 visa waiver.
- The contract must provide full-time employment for a minimum of 40 hours per week or a total minimum of 160 hours per month, and must specify the specific primary care or specialty services that will be provided.
- The physician must agree to begin employment at the approved service site(s) within 90 days of receiving a J-1 visa waiver (must state in contract).
- The contract may not include a Non-Compete Clause.
- The contract must include this wording verbatim, ***“The J-1 physician and the employer may not change, by contractual amendment or otherwise, the essential terms of the employment contract as required by the J-1 Visa Waiver Program.”***
- The contract must provide that until the J-1 physician completes the three-year commitment, the J-1 physician must provide services:
  - At the service site(s) specified in the employment contract,
  - To the patients specified in the employment contract, and
  - In the manner specified in the employment contract.
- The contract must be fully executed by both the J-1 physician and the employer signing the contract.

4. **Evidence that the facility is in a federally designated Health Professional Shortage Area (HPSA) or in a Medically Underserved Area (MUA) or that serves a Medically Underserved Population (MUP).** Refer to <https://data.hrsa.gov/tools/shortage-area> for the official listing of designated HPSAs and MUAs and MUPs.

5. **Legible copies of the physician's IAP-66/DS-2019 forms, covering every period the physician was in J-1 status. IAP-66/DS-2019 forms must be submitted in chronological order.**

6. **Current Curriculum Vitae or Resume.**

7. **Form G-28 or letter from authorized representative.**

8. **Description of the J-1 physician's proposed responsibilities AND schedule (hours per day and say per week).** The description of the provider's proposed responsibilities MUST include a statement of how the J-1 physician's employment will satisfy important unmet needs, including the health care needs of the specific community and preventive programs the physician will initiate or continue that address health problems prevalent in the specific community, etc. This document may be used by ADHS to determine the J1 applicant serving a community with the most compelling need, in addition to health status data from published ADHS reports. For providers serving at more than one location, the description MUST include a **narrative** of the proposed schedule including the estimated hours per day and days per week at each location. ADHS will NOT accept stand-alone schedules in a table format in lieu of a narrative.

9. **Documentation demonstrating unsuccessful recruitment efforts for at least 3 months or longer prior to submitting the application and a narrative description of recruitment efforts.** Upload one copy of a NARRATIVE description of recruitment efforts. The narrative description MUST include the following:

- Commencement date of the employer's recruitment efforts for the specific position
- Methods used to advertise for the position
- Length of time the vacancy has been posted using various methods
- Total number of physicians who responded to the advertisements or announcements including the number of US-based physicians (defined as those who are legally able to work in the United States and do not require J1-visa sponsorships)
- Number of physicians interviewed and outcome of any interviews

9.1. The employer MUST demonstrate that it has made a good faith effort to prioritize and recruit a qualified US-based physician before resorting to hiring a J-1 physician for the specific job opportunity in the same salary range and must clearly demonstrate that the employer could not find a US-based physician through traditional recruitment methods.



9.2. The employer MUST provide evidence of active and ongoing recruitment that began at least three months prior to the application submission. For example, if the employer has been recruiting for two years for the position, the documentation must show a continuum of recruitment efforts from the start date of posting to the most current active posting.

9.3. The employer can submit documentation that supports the recruitment narrative. Recruitment documentation must show a good faith effort. Examples of recruitment documentation include:

- Copy of contract with recruitment firms. A copy of the contract with the recruitment firm with attached copies of advertisements, postings, and other recruitment documentation done by the firm for the specific position.
- Recruitment documentation from a third party. For example, a private Hospitalist group recruiting on behalf of the hospital. ADHS will accept a contract between a third party group and the employer OR a statement from the employer that clarifies the relationship between the two entities and that clearly indicates that the employer authorized the third party to recruit on behalf of the employer. In addition to a copy of the contract or statement from the employer establishing the relationship, please submit recruitment advertisements or postings for the specific position conducted by the third-party group.
- Employer's website traffic analytics. ADHS will accept documentation of job postings on the employer's website and a history of the job posting for the specific position. Job posting histories must clearly show at a minimum the position and the date of posting.
- A statement including sworn affidavits from the employer or the employer's recruiter. ADHS will accept affidavits along with dated advertisements, postings, and other documents that support the statement in the affidavit.
- List of physicians considered for interview, those who were interviewed, and outcome of interviews. This will be accepted to support the recruitment narrative.
- CVs of physicians who applied for the position. ADHS will consider this only if submitted as evidence to support the list of physicians considered for the position per the recruitment narrative.
- Word or PDF document of the job posting submitted to the employer's Human Resources, recruiter or recruitment firm for posting.
- Copy of ads on websites where the general physician population may not be able to access. For example, the Bureau of Health Workforce Connector, National Health Service Corps website. ADHS will accept this documentation in conjunction with other ads and

related documents to show evidence that various methods were used to recruit physicians.

- Airline tickets to attend a marketing event
- Hotel accommodations where marketing events took place. This may be accepted only if submitted to support the recruitment narrative and if the documentation supports recruitment for the specific position that the J1 physician is being hired for. For example, ADHS will not accept evidence of attendance in the Annual Rural Recruitment and Retention Conference (3RNet) as this event is primarily for state offices where there will be no interface with actual physicians.
- Registration fee receipts for marketing events. This may be accepted only if submitted to support the recruitment narrative.
- A statement from the employer certifying that recruitment was done by word-of-mouth. Generally, even if recruitment is by word-of-mouth, employers should be able to provide evidence of recruitment i.e. scheduling for interviews, email correspondences with applicants, site visit coordination, travel arrangements for site visits, etc.

9.4. The employer may submit recruitment evidence from the start date of recruitment for the specific job opportunity through the most recent period as long as it reflects active and ongoing recruitment starting from at least 3 months prior to the application submission.

10. **Physician Application.** Upload copy of a fully completed, signed, and NOTARIZED application to the portal.

11. **Service Site Application – one for each service site.** Upload copy of a fully completed, signed, and NOTARIZED application to the portal.

12. **Sliding Fee Schedule (SFS) based on current Federal Poverty Level Guidelines.**

The sliding fee scale must be based on current Federal Poverty Guidelines available at:

<https://aspe.hhs.gov/poverty-guidelines> and adhere to A.A.C. R9-1-504 sliding fee schedule submission and contents available at: [http://apps.azsos.gov/public\\_services/Title\\_09/9-01.pdf](http://apps.azsos.gov/public_services/Title_09/9-01.pdf). *Please note:*

*Discounts must be offered to all patients at the facility who are uninsured and at or below 200% of current Federal Poverty Guidelines.*

13. **SFS Policy/Procedure.** A SFS Policy is a document that describes the facility's process in implementing the SFS. For additional information, please click [here](#).

14. **SFS Signage/Notice to inform about the availability of the SFS at the facility.** The SFS notice must at a minimum include that the facility offers a SFS discount based on the patient's family income AND must provide that the facility does not discriminate in the provision of health services by basis of ability to pay.

15. **Three letters of community support on appropriate letterhead.** *Letters of support should not be from members or affiliates of the sponsoring organization or service site.* Community support letters may be obtained from organizations outside of the medical community as long as supporters can speak about the need in the community. Examples of letters of support include: Letters from the county health department or county administration, providers in the service area where the J-1 physician is being recruited to, faith based health care organizations, federally funded programs (community health centers, rural health clinics) or state funded programs in the service area that can verify that employment of the J-1 physician will benefit delivery of primary care or specialty services in the area.

16. **Copy of the J-1 physician's Arizona medical license.** In lieu of the Arizona medical license, a receipt or email confirmation of the Arizona medical license application filing from the Arizona Medical Board may be submitted, if license not yet issued. Contact the Arizona Medical Board at (480) 551-2700 or at: <http://www.azmd.gov/>.

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## **Appendix B: Electronic Submission Step By Step**

To access the J1 Visa Waiver portal, go to <https://app3.azdhs.gov/PCO/Account/Login>


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- 1) Once on the main page, the user will sign in with an email and password. If the user is not registered, click “No Account? Create One.”


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**Provider Management System**

---

  
**Sign In**  

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 Email

 Password

☐ Remember me?




LOG IN

[Forgot Password?](#)  

No Account? Create One

- 2) Once clicking on “No Account? Create One.” click the middle option labeled “Attorneys/Authorized Representatives.” Selecting this option is for attorneys **OR** authorized representatives who will be submitting a J1 Visa Waiver application on behalf of the J1 Provider. If the user is not an attorney/authorized representative but a J1 provider, click **PROVIDERS**.

### Provider Management System Registration:

 <p>This portal is for providers who are applying for the Arizona State Loan Repayment or J1 Visa Waiver Program.</p> <div style="background-color: #007bff; color: white; padding: 5px; text-align: center; margin-top: 10px;">PROVIDERS</div>	 <p>This portal is for attorneys or authorized representatives submitting a J1 Visa Waiver application on behalf of the J1 provider.</p> <div style="background-color: #007bff; color: white; padding: 5px; text-align: center; margin-top: 10px; border: 2px solid red;">ATTORNEYS/AUTHORIZED REPRESENTATIVES</div>	 <p>This portal is for site administrators or employer authorized designees who will be verifying the provider's employment at the service site. This portal is also used for submitting service and encounter verification forms.</p> <div style="background-color: #007bff; color: white; padding: 5px; text-align: center; margin-top: 10px;">SITE ADMINS</div>
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Provider Management System Registration:

 <p>This portal is for providers who are applying for the Arizona State Loan Repayment or J1 Visa Waiver Program.</p> <p><b>PROVIDERS</b></p>	 <p>This portal is for attorneys or authorized representatives submitting a J1 Visa Waiver application on behalf of the J1 provider.</p> <p><b>ATTORNEYS/AUTHORIZED REPRESENTATIVES</b></p>	 <p>This portal is for site administrators or employer authorized designees who will be verifying the provider's employment at the service site. This portal is also used for submitting service and encounter verification forms.</p> <p><b>SITE ADMINS</b></p>
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3) A pop-up will appear where the provider needs to click J1 Visa Waiver Program and then click REGISTER AS J1 PROVIDER.

Provider Registration

Select the program you wish to register for:

☐ State Loan Repayment Program

☒ J1 Visa Waiver Program

REGISTER AS J1 PROVIDER

4) After selecting the option, a new screen will appear where the attorney/authorized representative or J1 provider must fill out the required fields. Enter the username (email address) and password then click "Register."

Provider Management System

Account creation for: Attorneys/Authorized Representatives

Account Management

First Name

Last Name

Phone

Email

Password

Confirm password

Enter Username/Email

Register

5) A new screen will appear stating that registration has been completed successfully. An email will be sent to the email account used which will contain an email validation link to login to the portal and begin the application process. Please retrieve this email and click on the link provided to navigate back to the login page of the portal. The email will be from [AZPCO@azdhs.gov](mailto:AZPCO@azdhs.gov) and an example is provided below. Click on “Confirm”

**NOTE:** If for some reason the email is not in your inbox, please check the SPAM or JUNK folder. Otherwise, please contact the J1 Visa Waiver Program at [j1@azdhs.gov](mailto:j1@azdhs.gov)

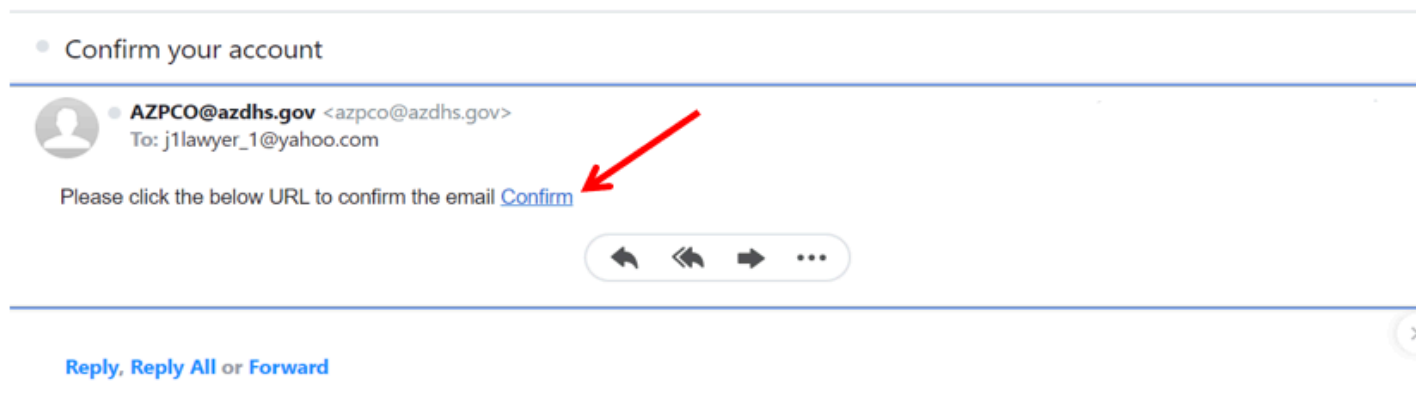


## Provider Management System

### Email Verification

Registration has been completed successfully and an email validation link with steps to login has been sent to the email address provided during registration. If you haven't received the confirmation message within a few minutes, please check your Spam folder just in case the confirmation email got delivered there instead of your Inbox.

Example email:



5.1) After clicking “Confirm,” a new window will appear letting the user know that the email was confirmed and to login click “Click here to Log in.”



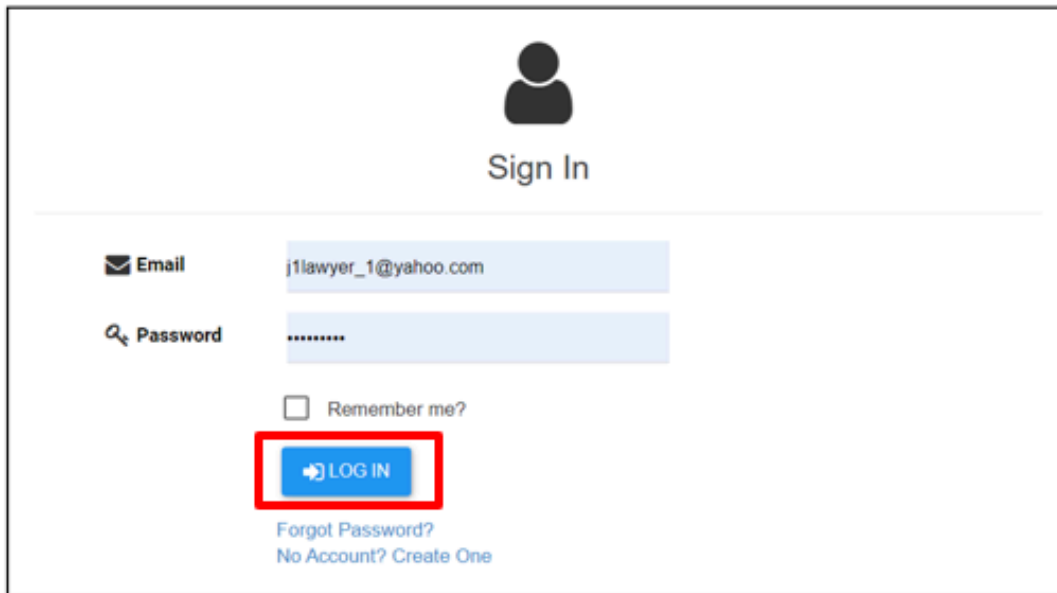
## Provider Management System

### Confirm Email.

Thank you for confirming your email. Please [Click here to Log in](#)

6) The user will be directed to the login page of the website. Enter the email and password for the account then click “LOG IN.”

#### Provider Management System



Sign In

Email j1lawyer\_1@yahoo.com

Password .....

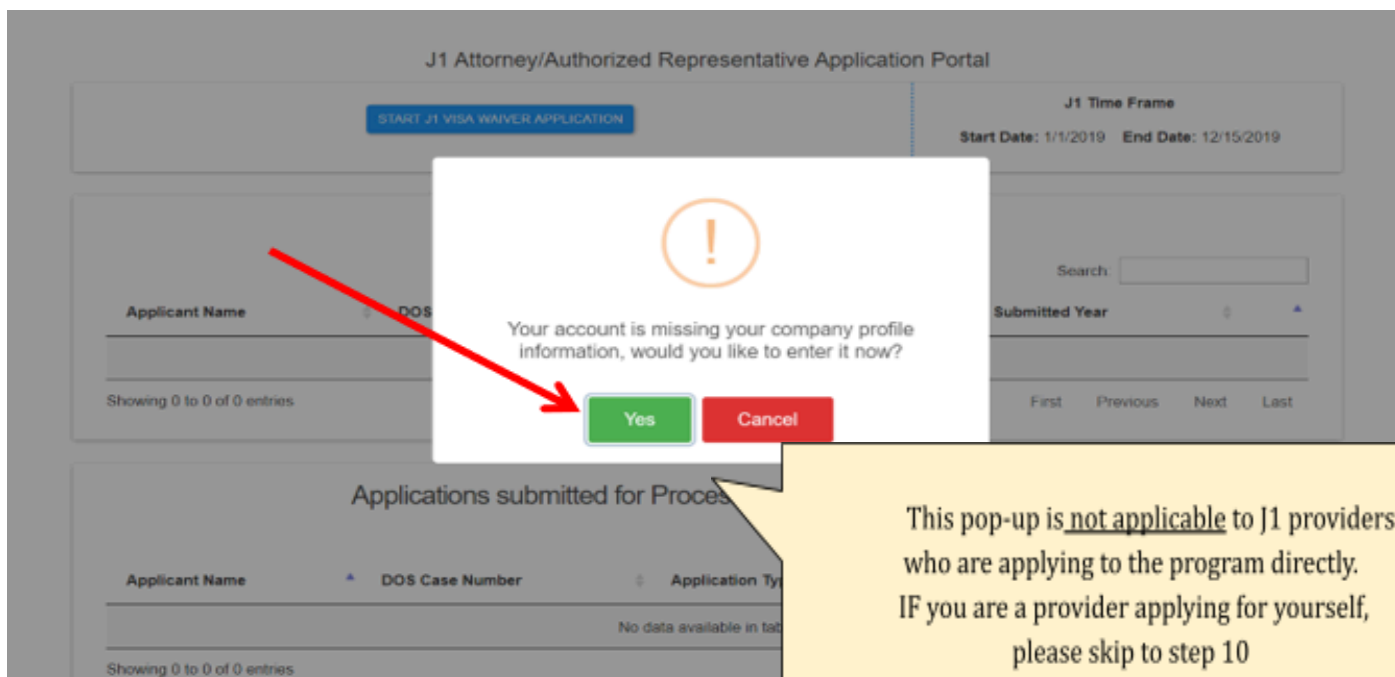
☐ Remember me?

**LOG IN**

[Forgot Password?](#)

[No Account? Create One](#)

7) The user will be directed to a new screen where a pop-up message will occur for the attorney/authorized representative to enter the company information. Click “Yes.”



J1 Attorney/Authorized Representative Application Portal

START J1 VISA WAIVER APPLICATION

J1 Time Frame  
Start Date: 1/1/2019 End Date: 12/15/2019

Search: [ ]

Submitted Year: [ ]

First Previous Next Last

Applications submitted for Process

Applicant Name \* DOS Case Number Application Type

No data available in table

Showing 0 to 0 of 0 entries

Yes Cancel

This pop-up is not applicable to J1 providers who are applying to the program directly. IF you are a provider applying for yourself, please skip to step 10

8) The user will be taken to the J1 Attorney/Authorized Representative Info screen. Complete the required information then click “SAVE.”

The screenshot shows the 'J1 Attorney/Authorized Representative Info' form within the 'Provider Management System'. The header includes the 'Primary Care Office' logo and 'ARIZONA DEPARTMENT OF HEALTH SERVICES' on the left, and the user 'J1LAWYER\_1@YAHOO.COM' on the right. The form fields are: 'Company Name' (text input), 'Point of Contact First Name' and 'Last Name' (text inputs), 'Email' (text input), 'Phone' (text input with dashes), 'Fax' (text input with dashes), 'Physical Address' (text input), 'Physical City' (text input), 'Physical State' (dropdown menu), and 'Physical Zip' (text input). At the bottom right, there are 'SAVE' and 'CANCEL' buttons. The 'SAVE' button is highlighted with a red rectangle.

9) A pop-up will occur to inform the user that the information has been successfully saved. Click “Ok” to proceed to the home page.

This screenshot shows the same form as the previous one, but with a success pop-up displayed in the center. The pop-up has a blue information icon and the text: 'Your record has been saved successfully. You will now be redirected to the home page.' A red arrow points from the 'Ok' button in the pop-up to the 'SAVE' button in the form. The form fields are now filled with example data: 'Company Name' is 'Immigration Attorneys', 'Point of Contact First Name' is 'Ash', 'Email' is 'j1lawyer\_1@yahoo.com', 'Physical Address' is '150 N. 18th Avenue Ste. 320', and 'Physical City' is 'Phoenix'. The 'SAVE' and 'CANCEL' buttons are at the bottom right.



**10)** The home page is where the Attorney/Authorized Representative or J1 provider can start a new J1 Visa Waiver application, view pending applications, and applications that have been submitted in the portal for review. To begin a new J1 Visa Waiver Application, click on “START J1 VISA WAIVER APPLICATION.”

The screenshot shows the 'J1 Attorney/Authorized Representative Application Portal' interface. At the top, there is a header with the 'Primary Care Office' logo, 'ARIZONA DEPARTMENT OF HEALTH SERVICES', 'Provider Management System', and a user email 'JLAWYER\_1@VAHCO.COM'. Below the header, the main content area is titled 'J1 Attorney/Authorized Representative Application Portal'. It features a 'START J1 VISA WAIVER APPLICATION' button, a 'J1 Time Frame' section with 'Start Date: 1/1/2019' and 'End Date: 12/15/2019', and two table sections: 'Applications pending to be completed' and 'Applications submitted for Processing/ Processed Applications'. Both tables show 'No data available in table' and have pagination controls. Annotations with red boxes and arrows point to the 'START J1 VISA WAIVER APPLICATION' button, the 'J1 Time Frame' section, and the two table sections.

Selecting this button will start a new J1 Visa Waiver Application.

The time frame shows the start and end date of the J1 Application cycle.

This section is for J1 Applications that have been started by the Attorney/Authorized Representative or J1 provider and have not been completed.

This section is for all J1 Applications that have been submitted to the State of Arizona's Primary Care Office (PCO) for review.

**11)** The user will then be directed to three (3) sections that must be completed for the J1 Visa Waiver Provider applicant. Those three (3) sections are Personal/Discipline, Employer/Service Site, and Supporting Documents tabs.

The screenshot shows the 'J1 Provider Information' form. At the top, there are three tabs: 'Personal/ Discipline', 'Employer/Service Site', and 'Supporting Documents'. The 'Personal/ Discipline' tab is highlighted with a red bubble. Below the tabs, the form contains fields for 'DOS Case Number', 'NPI Number', 'First Name', 'Last Name', 'Middle Name', 'Country of Birth', 'Country of Last Residency', 'Gender', 'Email', 'Home Phone', 'Mailing Address', 'Mailing City', and 'Mailing State'. A yellow callout box points to the 'Personal/ Discipline' tab, explaining the meaning of the bubble colors.

A light faint red bubble denotes the section that the user is working on. The gray color denotes the section(s) that have not been addressed. Once the section has been completed the bubble will turn red.

12) The first section is the Personal/Discipline section. The information must be completely filled out in order to continue to the next section. After filling out all the information click “SAVE AND CONTINUE.”

The screenshot shows the 'J1 Provider Information' form with the following fields and annotations:

- DOS Case Number:** 100000 (Annotated: Field to enter the DOS Case Number of the J1 applicant.)
- NPI Number:** 500500500
- First Name:** Stanley
- Last Name:** Hudson
- Middle Name:** R.
- Date of Birth:** 10/13/1986 (Annotated: Basic demographic information about the J1 Applicant.)
- Country of Birth:** Anguilla
- Country of Last Residency:** Anguilla
- Gender:** Male
- Email:** shudson@cox.net
- Home Phone:** 928-432-1111
- Cell Phone:** 928-432-1111
- Mailing Address:** 143 S. 22nd Street, Apt 3B
- Mailing City:** New York City
- Mailing State:** New York
- Mailing Zip:** 10001
- Mailing Country:** United States
- Provider Type:** Primary Care/Hospitalist (Annotated: Provider Type is a drop down menu where there are 3 options to choose from including Primary Care, Primary Care/Hospitalist, and Specialist.)
- Discipline:** MD
- Specialty:** INTERNAL MEDICINE (Annotated: The Specialty is a drop down menu that provides a comprehensive list of current medical specialties.)
- Sub Specialty:** HEMATOLOGY & ONCOLOGY, INFECTIOUS DISEASE, INTERNAL MEDICINE (Annotated: Multiple Sub Specialties can be chosen by holding down the CONTROL (CTRL) key.)
- Languages spoken fluently:** English, Spanish, Portuguese (Annotated: Multiple languages can be entered into this field. Simply hit the ENTER button to go to a new line and type the new language.)

At the bottom right, there is a button labeled 'SAVE & CONTINUE'.

13) The user has an option to save the application and come back to it later. To continue the application, the user will log back into the portal and the application will be in the “Applications pending to be completed” section. The user must click “RESUME APPLICATION” to continue.

The screenshot shows the 'J1 Attorney/Authorized Representative Application Portal' with the following elements:

- START J1 VISA WAIVER APPLICATION** button.
- J1 Time Frame:** Start Date: 3/19/2020 End Date: 12/30/2020
- Applications pending to be completed** section:
- Search:** [Search bar]
- Table:**

Applicant Name	DOS Case Number	Application Type	Submitted Year	
Stanley R. Hudson	100000	NEW	2020	<b>RESUME APPLICATION</b>
- Showing 1 to 1 of 1 entries**
- Navigation:** First Previous 1 Next Last

**14)** The second section is the Employer/Service Site. This is where the attorney/authorized representative or J1 provider will add all the locations that the J1 Visa Waiver applicant will be working at to fulfill the J1 Visa Waiver obligation. The user will select the employer name, employer site administrator and the site(s).

Personal/ Discipline

Employer/Service Site

Supporting Documents

Please select all the Sites that provider will work for by selecting the Employer and associated Site Admins.

Search

Employer Name

Employer Site Admin

Sites

Select

Select

Select

ADD SITE +

Assigned Service Site

Employer Name

Admin Emp Verification

Site Admin Validation

PREVIOUS

CONTINUE

Please note that the employer must register the site(s) prior to the attorney/authorized representative or J1 provider starting an application. If the employer, site admin or sites do not appear, this means the Employer and site(s) have not been registered in the portal.

**15)** The attorney/authorized representative or J1 provider will then click on the drop-down options for EMPLOYER NAME, EMPLOYER SITE ADMIN, and SITES. Search for the correct information in accordance with the site of choice.

Personal/ Discipline

Employer/Service Site

Supporting Documents

Please select all the Sites that provider will work for by selecting the Employer and associated Site Admins.

Search

Employer Name

Employer Site Admin

Sites

Select

Select

Select

ADD SITE +

Assigned Service Sites

Employer Name

Site Admin Name

Site Name

Site Admin Emp Verification

Site Admin Validation

**16)** Once the site information has been added, click on ADD SITE to add the site to save the information of the newly added site.

Personal/ Discipline      Employer/Service Site      Supporting Documents

Please select all the Sites that provider will work for by selecting the Employer and associated Site Admins.

**Search**

Employer Name	Employer Site Admin	Sites
AZDHS	J1SA ADHS	Test J1 Site

**ADD SITE +**

**Assigned Service Sites**

Employer Name	Site Admin Name	Site Name	Site Admin Emp Verification	Site Admin Validation
---------------	-----------------	-----------	-----------------------------	-----------------------

**17)** After adding the site, the site will not be listed under “Assigned Service Sites” below. To add more than on service sites, follow the same steps. Each time a service site is added, an automatic email is sent to the service site administrator to verify and validate the J1 provider’s employment. Otherwise, it will show that the verification and validation is in a “pending” status.

Personal/ Discipline      Employer/Service Site      Supporting Documents

Please select all the Sites that provider will work for by selecting the Employer and associated Site Admins.

**Search**

Employer Name	Employer Site Admin	Sites
AZDHS	J1SA ADHS	Select

**ADD SITE +**

**Assigned Service Sites**

Employer Name	Site Admin Name	Site Name	Site Admin Emp Verification	Site Admin Validation
AZDHS	J1SA ADHS	Test J1 Site	PENDING	PENDING

You can click on the trashcan icon to remove a site

18) Once the site administrator has completed the employment verification, the “pending” status will change to ACCEPTED and COMPLETE. The attorney/authorized representative or J1 provider to either REVIEW or REVERT the employer’s validation.

The screenshot shows a progress bar at the top with three steps: 'Personal/ Discipline' (red dot), 'Employer/Service Site' (red dot), and 'Supporting Documents' (grey dot). Below the progress bar is a yellow instruction box: 'Please select all the Sites that provider will work for by selecting the Employer and associated Site Admins.' Below this is a search section with three dropdown menus: 'Employer Name' (AZDHS), 'Employer Site Admin' (Select), and 'Sites' (Select). An 'ADD SITE +' button is below the dropdowns. The main section is titled 'Assigned Service Sites' and contains a table with the following data:

Employer Name	Site Admin Name	Site Name	Site Admin Emp Verification	Site Admin Validation	
AZDHS	J1SA ADHS	Test J1 Site	ACCEPTED	COMPLETE	<div>REVIEW REVERT </div>

At the bottom left is a 'PREVIOUS' button and at the bottom right is a 'CONTINUE' button. Two yellow callout boxes with red arrows pointing to the 'REVIEW' and 'REVERT' buttons contain the following text:

Clicking on REVIEW provides the ability for the user to see the documents that were uploaded by the service site admin to ensure that the correct documents were provided and that the DOS case number is on each page.

If the items are not sufficient for any reason, the attorney/authorized representative or J1 provider can click REVERT so that the service site admin can address the remaining deficiencies noted.

19) If the attorney/authorized representative or J1 provider clicks REVERT a pop-up box will appear where notes can be entered that will go directly to the service site admin to address. Once the notes are entered, click “Yes.”

The pop-up box has a title 'Are you sure?' and a warning icon. The text inside reads: 'If the information provided is incomplete or missing, return to the Service Site Administrator to complete Employment Verification?'. Below the text is a text input field with the placeholder 'Enter Notes to Site Administrator if any'. At the bottom are two buttons: 'Yes' (green) and 'Cancel' (red).

**20)** Another pop-up message will appear confirming that the employment validation was returned back to the service site administrator. Click “OK” to address the message.

**NOTE:** The employment verification and validation must be completed before the attorney/authorized representative or J1 provider can submit the J1 application.

app3-qa.azdhs.gov says

Employment validation has been returned and sent back to the Site Admin.

OK

Personal/ Discipline

Supporting Documents

Please select all the Sites that provider will work for by selecting the Employer and associated Site Admins.

Search

Employer Name	Employer Site Admin	Sites
AZDHS	Select	Select

ADD SITE +

**21)** After the documents are deemed complete and sufficient, click “CONTINUE” to navigate to the next section.

Personal/ Discipline

Employer/Service Site

Supporting Documents

Please select all the Sites that provider will work for by selecting the Employer and associated Site Admins.

Search

Employer Name	Employer Site Admin	Sites
AZDHS	Select	Select

ADD SITE +

Assigned Service Sites

Employer Name	Site Admin Name	Site Name	Site Admin Emp Verification	Site Admin Validation	
AZDHS	J1SA ADHS	Test J1 Site	ACCEPTED	COMPLETE	REVIEW REVERT

PREVIOUS CONTINUE

22) To begin the uploading of the documents needed, the attorney/authorized representative or J1 provider can begin by clicking on the individual tab, or click “UPLOAD DOCUMENTS” in the bottom right hand corner to get started.

J1 Provider Documents Checklist

Please address every item on this checklist.

Uploaded

Missing

Deficient Documents

Please upload all the documents listed below.

DS-3035 Review Application Form, Data Sheet (current edition)

A letter from the head of the organization that wishes to hire the J-1 physician

Signed valid contract of full time employment from the time USCIS grants a waiver of the two-year home-country residency requirement

Legible copies of the physician's IAP-66/DS-2019 forms, covering every period the physician was in J-1 status

Curriculum Vitae (CV) or Resume

Form G-28 or letter from an authorized representative

Please upload all the documents listed below.

Description of the J-1 physician's proposed responsibilities and schedule

Documentation demonstrating unsuccessful recruitment efforts for at least 6 months prior to submitting the application and a written description of these efforts

Physician Application

Three letters of community support on appropriate letterhead. Letters of support should not be from members or affiliates of the sponsoring organization or service site

Copy of Physician's Arizona medical license or license application

PREVIOUS

UPLOAD DOCUMENTS

23) Once the tab is open, click on the “CLICK HERE TO UPLOAD DOCUMENTS AND SAVE” to upload the corresponding documents.

Personal/ Discipline      Employer/Service Site      Supporting Documents

**J1 Provider Documents**

Provider Name: Testing Testing      DOS Case Number: 1222223333

Upload Documents Section **1** of **11**

**DS-3035 Review Application Form, Data Sheet (current edition)**

Documents to be Uploaded:

- All uploaded documents must have the case number on each page.
- Please submit the current edition of the DS-3035, including the bar code page. Applications with other versions of the Data Sheet will be returned to the sender without processing. This can be located [Here](#)

Files Uploaded: **0**

File Name	Created Date
No documents found	

Click Here to Upload Documents and Save

By selecting back to document checklist, you can go back to the menu of all of the items that will be needed.

← PREVIOUS      **BACK TO DOCUMENT CHECKLIST**      CONTINUE →

24) To upload a document, either drag and drop the document(s) into the box or click in the box to upload the necessary document(s). Once the document(s) is uploaded, click SAVE.

**J1 Provider Documents**

Provider Name: Testing Testing      DOS Case Number: 1222223333

Upload Documents Section **1** of **11**

**DS-3035 Review Application Form, Data Sheet (current edition)**

Documents to be Uploaded:

- All uploaded documents must have the case number on each page.
- Please submit the current edition of the DS-3035, including the bar code page. Applications with other versions of the Data Sheet will be returned to the sender without processing. This can be located [Here](#)

Files Uploaded: **0**

File Name	Created Date
No documents found	

File Name	Actions
TESTING DOCUMENT.pdf	

**SAVE**

← PREVIOUS      BACK TO DOCUMENT CHECKLIST      CONTINUE →



**25)** After clicking SAVE, a pop-up box will appear noting the file has been uploaded successfully. Click OK and on the same screen, the uploaded file will now be visible under FILES UPLOADED including the date and time it was uploaded. IF all documents are uploaded correctly the attorney/authorized representative or J1 provider will hit CONTINUE.

Your files(1) have been uploaded successfully.

OK

**J1 Provider Documents**

Provider Name: Testing Testing      DOS Case Number: 12222233333

Upload Documents Section **1** of **11**

**DS-3035 Review Application Form, Data Sheet (current edition)**

Documents to be Uploaded:

- All uploaded documents must have the case number on each page.
- Please submit the current edition of the DS-3035, including the bar code page. Applications with other versions of the Data Sheet sender without processing. This can be located [Here](#)

Files Uploaded: **1**

File Name	Created Date
TESTING DOCUMENT.pdf	9/11/2024 4:44:38 PM

Click Here to Upload Documents and Save

SAVE

← PREVIOUS      BACK TO DOCUMENT CHECKLIST      CONTINUE >

Selecting the cloud will allow the user to download and view the uploaded document.

Selecting the trashcan will remove the document from the application.

**26)** Once you click continue this pop, asking if the DOS number is added to each page. If everything is ready, click YES.

**Please note:** As you progress with the document uploading, a series of pop-up messages will appear to ensure that the uploaded item has the specific requirements for the document being uploaded.

**DS-3035 Review Application Form, Data Sheet (current edition)**

Documents to be Uploaded:

- All uploaded documents must have the
- Please submit the current edition of the
- sender without processing. This can be

Files Uploaded: **1**

File Name
TESTING DOCUMENT.pdf

Are you sure the uploaded DS-3035 data sheet is the current edition and contains the DOS case number on each page?

Yes No

27) Repeat steps 23-27 until you reach the last tab. There are eleven (11) sections that the attorney/authorized representative or J1 provider will have to navigate through to upload documents required for the application. Once done, the attorney/authorized representative or J1 provider can select “CONTINUE TO DOCUMENT CHECKLIST”

J1 Provider Documents

Provider Name:Testing Testing

DOS Case Number:1222223333

Upload Documents Section 11 of 11

Copy of the physician's license or license application.

Documents to be Uploaded:

- All uploaded documents must have the case number on each page.
- In lieu of the Arizona medical license, a receipt or email confirmation of the Arizona medical license application filing from the Arizona Medical Board may be submitted, if license is not yet issued.
- Contact the Arizona Medical Board at (480) 551-2700 or at: <http://www.azmd.gov/>

Files Uploaded: 1

File Name	Created Date		
TESTING DOCUMENT.pdf	9/12/2024 11:00:52 AM		

Click Here to Upload Documents and Save

SAVE

PREVIOUS

CONTINUE TO DOCUMENT CHECKLIST

28) Clicking “SUBMIT J1 APPLICATION” will trigger a pop-up asking if the user wants to submit the application. Clicking YES will submit the application and clicking CANCEL will take the user back to the application to make any changes.

J1 Provider Documents Checklist

Please address every item on this checklist.

Uploaded

Missing

Deficient Documents

Please upload all the documents listed below.

DS-3035 Review Application Form, Data Sheet (current edition)

A letter from the head of the organization that wishes to hire the J-1 physician

Signed valid contract of full time employment from the time USCIS grants a waiver of the two-year home-country residency requirement

Legible copies of the physician's IAP-66/DS-2019 forms, covering every period the physician was in J-1 status

Curriculum Vitae (CV) or Resume

Form G-28 or letter from an authorized representative

Please upload all the documents listed below.

Description of the J-1 physician's proposed responsibilities and schedule

Documentation demonstrating unsuccessful recruitment efforts for at least 6 months prior to submitting the application and a written description of these efforts

Physician Application

Three letters of community support on appropriate letterhead. Letters of support should not be from members or affiliates of the sponsoring organization or service site

Copy of Physician's Arizona medical license or license application

PREVIOUS

SUBMIT J1 APPLICATION

UPLOAD DOCUMENTS



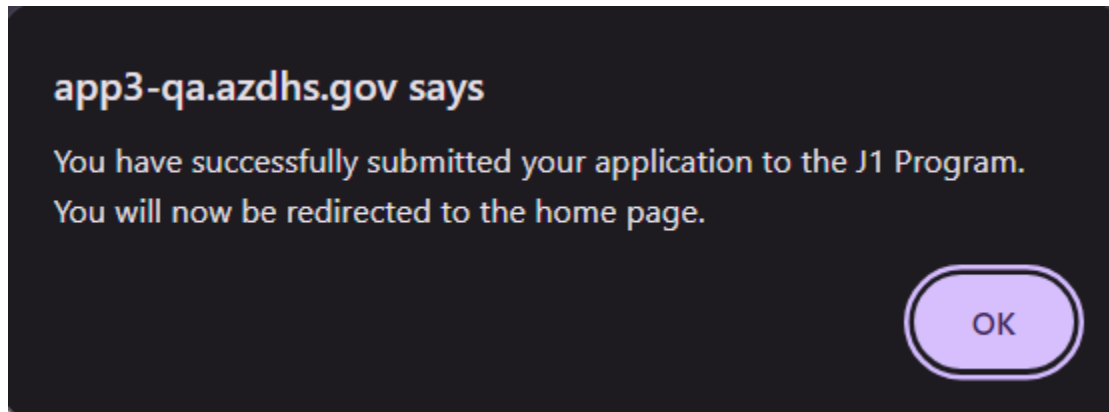
## Are you sure?

Do you want to submit the application for processing?  
Once submitted, you may not view or make changes  
to your submitted application.

Yes

Cancel

29) Once the application has been submitted, this pop up will appear. The user will be navigated back to the home page where the application will now be listed under “Application submitted for Processing/Processed Applications.” The application is now submitted to ADHS for review.



#### J1 Attorney/Authorized Representative Application Portal

START J1 VISA WAIVER APPLICATION

J1 Time Frame

Start Date: 3/19/2020 End Date: 12/30/2020

#### Applications pending to be completed

Search:

Applicant Name	DOS Case Number	Application Type	Submitted Year
----------------	-----------------	------------------	----------------

No data available in table

Showing 0 to 0 of 0 entries

First Previous Next Last

#### Applications submitted for Processing/ Processed Applications.

Search:

Applicant Name	DOS Case Number	Application Type	Submitted Year	Status
----------------	-----------------	------------------	----------------	--------

Stanley R. Hudson	100000	NEW	2020	PROCESSING
-------------------	--------	-----	------	------------

Showing 1 to 1 of 1 entries

First Previous **1** Next Last

## **Appendix C: Important Resources**

For information regarding primary care HPSAs, MUAs, and MUPs, and mental health HPSAs:

<https://data.hrsa.gov/tools/shortage-area>

For J-1 Visa Waiver Contract Guidelines refer to:

<https://www.azdhs.gov/documents/prevention/health-systems-development/workforce-programs/j-1-visa-waiver/eligibility-requirements/contract-guidelines-august-2016.pdf>

For sites that offer a sliding fee scale, refer to the Sliding Discount-to-Fee Providers at

<https://www.azdhs.gov/prevention/health-systems-development/sliding-fee-schedule/index.php#clinic-locations>

For Arizona sliding discount-to-fee scale submission and content requirements refer to R9-1-504 on this document: [http://apps.azsos.gov/public\\_services/Title\\_09/9-01.pdf](http://apps.azsos.gov/public_services/Title_09/9-01.pdf)

Federal Poverty Guidelines refer to: <https://aspe.hhs.gov/poverty-guidelines>

For additional information on the J-1 visa waiver program:

<http://j1visa.state.gov/participants/videos/j-1-visa-exchange-visitor-program/>