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LOCAL NEWS

Colorado Welcome Back helps immigrant health care pros re-enter field

The Denver Post

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8 COMMENTS



Lucia Madera, an immigrant who graduated from the Universidad Autonoma de Guadalajara School of Medicine in Mexico, draws blood from a patient at Clinica Tepeyac in west Denver. She received help from Colorado Welcome Back to land a residency in Texas. (*Diego Aparicio, Viva Colorado*)

A nonprofit formed to help medically trained refugees re-enter their professions in the U.S. is expanding to include all immigrants, in anticipation of a shortage of doctors, nurses and other health care professionals that will follow health care reform.

Grants from Kaiser Permanente and the Colorado Health Foundation will allow Colorado Welcome Back to begin guiding other immigrants with medical degrees through the long and complex process to test and validate their foreign credentials for work in the U.S.

Since it was founded in 2010, the group has worked with 198 refugees and immigrants from 39 countries.

In Colorado alone, the federal Affordable Care Act is expected to add 510,000 new patients to the health system between 2014 and 2016 — including some who have already put off health visits and will be looking for long-overdue primary care treatment.

Nationwide, the estimate is that about 35 million new people will enter the system, creating a need for about 45,000 family physicians by 2020, according to Dr. Richard Budensiek, a primary care doctor in Greeley and fellow of the Colorado Academy of Family Physicians.

"Our system is geared to produce specialist physicians," Budensiek said. "Our institutions are not producing the amount of primary care physicians we're going to need in the future."

Colorado Health Institute policy and analysis director Amy Downs said the organization is in the process of calculating a more precise Colorado number.

But the institute's most recent study shows that if the estimated 510,000 new patients went to a primary care doctor at the average rate that patients visit doctors now, the state would need between 83 and 141 new primary care clinicians — including physicians, physician assistants and nurse practitioners.

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"Those numbers are relative to the primary care people are consuming now. That doesn't mean it's optimal," Downs said. "And just because there's providers doesn't mean you have access to care."

Downs said that if a majority of new primary care professionals didn't accept Medicaid or low-income patients, the need likely wouldn't go away.

Steve Holloway, director of the Colorado Department of Public Health and Environment's Primary Care Office, estimates that to serve current needs, the state would need an additional 147 providers — a number he said is on the conservative side.

Budensiek has started seeing an increase in the number of foreign-trained health care professionals and said he believes the influx will be a boon to the country's expected doctor shortage.

The Educational Commission for Foreign Medical Graduates in 2011 estimated that about 25 percent of physicians nationwide are foreign-trained.

But according to a new report by the Migration Policy Institute, foreign-trained professionals often encounter difficulties putting their skills and professional experience to use when they migrate, particularly in regulated professions, such as medicine.

For Lucia Madera, just learning the process to become a medical assistant in Colorado took months of research as well as volunteering and working part time at local health clinics.

In her first few months here, she was desperate. "I started looking for a job but didn't know where to start. I wanted to follow my dreams of becoming a physician in the U.S."

Madera had earned a medical degree from the Universidad Autonoma de Guadalajara School of Medicine in Mexico, but she moved to Colorado almost two years ago with her son to be closer to her mother, who was ill.

The Migration Policy Institute estimates that more than 1.6 million college-educated immigrants to the U.S., like Madera, were underemployed as of 2011. The report cited such barriers as language proficiency and employer resistance to hiring a candidate with unfamiliar qualifications.

Removing as many of those barriers as possible is Colorado Welcome Back's goal.

"It doesn't make sense that we have medical doctors working construction," said program manager Diana Higuera. "You have all that education that can be an asset for the community, and it's just not used."

Most immigrants Colorado Welcome Back has worked with came to the U.S. from Iraq or Mexico.

In Iraq, medical school is taught in English, which gives those graduates an edge in the U.S. But even with help, the process is long and complex and not everyone succeeds.

Colorado Welcome Back staff helps the immigrants study, build their résumés and practice interviewing. The program also provides workshops to teach them how to bridge cultural differences.

The exact process for each profession varies, but most start with testing an immigrant's English skills. Basic language skills are not enough.

"Eighty percent of those we see need more English classes to be ready to take the tests or to get a job," said case manager Muthanna Jabbar.

Nurses — a large proportion of the health care professionals that the group helps — also have to present their transcripts to show everything they studied. The state board reviews the transcripts to determine whether the course work is equivalent to what is required in the U.S.

Doctors must take English tests and detail their curriculum. They also must pass the U.S. Medical Licensing Exam and complete a new residency program, competing with U.S. graduates for the spots.

"They prefer those who are fresh out of grad school," Jabbar said. "It's one of the few times that having more experience goes against you."

Jabbar said that none of the Colorado Welcome Back participants have landed a spot in Colorado's competitive residency programs.

But they have had luck sending people, like Madera, out of state.

Madera started working with Colorado Welcome Back while applying to 63 U.S. residency programs last August. She heard back from two.

"Since I only had two interviews, I had to work harder and stand out from 80 people that were getting interviewed from all over the country for only eight positions," she said.

Madera recently landed a residency in a family medicine program in El Paso, Texas, and considers herself lucky to have found Colorado Welcome Back toward the end of her process.

"If I had the chance to go through this process again, I would have loved to have someone guide me," she said. "Colorado Welcome Back tells you who to contact, and how to start the process. If you know what path you're going to take, it's a lot easier to reach your goal."

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Freelancer Rachel Sapin contributed to this report.