Primary Care Advisory Council (PCAC) Meeting Agenda

June 29, 2022 1 PM to Adjournment

Meeting Location

This meeting will be held online or by phone. The online and phone meeting details are:

Virtual Teams Meeting Address Link:

https://teams.microsoft.com/l/meetup-

join/19%3ameeting YjNiMTBkMmQtOThhMS00MjJiLWI1ZWEtZDY4ZGRIODk2YThi%40thread.v2/0?context=%7b%22Tid%22%3a%22e4a340e6-b89e-4e68-8eaa-

<u>1544d2703980%22%2c%22Oid%22%3a%22fd584ae0-7446-4961-b1f2-b3a4b67384b5%22%7d</u>

Or call in (audio only) +1 775-321-6111, United States, Reno

Phone Conference ID: 830734277#

This meeting is recorded pursuant to the Nevada Open Meeting Law (Nevada Revised Statutes Chapter 241). Agenda items may be taken out of order, combined for consideration, and/or removed from the agenda at the Chairperson's discretion. A break may be scheduled at the Chairperson's discretion.

- 1. Call to order/Roll call Staff
- 2. <u>Possible Action:</u> Review and possible approval of minutes from the March 21st, 2022, meeting Chairperson

PUBLIC COMMENT

 Possible Action: Discussion and possible action to make recommendation to the Administrator for the Division of Public and Behavioral Health regarding a J-1 Physician Visa Waiver Letter of Support for Dr. Sandhu – Tarryn Emmerich-Choi, Health Resource Analyst, PCO

PUBLIC COMMENT

4. **Possible Action:** Discussion and possible action to make recommendation to the Administrator for the Division of Public and Behavioral Health regarding a J-1 Physician Visa Waiver Letter of Support for Dr. Viswanathan – Tarryn Emmerich-Choi, Health Resource Analyst, PCO

PUBLIC COMMENT

5. Possible Action: Discussion and possible action to make recommendation to the Administrator

for the Division of Public and Behavioral Health regarding a J-1 Physician Visa Waiver Letter of Support for Dr. Lee – Tarryn Emmerich-Choi, Health Resource Analyst, PCO

PUBLIC COMMENT

6. <u>Public Comment</u>: No action may be taken on a matter raised under this item of the agenda until the matter itself has been specifically included on an agenda as an item upon which action will be taken.

7. Adjournment

NOTICE OF THIS MEETING AGENDA HAS BEEN POSTED AT THE FOLLOWING LOCATIONS:

Nevada Public Notice website: https://notice.nv.gov
Division of Public and Behavioral Health (DPBH), Primary Care Office website: https://dpbh.nv.gov/Boards/PCO/Meetings/2022/Primary Care Advisory Council FFY2022Meetings/
DPBH - 4150 Technology Way, Carson City, NV 89706

We are pleased to make reasonable accommodations for individuals who wish to attend this meeting. If special arrangements or equipment are necessary, please notify the Nevada Primary Care Office at nvpco@health.nv.gov or in writing, at Division of Public and Behavioral Health, Attn: Primary Care Office, 4150 Technology Way, Suite 300, Carson City, NV 89706 or by calling (775) 684-2204 no less than three (3) business days prior to the meeting.

Inquiries regarding the items scheduled for this Council meeting or if a member of the public would like to request the supporting material for this meeting, please contact Nevada Primary Care Office at nvpco@health.nv.gov or (775) 684-2204.

STATE OF NEVADA DIVISION OF PUBLIC AND BEHAVIORAL HEALTH (DPBH) PRIMARY CARE ADVISORY COUNCIL (PCAC)

DRAFTMINUTES

May 4, 2022 01:00PM to Adjournment

TELECONFERENCE:

In accordance with Governor Sisolak's Declaration of Emergency Directive 006; Subsection 1; The requirement contained in NRS 241.023 (1) (b) that there be a physical location designated for meetings of public bodies where members of the public are permitted to attend and participate is suspended.

COUNCIL MEMBERS PRESENT:

Gerald Ackerman Dr. Susan VanBeuge Nancy Bowen Julie Clyde Dr. Donald Campbell

COUNCIL MEMBERS NOT PRESENT:

Dr. Amir Qureshi Jaron Hildebrand

DPBH/DHCFP STAFF PRESENT:

Tarryn Emmerich-Choi, Health Resource Analyst, PCO Pierron Tackes, Deputy Attorney General Erin Lynch Cynthia Meno, Primary Care Office Manager

OTHERS PRESENT:

Matthew Grimes, Desert Radiology Cynthia Yarbrough, Fisher Phillips

1. Roll call and confirmation of quorum.

T. Emmerich-Choi read the roll call and stated that there was a quorum present.

2. Approval of minutes:

S. VanBeuge asked if there were any additions or corrections to the minutes from the March 21st, 2022 meeting. No recommendations were made.

First Motion: G. Ackerman moves to pass the approval of minutes

Second Motion: J. Clyde seconds
Motion: Passes Unanimously

3. 4. Recommendation to the Administrator for the Division of Public and Behavioral Health regarding a J-1 Physician Visa Waiver Letter of Support for Dr. Kareem Ahmed.

STATE OF NEVADA DIVISION OF PUBLIC AND BEHAVIORAL HEALTH (DPBH) PRIMARY CARE ADVISORY COUNCIL (PCAC)

Tarryn Emmerich-Choi presented summary handout of the completed application.

Member Comment: none

Public Comment: none

First Motion: N. Bowen makes a motion to approve

Second Motion: J. Clyde seconds **Motion:** Passes Unanimously

5. Member or Public Comment

None

6. Adjournment

The meeting adjourned at 01.09 p.m.

Complete and check all applicable fields, corresponding boxes and enter all required information: Candidate's Information: Candidate's Full Name: Gavneet Singh Sandhu Residency Discipline: Internal Medicine Residency Timeframe: June 2017 to June 2020 Location of Residency: MedStar Health Internal Medicine Residency, Baltimore, MD Fellowship(s)/Specialty: Nephrology and Hypertension Fellowship(s) Timeframe1: June 2020 to June 2022 Location of Fellowship(s)1: MedStar Georgetown University Hospital, DC **Employer's Information:** Employer's Full Name: Kidney Specialists Of Southern Nevada Employer's Address: 500 S Rancho Dr, Suite 12, Las Vegas, NV 89106 Practice Site #1: Kidney Specialists Of Southern Nevada Practice Site #1 Address: 500 South Rancho Drive, Suite # 12, Las Vegas, Nevada 89106 Number of Hours Candidate will practice at site to meet 40 hours per week: 24 Select and input all that apply: Practice Site #1 HPSA (#ID: 1321146138) Practice Site #1 MUA (#ID: 06158) Flex spot Federally Qualified Health Center (FQHC) Tribal Health Center Rural Health Clinic (RHC) Primary Care Clinic for a Rural Hospital Practice Site #2*: Kidney Specialists Of Southern Nevada Practice Site #2 Address: 2065 North Las Vegas Blvd, North Las Vegas, NV 89030 Number of Hours Candidate will practice at site to meet 40 hours per week: 16 Select all that apply: Practice Site #2 HPSA (#**ID: 1326180844**) Practice Site #2 MUA (#ID: 06158) Flex spot Federally Qualified Health Center (FQHC) Tribal Health Center Rural Health Clinic (RHC) Primary Care Clinic for a Rural Hospital More than two additional practice sites: ✓ Yes *If additional practice sites, please copy and add all additional practice locations here or at end of form*

Official Legal Representative and Contact Person for Application:

Contact Name: Bin

Bindi C Parikh

Contact Mailing Address:

5861 Pine Av, STE B Chino Hills, CA 91709

Contact e-mail:

bindi@path2immigration.com

Contact telephone: 949-870-2503

Official Contact Person for Employment Verification and Site Information:

Contact Name: Hailee Long

Contact Mailing Address: 500 South Rancho Drive, Suite # 12 Las Vegas NV, 89106

Contact e-mail: hlong@ksosn.com Contact telephone: 702-877-1887

Employer and Candidate, as identified above, seek a letter of support from the Physician Visa Waiver Program and requests the Division of Public and Behavioral Health to forward the J-1 Visa Waiver application to the U.S. Department of State as a State Health Agency request, per DS-3035. Employer and Candidate have agreed to comply with the duties set forth in Chapter 439A of the Nevada Revised Statutes (NRS) and Nevada Administrative Code (NAC) and to cooperate with the Physician Visa Waiver Program.

Employer and Candidates have provided all necessary information for review of this application by the Primary Care Council including the following:

- ☑ Copy of the contract between the Employer and Candidate;
- Copy of the Candidate curriculum vitae and passport pages;
- Letter from Employer: description of the Candidate's qualifications, responsibilities and how this employment will satisfy important unmet health care needs within the designated area;
- ☑ Summation tables identifying the breakdown of patient visits billed by payment category;
- ☑ Documentation of employer recruitment efforts for US citizens for two months prior to submission of the application, UNLESS the requirement was waived for a rural employer with emergent needs;
- ☑ Long-range retention plans which include the following: CME benefit, competitive salary and paid time
- □ Copy of letter from the Nevada State Board of Medical Examiners (NSBME) acknowledging Candidate's application for medical licensure;
- ☑ INS Form *G-28* OR letter from a law office if the candidate has an attorney OR a statement that the applicant does not have an attorney;
- □ Copies of all DS-2019's "Certificate of Eligibility for Exchange Visitor (J-1 Visa Waiver) Status" (INS form(s) I-94 for the candidate and any family members; proof of passage of examinations required by Bureau of Criminal Investigation (BCI); transcripts for all 3 sections of United States Medical Licensing Examinations (USMLE); and certification from Educational Commission for Foreign Medical Graduates (ECFMG).

In signing below, an authorized representative of the Employer and the Candidate declares under penalty of perjury that all statements submitted with this application are true and accurate and this application complies with the requirements of NRS 439A.175 and NAC 439.730 including as follows:

All practices sites where the Candidate will practice:

- Are located in a federally designated Primary Care HPSA, MUA/P or a site approved by the state as a geographic exception or a flex slot (Public Law 108-441) to address the underserved;
- ☑ Accept Medicare, Medicaid assignment and Nevada Checkup:
- ☐ Offer a sliding discount fee schedule and a minimum fee based on family size & income; and
- □ Has a policy stating all patients will receive treatment, regardless of their ability to pay which is either posted at the site or provided to the patients.

The contract between the Employer and the Candidate provides the following (verify and enter missing data):

- ☑ Candidate agrees to provide services during 3 -year waiver obligation;
- ☐ Candidate will provide services 40 hours per week minimum plus on-call time;
- The salary meets or exceeds the prevailing wage for that area and for physicians of that specialty as reported by the Foreign Labor Certification Center, Department of Labor, (http://www.flcdatacenter.com): Prevailing wage (FLC Median wage for Physicians and Surgeons: \$177,486/ Contracted wage \$220,000 base pay
- ☑ The amount of time off for vacation, sick leave and for Continuing Medical Education is included. The employer shall maintain records to show the amount of time-off requested and the amount of time taken.
- Does <u>not contain a</u> "non-compete" clause that would prohibit the J-1 Visa Waiver physician from opening a new clinic or working in a clinic in that shortage area upon completing the three-year commitment:
- □ Conditions for termination of the contract, for both the physician and employer, are included. A "no-cause" termination is not allowed;
- Liquidated damages (suggested to be under \$50,000) in the event that the physician or employer terminates the contract before three years is included in the contract Employer \$N/A /Physician \$N/A;
- Agreement to begin employment at the stated practice site within 90 days of receiving a waiver from the United States Citizenship and Immigration Services (USCIS). During the 90 days, the physician must obtain the required licenses from the Nevada State Board of Medical Examiners, the Drug Enforcement Agency, the State Board of Pharmacy, and any other licenses as may be required for the physician to practice medicine in Nevada; and
- A statement that the physician agrees to meet the requirements set forth in section 214(I) of the Immigration and Nationality Act.

Please note in accordance with NRS Chapter 239, all public records, the contents not otherwise declared by law to be confidential, shall be open for inspection or to obtain copies.

Additional Employment Sites And Address:

Northwest-Centennial Hills

Kidney Specialists Of Southern Nevada 8775 Deer Springs Way Las Vegas, Nevada 89149 Phone: 702-877-1887

HPSA: No MUA: Yes ID: 07784

No. Of Hours:

Pahrump-Nye County

Kidney Specialists Of Southern Nevada 330 South Lola Lane Suite 200 Pahrump, Nevada 89048

Phone: 702-877-1887

HPSA: Yes ID: 1327512355 MUA/P: Yes ID: 07931

No. Of Hours:

South West-Southern Hills

Kidney Specialists Of Southern Nevada 9280 W Sunset Rd Suite 438 Las Vegas, Nevada 89148

Phone: 702-877-1887 Email: hlong@ksosn.com

HPSA: Yes MUA: No ID: 1327859798

No. Of Hours:

• Contact Person

Hailee Long

Chief Operating Officer Email: hlong@ksosn.com Office: 702-877-1887 Cellular: 801-509-8688

By signing below, I hereby attest that the above requirements have been met and I hereby agree to abide by all the program policies and rules as described in NRS and NAC and as further required under the Rights and Responsibilities located at the Divisions website at: http://dpbh.nv.gov/Programs/Conrad30/Conrad30-Home/.

| Authorized Employer: | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| Kidney Specialiste of Southern Nova | da |
| Employer Company/Business Name | |
| Hailee Lorg | C00 |
| Employer Representative Name (First/Last) | Title |
| Der De | 4/28/2022 |
| Employer Signature | Date |
| NOTARY PUBLIC: State of: NOTARY PUBLIC: State of: NOTARY PUBLIC: STATE OF NEVADA My Commission Expires: 03-30-25 Certificate No: 21-4527-01 Subscribed and Sworn before me on this 28 day of Notary Signature My Commission Expires: My Commission Expires: 8/30/25 Candidate/Physician: | _, 20 <u>ZZ</u> |
| Candidate Name (First/Last) | Title |
| ** | |
| Candidate Signature | Date |
| NOTARY PUBLIC: State of: New York State of: New York My Commission Expires: 08-30-25 County of: Certificate No: 21-4527-01 Subscribed and Sworn before me on this 28 day of Notary Signature My Commission Expires: 8 30 25 | , 20 22 |

Complete and check all applicable fields, corresponding boxes and enter all required information:

| Candidate's Information: Candidate's Full Name: | Gavneet Singh Sandhu |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| Residency Discipline: Residency Timeframe: Location of Residency: | Internal Medicine June 2017 to June 2020 MedStar Health Internal Medicine Residency, Baltimore, MD |
| Fellowship(s)/Specialty: Fellowship(s) Timeframe1: Location of Fellowship(s)1: | Nephrology and Hypertension June 2020 to June 2022 MedStar Georgetown University Hospital, DC |
| Employer's Information: Employer's Full Name: Employer's Address: | Kidney Specialists Of Southern Nevada 500 S Rancho Dr, Suite 12, Las Vegas, NV 89106 |
| Practice Site #1: Practice Site #1 Address: Number of Hours Candidate Select and input all that app Practice Site #1 HPSA (# Federally Qualified Heal Rural Health Clinic (RHC | HPSA#) Practice Site #1 MUA (#MUA#) Flex spot th Center (FQHC) Tribal Health Center |
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| More than two additional practice sites, | ractice sites: |
| Official Legal Representativ Contact Name: Contact Mailing Address: Contact e-mail: Contact telephone: | e and Contact Person for Application: Bindi C Parikh 5861 Pine Av, STE B Chino Hills, CA 91709 bindi@path2immigration.com 949-870-2503 |

Official Contact Person for Employment Verification and Site Information:

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Hailee Long

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500 South Rancho Drive, Suite # 12 Las Vegas NV, 89106

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Contact telephone:

702-877-1887

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- ☑ Summation tables identifying the breakdown of patient visits billed by payment category;
- ☑ Documentation of employer recruitment efforts for US citizens for two months prior to submission of the application, UNLESS the requirement was waived for a rural employer with emergent needs;
- □ Long-range retention plans which include the following: CME benefit, competitive salary and paid time off.
- □ Copy of letter from the Nevada State Board of Medical Examiners (NSBME) acknowledging Candidate's application for medical licensure;
- ☑ INS Form G-28 OR letter from a law office if the candidate has an attorney OR a statement that the applicant does not have an attorney;
- □ Copies of all DS-2019's "Certificate of Eligibility for Exchange Visitor (J-1 Visa Waiver) Status" (INS form(s) I-94 for the candidate and any family members; proof of passage of examinations required by Bureau of Criminal Investigation (BCI); transcripts for all 3 sections of United States Medical Licensing Examinations (USMLE); and certification from Educational Commission for Foreign Medical Graduates (ECFMG).

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- ☑ Liquidated damages (suggested to be under \$50,000) in the event that the physician or employer terminates the contract before three years is included in the contract - Employer \$Employer liquidated \$/or N/A/Physician \$Physician liquidated \$/or N/A;
- Agreement to begin employment at the stated practice site within 90 days of receiving a waiver from the United States Citizenship and Immigration Services (USCIS). During the 90 days, the physician must obtain the required licenses from the Nevada State Board of Medical Examiners, the Drug Enforcement Agency, the State Board of Pharmacy, and any other licenses as may be required for the physician to practice medicine in Nevada; and
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Pahrump, Nevada 89048 Phone: 702-877-1887

HPSA: Yes ID: 1327512355 MUA/P: Yes ID: 07931

No. Of Hours:

South West-Southern Hills

Kidney Specialists Of Southern Nevada 9280 W Sunset Rd Suite 438

Las Vegas, Nevada 89148 Phone: 702-877-1887 Email: hlong@ksosn.com

HPSA: Yes MUA: No ID: 1327859798

No. Of Hours:

• Contact Person

Hailee Long

Chief Operating Officer Email: hlong@ksosn.com Office: 702-877-1887 Cellular: 801-509-8688

By signing below, I hereby attest that the above requirements have been met and I hereby agree to abide by all the program policies and rules as described in NRS and NAC and as further required under the Rights and Responsibilities located at the Divisions website at: http://dpbh.nv.gov/Programs/Conrad30/Conrad30-Home/.

| Authorized Employer: | | |
|----------------------------------------------------------------------------------|--------------------------|-------------|
| Employer Company/Business Name | | |
| Employer Representative Name (First/Last) | Title | |
| Employer Signature | Date | |
| NOTARY PUBLIC: State of: County of: Subscribed and Sworn before me on thisday of | , 20 | |
| Notary Signature My Commission Expires: | | |
| Candidate/Physician: Gravneet Sandhu | Physician | |
| Candidate Name (First/Last) | Physician Title 4/27/202 | 22_ |
| Candidate Signature | Date | |
| NOTARY PUBLIC: State of: | | |
| County of: Subscribed and Sworn before me on this | , 20 <u>21</u> | SON EVERTO |
| Notary Signature My Commission Expires: 07 St 202 C | | COLARY POST |



ATTESTATION

To,

Primary Care Office Nevada Division of Public & Behavioral Health

My name is Hailee Long and I am the Chief Operating Officer at . I attest that each practice accepts all patients regardless of ability to pay, accepts Medicaid, Nevada Check-Up and Medicare on assignment. Each site also uses a sliding-fee scale based on federal poverty guidelines to discount services to low-income uninsured persons.

The above statement is made under penalty to perjury and is true and correct to the best of my knowledge.

Thank you.

Hailee Long

Chief Operating Officer Email: hlong@ksosn.com Office: 702-877-1887 Cellular: 801-509-8688

Gavneet Singh Sandhu

EDUCATION MedStar Georgetown University Hospital, Washington DC July 2020 - Present Nephrology and Hypertension Fellowship Chief Fellow **Internal Medicine Board Certified** August 2020 June 2020 MedStar Health Internal Medicine Residency, Baltimore MD Jan 2017 Saba University School of Medicine, Dutch Caribbean Doctor of Medicine Dec 2013 Saba University School of Medicine, Dutch Caribbean Master of Science in Hyperbaric Medicine June 2012 University of Toronto, Toronto, Ontario Bachelor of Science in Life Science with Honors Human Biology and Biochemistry Major

RESEARCH

Quality Improvement project, Medstar Good Samaritan Hospital

2019

Nephrology Department with Dr. Jaar, Baltimore, MD

Project: Improve quality of ordering renal tests in Medstar Electronic Medical Record system

 Working with Nephrology Department Director, Dr. Jaar, and Laboratory Department Director, Dr. Larsen, to implement effective means of ordering useful kidney function tests under one label called "Kidney Profile"

Cardiac Arrhythmia Monitoring and related outcomes (CAMARO) in Dialysis Patients 2020

Department of Nephrology, Medstar Good Samaritan Hospital, Baltimore, MD Department of Epidemiology, Johns Hopkins School of Public Health, Baltimore, MD

 Goal is to identify dialysis patients with high risk of arrhythmias and using continuous cardiac monitoring to address appropriate modifiable factors to improve morbidity and mortality

PUBLICATION

Sandhu G.S., Choi M. Myeloma Kidney disease. Handbook of Nephrology and Hypertension. Currently under review for publication.

Farooqi R., Zahid U., Paudel A., Gaddam D.S. and Sandhu G.S. (February 11. 2019). Bilateral Renal Infarction Secondary to Hypertrophic Cardiomyopathy. Cureus 11(2). e4046.

Sandhu G.S., Jaar B. Aloor R. A rare case of progressive renal failure due to intraperitoneal exposure to elemental mercury. American Journal of Kidney Diseases, Volume 75, Issue 4, 629

ABSTRACT

Sandhu G.S., Hill A. (May 10th, 2021). Spontaneous TLS in Burkitt's Lymphoma with acute renal failure. Top 3 Clinical Vignettes at MedStar Health Research Symposium 2021.

Sandhu G.S., Shrestha R. (May 9th, 2019). Esophageal Intramural Pseudodiverticulosis, a rare cause of recurrent dysphagia. Top 9 Clinical Vignette presentations at ACP Maryland 2019.

EMPLOYMENT

Donnelly Centre for Cellular and Bimolecular Research

2009-2011

Dr. Sachdev Sidhu's Lab, Lab Assistant

Banting and Best Department of Medical Research, University of Toronto, ON

- Prepared agar based growth medium to promote antibiotic specific bacterial growth.
- Isolated bacterial colonies for further growth and DNA extraction.
- Collected data on novel DNA sequences isolated using PCR.

Dr. Sachdev Sidhu's Lab, Summer Internship

2009

Banting and Best Department of Medical Research, University of Toronto, ON Project: Mapping binding profiles of all known SH3 domains to understand it's role in regulation of cell growth and cycle.

• Performed site-directed mutagenesis to clone and express a signaling cascade protein in order to understand it's role in regulation of cell growth and cycle.

Toronto District School Board, Toronto, Ontario

2009-2010

Position: Tutor and Teacher's Assistant at Claireville Junior School

Provided literacy and numeracy support to elementary students

VOLUNTEER WORK

Baltimore Health Fair, Union Memorial Hospital, Baltimore, MD

2016

- Educated local community on different options available to help quit smoking.
- Provided free resources to acquire nicotine patches to begin transition towards becoming smoke free.

Community Health Advocate, Union Memorial Hospital, Baltimore, MD

2015

- Performed physical examinations on high school students and children with Intellectual disability for sports clearance
- Counseled high school students on healthy lifestyle, smoking cessation and preventative medicine

Saba Community Health Fair, Saba, Dutch Caribbean

2013

· Promoted healthy diet, smoking cessation and fitness to local communities of Saba

Teacher's Assistant, Saba University School of Medicine

May - Dec 2012

Anatomy and Physiology

- Reviewed renal physiology with fellow medical students
- Organized after class anatomy lab to review upper extremity and thorax structures with first semester students.

Humanity First, University of Toronto

2010-2011

President and Chief Financial Officer

• Organized fundraisers in form of food sales, movie and dance nights for natural disaster victims of Haiti and Japan.

Saturday Program at University of Toronto Faculty of Medicine

2009-2010

Mentored middle school students who required additional academic assistance.

Humber River Regional Hospital, Toronto, Ontario

2006-2011

- Shadowed Physicians at ER and Surgical day care
- Developed valuable patient care skills in communication, professionalism and health care advocacy

MEMBERSHIP

| American College of Physicians | 2014-Present |
|--------------------------------|--------------|
| Society of Hospital Medicine | 2014-Present |
| American Society of Nephrology | 2019-Present |

CERTIFICATIONS

| ACLS | Present - 2021 |
|------|----------------|
| BLS | Present - 2021 |

LANGUAGE

Fluent in English, Hindi and Punjabi.

HOBBIES/INTEREST

Painting, Photography, Hiking, Avid Table Tennis player

Time Period of report: 1/1/2021 to 12/31/2021 Location: Rancho

| | Total # of visits for 12 months | % of visits for 12 months |
|-------------------------|---------------------------------|---------------------------|
| Medicare Visits | 4196 | 34 |
| Medicaid Visits | 370 | 3 |
| NV Check-up | 0 | 0 |
| Sliding Fee Scale | 0 | 0 |
| Indigent/Charity | 246 | 1 |
| Other- Not Listed Above | 7530 | 62 |
| Totals | 12342 | 100 |

of MDs by FTE 13
of PAs by FTE 1
of APRN's by FTE 4

Time Period of report: 1/1/2021 to 12/31/2021 Location: North Las Vegas

| | Total # of visits for 12 months | % of visits for 12 months |
|-------------------------|---------------------------------|---------------------------|
| Medicare Visits | 243 | 30 |
| Medicaid Visits | 29 | 3 |
| NV Check-up | 0 | 0 |
| Sliding Fee Scale | 0 | 0 |
| Indigent/Charity | 6 | 1 |
| Other- Not Listed Above | 525 | 66 |
| Totals | 803 | 100 |

| # of MDs by FTE | 3 |
|--------------------|---|
| # of PAs by FTE | 0 |
| # of APRN's by FTE | 2 |

Time Period of report: 1/1/2021 to 12/31/2021 Location: Centennial Hills

| | Total # of visits for 12 months | % of visits for 12 months |
|-------------------------|---------------------------------|---------------------------|
| Medicare Visits | 876 | 38 |
| Medicaid Visits | 54 | 2.97 |
| NV Check-up | 0 | 0 |
| Sliding Fee Scale | 0 | 0 |
| Indigent/Charity | 7 | 0.03 |
| Other- Not Listed Above | 1381 | 59 |
| Totals | 2318 | 100 |

| # of MDs by FTE | 3 |
|--------------------|---|
| # of PAs by FTE | 0 |
| # of APRN's by FTE | 2 |

Time Period of report: 1/1/2021 to 12/31/2021 Location: Southern Hills

| | Total # of visits for 12 months | % of visits for 12 months |
|-------------------------|---------------------------------|---------------------------|
| Medicare Visits | 1198 | 32 |
| Medicaid Visits | 81 | 2.95 |
| NV Check-up | 0 | 0 |
| Sliding Fee Scale | 0 | 0 |
| Indigent/Charity | 17 | 0.05 |
| Other- Not Listed Above | 2421 | 65 |
| Totals | 3717 | 100 |

| # of MDs by FTE | 6.5 |
|--------------------|-----|
| # of PAs by FTE | 0 |
| # of APRN's by FTE | 2 |

Time Period of report: 1/1/2021 to 12/31/2021 Location: Pahrump

| | Total # of visits for 12 months | % of visits for 12 months |
|-------------------------|---------------------------------|---------------------------|
| Medicare Visits | 350 | 36.5 |
| Medicaid Visits | 71 | 7 |
| NV Check-up | 0 | 0 |
| Sliding Fee Scale | 0 | 0 |
| Indigent/Charity | 0 | 0 |
| Other- Not Listed Above | 543 | 56.5 |
| Totals | 964 | 100 |

| # of MDs by FTE | 3 |
|--------------------|---|
| # of PAs by FTE | 0 |
| # of APRN's by FTE | 3 |



April 26, 2022

Nevada Division Public Health and Behavior Health Primary Care Office

RE:

J-1 Physician Visa Waiver Recommendation Application

Applicant:

Dr. Gavneet Singh Sandhu

DOS Case Number: 1755344

Dear Sir / Madam:

Kidney Specialists of Southern Nevada (KSOSN) needs the services of a specialist in Nephrology due to the high need and low availability of a specialist in this area. We have 4 vacancies for this position.

Sincerely,

Hailee Long

Chief Operating Officer Email: hlong@ksosn.com Office: 702-877-1887

Cellular: 801-509-8688



April 26, 2022

Nevada Division Public Health and Behavior Health Primary Care Office

RE:

J-1 Physician Visa Waiver Recommendation Application

Applicant:

Dr. Gavneet Singh Sandhu

DOS Case Number: 1755344

Dear Sir / Madam:

This letter will serve to document that the travel distance to the next closest facility to receive care in the treatment of Nephrology related diseases is _____ miles.

Sincerely,

Hailee Long

Chief Operating Officer Email: hlong@ksosn.com Office: 702-877-1887

Cellular: 801-509-8688

Complete and check all applicable fields, corresponding boxes and enter all required information: Candidate's Information: Candidate's Full Name: Sahityan Viswanathan Residency Discipline: Internal Medicine Residency Residency Timeframe: July 2017 to June 2020 Location of Residency: Medical City Forth Worth, Texas Fellowship(s)/Specialty: Nephrology Fellowship Fellowship(s) Timeframe1: July 2020 to June 2022 Location of Fellowship(s)1: UT Southwestern Medical Center, Texas Employer's Information: Employer's Full Name: Nevada Kidney Disease & Hypertension Centers Employer's Address: 2545 S. Bruce Street, Suite 200, Las Vegas, Nevada 89169 Practice Site #1: Nevada Kidney Disease & Hypertension Centers Practice Site #1 Address: 2545 S. Bruce Street, Suite 200, Las Vegas, NV 89169 Number of Hours Candidate will practice at site to meet 40 hours per week: will vary Select and input all that apply: Practice Site #1 HPSA (#1328484648) Practice Site #1 MUA (#MUA#) Flex spot Federally Qualified Health Center (FQHC) Tribal Health Center Rural Health Clinic (RHC) Primary Care Clinic for a Rural Hospital Practice Site #2*: Sunrise Hospital & Medical Center Practice Site #2 Address: 3186 S. Maryland Parkway, Las Vegas, Nevada 89109 Number of Hours Candidate will practice at site to meet 40 hours per week: will vary Select all that apply: Practice Site #2 HPSA (#1328484648) Practice Site #2 MUA (#MUA#) Flex spot Federally Qualified Health Center (FQHC) Tribal Health Center Rural Health Clinic (RHC) Primary Care Clinic for a Rural Hospital Yes No More than two additional practice sites: *If additional practice sites, please copy and add all additional practice locations here or at end of form* Official Legal Representative and Contact Person for Application: Contact Name: Elissa Taub

Contact Mailing Address:

1028 Oakhaven Road Memphis, TN 38119

Contact e-mail:

etaub@visalaw.com

Contact telephone:

901-682-6455

Official Contact Person for Employment Verification and Site Information:

Contact Name:

Emily Campbell

Contact Mailing Address:

2545 S Bruce Street, Suite 200, Las Vegas, Nevada, 89169

Contact e-mail:

ecampbell@nkdhc.com

Contact telephone:

702-732-2438

Employer and Candidate, as identified above, seek a letter of support from the Physician Visa Walver Program and requests the Division of Public and Behavioral Health to forward the J-1 Visa Waiver application to the U.S. Department of State as a State Health Agency request, per DS-3035. Employer and Candidate have agreed to comply with the duties set forth in Chapter 439A of the Nevada Revised Statutes (NRS) and Nevada Administrative Code (NAC) and to cooperate with the Physician Visa Waiver Program.

Employer and Candidates have provided all necessary information for review of this application by the Primary Care Council Including the following:

- Copy of the contract between the Employer and Candidate;
- ⊠ Copy of the Candidate curriculum vitae and passport pages;
- □ Letter from Employer: description of the Candidate's qualifications, responsibilities and how this employment will satisfy important unmet health care needs within the designated area;
- Summation tables identifying the breakdown of patient visits billed by payment category;
- Documentation of employer recrultment efforts for US citizens for two months prior to submission of the application, UNLESS the requirement was waived for a rural employer with emergent needs;
- □ Long-range retention plans which include the following: CME benefit, competitive salary and paid time
- Copy of letter from the Nevada State Board of Medical Examiners (NSBME) acknowledging Candidate's application for medical licensure;
- ☑ INS Form G-28 OR letter from a law office if the candidate has an attorney OR a statement that the applicant does not have an attorney;
- □ Copies of all DS-2019's "Certificate of Eligibility for Exchange Visitor (J-1 Visa Waiver) Status" (INS) form(s) 1-94 for the candidate and any family members; proof of passage of examinations required by Bureau of Criminal Investigation (BCI); transcripts for all 3 sections of United States Medical Licensing Examinations (USMLE); and certification from Educational Commission for Foreign Medical Graduates (ECFMG).

In signing below, an authorized representative of the Employer and the Candidate declares under penalty of perjury that all statements submitted with this application are true and accurate and this application complles with the requirements of NRS 439A.175 and NAC 439.730 including as follows:

All practices sites where the Candidate will practice:

- Are located in a federally designated Primary Care HPSA, MUA/P or a site approved by the state as a geographic exception or a flex slot (Public Law 108-441) to address the underserved;
- Accept Medicare, Medicaid assignment and Nevada Checkup;

Offer a sliding discount fee schedule and a minimum fee based on family size & income; and

Has a policy stating all patients will receive treatment, regardless of their ability to pay which is either posted at the site or provided to the patients.

The contract between the Employer and the Candidate provides the following (verify and enter missing data):

- (Candidate agrees to provide services during 3 -year waiver obligation;
- ☐ Candidate will provide services 40 hours per week minimum plus on-call time;
- The salary meets or exceeds the prevailing wage for that area and for physicians of that specialty as reported by the Foreign Labor Certification Center, Department of Labor, (http://www.flcdatacenter.com): Prevailing wage (FLC Median wage for Discipline type: \$FLC Mean Wage/ Contracted wage \$Contracted Base Wage only base pay
- The amount of time off for vacation, sick leave and for Continuing Medical Education is included. The employer shall maintain records to show the amount of time-off requested and the amount of time taken.
- Does not contain a "non-compete" clause that would prohibit the J-1 Visa Waiver physician from opening a new clinic or working in a clinic in that shortage area upon completing the three-year commitment;
- Conditions for termination of the contract, for both the physician and employer, are included. A "no-cause" termination is not allowed;
- Liquidated damages (suggested to be under \$50,000) in the event that the physician or employer terminates the contract before three years is included in the contract Employer \$Employer liquidated \$/or N/A/Physician \$Physician liquidated \$/or N/A;
- Agreement to begin employment at the stated practice site within 90 days of receiving a waiver from the United States Citizenship and Immigration Services (USCIS). During the 90 days, the physician must obtain the required licenses from the Nevada State Board of Medical Examiners, the Drug Enforcement Agency, the State Board of Pharmacy, and any other licenses as may be required for the physician to practice medicine in Nevada; and
- A statement that the physician agrees to meet the requirements set forth in section 214(I) of the immigration and Nationality Act.

Please note in accordance with NRS Chapter 239, all public records, the contents not otherwise declared by law to be confidential, shall be open for inspection or to obtain copies.

By signing below, I hereby attest that the above requirements have been met and I hereby agree to abide by all the program policies and rules as described in NRS and NAC and as further required under the Rights and Responsibilities located at the Divisions website at: http://dpbh.nv.gov/Programs/Conrad30/Conrad30-Home/.

| Authorized Employer: | |
|----------------------------------------------------------|---------------------------------------------------------|
| Nevadle Kickney Disease + Employer Company/Business Name | Lypertension Centers |
| | • |
| Emily Campbell | Fractice Manag |
| Employer Representative Name (First/Last) | Title |
| | 4/10/2027 |
| Employer Signature | Date 111122 |
| NOTARY PUBLIC: | |
| State of: Nevada | |
| County of: Clark | |
| Subscribed and Sworn before me on this 19 day of 10 | 2022 |
| 9 | 13. 4.5 |
| syrda leater | |
| Notary Signature | LYNDA TEATOR |
| My Commission Expires: May 4, 2023 | NOTARY PUBLIC STATE OF NEVADA APPT, NO. 15-1530-1 |
| Candidate/Physician: | MY APPT. EXPIRES MAY 04, 2023 |
| SAHITYAN / VISHANATHAN | DR |
| Candidate Name (First/Last) | Title |
| Soltjel | 04/16/2022 |
| Candidate Signature | Date |
| NOTARY PUBLIC: | , |
| State of: Tokas | t e t |
| County of: Trans. | |
| Subscribed and Sworn before me on this 16 4 day of April | 1,2022 |
| Turner ander | |
| Notary Signature | SHERRY SANDERS |
| My Commission Expires: 25/30/2024 | Comm. Expires 05-30-2024 |
| | Notary ID 126538353 |



Nevada Kidney Disease & Hypertension Centers

March 30, 2022

NKDHC 2545 S. Bruce St Suite 200 Las Vegas, NV 89169

Re: Sahityan Viswanathan

Dear Sir or Madam:

I am writing on behalf of Nevada Kidney Disease and Hypertension Centers to request that the Nevada Division of Public and Behavioral Health act as the interested government agency and recommend a J-l waiver for Sahityan Viswanathan M.D., NKDHC intends to hire Sahityan Viswanathan M.D. He will split his time between clinic and hospital coverage eight hours per day for a total of forty hours per week, to provide care at the following facilities:

NKDHC

Contact Person Name and Title: Benjamin Rudnitsky, President Mailing Address: 2545 S. Bruce St. Suite 200 Las Vegas, NV 89169 Physical Address: 2545 S. Bruce St. Suite 200 Las Vegas, NV 89169

HPSA Number: 1328484648 Telephone Number: 702-732-2438

Fax Number: 702-737-5043

Email Address of facility contact person: brudnitsky@nkdhc.com

Sunrise Hospital & Medical Center

Contact Person Name and Title: Benjamin Rudnitsky, President Mailing Address: 2545 S Bruce St. Suite 200 Las Vegas, NV 89169 Physical Address: 3186 S. Maryland Pkwy Las Vegas, NV 89109

HPSA Number: 1328484648 Telephone Number: 702-732-2438

Fax Number: 702-737-5043

Email Address of facility contact person: brudnitsky@nkdhc.com



Nevada Kidney Disease & Hypertension Centers

University Medical Center of Southern Nevada

Contact Person Name and Title: Benjamin Rudnitsky, President Mailing Address: 2545 S. Bruce St. Suite 200 Las Vegas, NV 89169 Physical Address: 1800 W. Charleston Blvd Las Vegas, NV 89102

HPSA Number: 1324490048 MUA/P Number: 6158

Telephone Number: 702-732-2438

Fax Number: 702-737-5043

Email Address of facility contact person: brudnitsky@nkdhc.com

Kindred Healthcare

Contact Person Name and Title: Benjamin Rudnitsky, President Mailing Address: 2545 S. Bruce St. Suite 200 Las Vegas, NV 89169 Physical Address: 510 W. Sahara Ave. Las Vegas, NV 89146

HPSA Number: 1328484648 Telephone Number: 702-732-2438

Fax Number: 702-737-5043

Email Address of facility contact person: brudnitsky@nkdhc.com

Valley Hospital

Contact Person Name and Title: Benjamin Rudnitsky, President Mailing Address: 2545 S. Bruce St. 200 Las Vegas, NV 89169 Physical Address: 620 Shadow Lane Las Vegas, NV 89106

HPSA Number: 1324490048

MUA/P Number: 6158

Telephone Number: 702-732-2438

Fax Number: 702-737-5043

Email Address of facility contact person: brudnitsky@nkdhc.com

Our facilities are in areas which have been designated as having shortages of health professionals and which are populated with primarily low-Income residents. Due to the physician shortage and difficulty in recruiting physicians to our area, the addition of Sahityan Viswanathan M.D. will give the citizens of our area-increased access to Nephrology for medical care. Sahityan Viswanathan M.D. has completed a three (3) year residency in Internal medicine at Medical City Fort Worth in Fort Worth, Texas. As an employee of NKDHC, he will be responsible for caring for patients who otherwise do not have a physician to oversee their care.



Nevada Kidney Disease & Hypertension Centers

Dr. Viswanathan's qualifications are suited for the needs of the facilities. In 2014, Dr. Viswanathan earned his medical degree from SRM Medical College Hospital and Research Centre Jordan University of science and technology in Chennai, Tamil Nadu, India. In 2020, Dr. Viswanathan completed a residency in Internal medicine at Medical City Fort Worth in Fort Worth, Texas. Dr. Viswanathan has received ECFMG and ABIM certification. Dr. Viswanathan meets all requirements of employment with NKDHC.

We believe the recruitment of Dr. Sahityan Viswanathan M.D. will be another big step towards improving the standards of patient care in Clark Counties. We look forward to having

Sincerely,

Benjamin Rudnitsky, President

NKDHC

| Service Locations | Total # of visits for 2021 | % of visits for 2021 |
|------------------------------------------------|----------------------------|----------------------|
| AMG Specialty Hospital | 240 | |
| Medicaid | 1 | 0% |
| Medicare | 217 | 90% |
| Other | 22 | 9% |
| Centennial Hills Hospital | 8890 | |
| Medicaid | 823 | 9% |
| Medicare | 5868 | . 66% |
| Other | 1605 | 18% |
| Sliding Fee Scale | 583 | 7% |
| Indigent/Charity | 11 | 0% |
| Centennial Hills Hospital, ER | 1 | |
| Medicare | 1 | 100% |
| Central Office | 5931 | |
| Medicaid | 731 | 12% |
| Medicare | 3895 | 66% |
| Other | 1176 | 20% |
| Sliding Fee Scale | 129 | 2% |
| Davita Cheyenne HD | 63 | |
| Medicaid | 1 | |
| Medicare | 62 | 98% |
| Desert Springs Hosp ER | 17 | |
| Medicaid | 4 | 24% |
| Medicare | 10 | 59% |
| Other | 2 | 12% |
| Sliding Fee Scale | 1 | 6% |
| Desert Springs Hospital | 5132 | |
| Medicaid | 854 | 17% |
| Medicare | 3283 | 64% |
| Other | 694 | 14% |
| Sliding Fee Scale | 301 | 6% |
| Dignity Health Rehabilitation | 746 | |
| Medicaid | 166 | . 22% |
| Medicare | 505 | 68% |
| Other | 49 | 7% |
| Sliding Fee Scale | 26 | 3% |
| OSI Las Vegas | 111 | 2004 |
| Medicaid | 32 | 29% |
| Medicare | 64 | 58% |
| Other | 15 | 14% |
| Encompass Health Desert Canyon Medicaid | 343 | 450 |
| Medicara | 51 | 15% |
| Medicare Other | 244 | 71% |
| +1.001100000000000000000000000000000000 | 27 | 8% |
| Sliding Fee Scale ncompass Health Henderson | 21 505 | 6% |
| Medicaid | 45 | 9% |
| ivicultatu | 45 | 9% |

| Medicare | 356 | 70% |
|------------------------------------|------------|-----------|
| Other | 59 | 12% |
| Sliding Fee Scale | 45 | 9% |
| Encompass Health Valley View Rehab | 529 | |
| Medicaid | 108 | 20% |
| Medicare | 342 | 65% |
| Other | 37 | 7% |
| Sliding Fee Scale | 42 | 8% |
| FKC Union Village | 579 | |
| Medicaid | 87 | 15% |
| Medicare | 368 | 64% |
| Other | 94 | 16% |
| Sliding Fee Scale | 30 | 5% |
| FKC Warm Springs Medicaid | 800 | 3% |
| Medicare | 544 | 68% |
| Other | 203 | 25% |
| Sliding Fee Scale | 29 | 4% |
| FMC Centennial Hills | 1912 | |
| Medicaid | 167 | 9% |
| Medicare | 1343 | 70% |
| Other | 290 | 15% |
| Sliding Fee Scale | 112 | 6% |
| FMC Desert Inn (FMC Las Vegas) | 3326 | |
| Medicaid | 502 | 15% |
| Medicare | 2012 | 60% |
| Other | 474 | 14% |
| Sliding Fee Scale | 338 | 10% |
| FMC Fire Mesa | 2153 | |
| Medicaid | 266 | 12% |
| Medicare | 1464 | 68% |
| Other | 354 | 16% |
| Sliding Fee Scale | 69 | 3% |
| FMC Fire Mesa PD | 727 | 000 |
| Medicaid | 63 | 9% 62% |
| Medicare Other | 451 191 | 26% |
| Sliding Fee Scale | 22 | 3% |
| FMC Green Valley | 3313 | |
| Medicaid | 351 | 11% |
| Medicare | 2307 | 70% |
| Other | 446 | 13% |
| Sliding Fee Scale | 209 | 6% |
| FMC Lake Mead North | 2142 | A la |
| Medicaid | 473 | 22% |
| Medicare | 1080 | 50% |
| Other | 179 | 8% |

| Sliding Fee Scale | 410 | 19% |
|------------------------|-------------|------------|
| FMC Las Vegas | 5 | |
| Medicare | 5 | |
| FMC Northeast HD | 1919 | |
| Medicaid | 266 | 14% |
| Medicare | 1294 | 67% |
| Other | 186 | 10% |
| Sliding Fee Scale | 173 | 9% |
| FMC Northwest | 1189 | |
| Medicaid | 90 | 8% |
| Medicare | 900 | 76% |
| Other | 111 | 9% |
| Sliding Fee Scale | 88 | 7% |
| FMC Oasis HD | 2320 | 500 |
| Medicaid | 129 | 6% |
| Medicare Other | 1640 411 | 71% 18% |
| Sliding Fee Scale | 140 | 6% |
| FMC South Rainbow | 2483 | 340 7.3 |
| Medicaid | 196 | 8% |
| Medicare | 1650 | 66% |
| Other | 463 | 19% |
| Sliding Fee Scale | 174 | 7% |
| FMC Spring Valley HD | 1487 | |
| Medicaid | . 89 | 6% |
| Medicare | 1091 | 73% |
| Other | 210 | 14% |
| Sliding Fee Scale | 97 | 7% |
| FMC West Sahara | 1194 | |
| Medicaid | 75 | 6% |
| Medicare | 801 | 67% |
| Other | 178 | 15% |
| Sliding Fee Scale | 140 | 12% |
| Harmon Medical & Rehab | 968 | |
| Medicaid | 745 | 77% |
| Medicare | 51 | 5% |
| Other | 125 | 13% |
| Sliding Fee Scale | 47 | 5% |
| Harmon SNF Medicaid | 35 | 74% |
| Medicare | 3 | 9% |
| Other | 3 | 9% |
| Sliding Fee Scale | 3 | 9% |
| Henderson Hospital | 10125 | 370 |
| Medicaid | 2106 | 21% |
| Medicare | 5432 | 54% |
| Other | 1723 | 17% |

| Sliding Fee Scale | 853 | 8% |
|----------------------------|-------|----------------------|
| Indigent/Charity | 11 | 0% |
| Henderson Hospital ER | 4 | |
| Medicaid | 1 | 25% |
| Medicare | 2 | 50% |
| Other | 1 | 25% |
| Henderson Satellite Office | 1474 | |
| Medicaid | 142 | 10% |
| Medicare | 888 | 60% |
| Other | 437 | 30% |
| Sliding Fee Scale | 7 | 0% |
| Horizon Henderson | 2626 | 100% |
| Medicaid | 550 | 21% |
| Medicare | 1773 | 68% |
| Other | . 225 | 9% |
| Sliding Fee Scale | 78 | 3% |
| Horizon Specialty Hospital | 639 | |
| Medicaid | 101 | 16% |
| Medicare | 416 | 65% |
| Other | 96 | 15% |
| Sliding Fee Scale | 26 | 4% |
| Kindred Hospital East SNF | 614 | |
| Medicaid | 192 | 31% |
| Medicare | 289 | 47% |
| Other | 104 | 17% |
| Sliding Fee Scale | 29 | 5% |
| Kindred Hospital-East | 2578 | |
| Medicaid | 1075 | 42% |
| Medicare | 1279 | 50% |
| Other | 213 | 8% |
| Sliding Fee Scale | 11 | 0% |
| Kindred Hospital-West | 1766 | |
| Medicaid | 204 | 12% |
| Medicare | 1319 | 75% |
| Other | 231 | 13% |
| Sliding Fee Scale | 12 | 1% |
| Marquis SNF | 1 | |
| Medicare | 1 | 100% |
| Mountain View Hospital | 7560 | |
| Medicaid | 1181 | 16% |
| Medicare | 4911 | 65% |
| Other | 1135 | 15% |
| Sliding Fee Scale | 333 | 4% |
| North Vista Hospital | 1666 | TATE OF THE STATE OF |
| Medicaid | 301 | 18% |
| Medicare | 865 | 52% |
| Other | 342 | 21% |

| Sliding Fee Scale | 158 | 9% |
|-------------------------------------|-------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Northeast Office | 4318 | |
| Medicaid | 546 | 13% |
| Medicare | 2685 | 62% |
| Other | 988 | 23% |
| Sliding Fee Scale | 99 | 2% |
| Northwest Office | 9882 | |
| Medicaid | 681 | 7% |
| Medicare | 6645 | 67% |
| Other | 2460 | 25% |
| Sliding Fee Scale | 96 | 1% |
| PAM REHAB | 574 | |
| Medicaid | 14 | 2% |
| Medicare | . 492 | 86% |
| Other • | . 26 | 5% |
| Sliding Fee Scale | 42 | 7% |
| PAM Specialty Hospital of Las Vegas | 1485 | A STATE OF THE PARTY OF THE PAR |
| Medicaid | 49 | 3% |
| Medicare | 1039 | 70% |
| Other | 269 | 18% |
| Sliding Fee Scale | 128 | 9% |
| Sandstone Spring Valley | 1168 | Land and contributed with a sale was patient and a form to come |
| Medicaid | 490 | 42% |
| Medicare | 310 | 27% |
| Other | 322 | 28% |
| Sliding Fee Scale | 46 | 4% |
| Southeast Office | 5194 | 1.70 |
| Medicaid | 349 | 7% |
| Medicare | 3431 | 66% |
| Other | 1358 | 26% |
| Sliding Fee Scale | 48 | 1% |
| Indigent/Charity | 8 | 0% |
| Southern Hills Hospital | 5718 | |
| Medicaid | 805 | 14% |
| Medicare | 3816 | 67% |
| Other | 867 | 15% |
| Sliding Fee Scale | 230 | 4% |
| Southern Hills Hospital ER | 6 | |
| Medicaid | 2 | 33% |
| Medicare | 4 | 67% |
| Southwest Office | 4444 | |
| Medicaid | 373 | 8% |
| Medicare | 2850 | 64% |
| Other | 1189 | 27% |
| Sliding Fee Scale | 25 | 1% |
| Indigent/Charity | 7 | 0% |
| Spanish Hills Wellness Suites | 2 | () () () () () () () () () () |

| Medicaid | 1 | 50% |
|-----------------------------------|----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Medicare | 1 | 50% |
| Spring Valley Hospital | 19148 | |
| Medicaid | 3226 | 17% |
| Medicare | 10421 | 54% |
| Other | 3145 | 16% |
| Sliding Fee Scale | 2356 | |
| Spring Valley Hospital, ER | 3 | PORTER TO SELECT MINERAL MANAGEMENT AND |
| Medicaid | 1 | 33% |
| Medicare | 1 | 33% |
| Sliding Fee Scale | 1 | 33% |
| St Joseph Trans Rehab Ctr | 490 | |
| Medicaid | 22 | 4% |
| Medicare | 445 | 91% |
| Sliding Fee Scale | 23 | 5% |
| St Rose - San Martin Hospital, ER | 8 | |
| Medicaid | 2 | 25% |
| Medicare | 4 | 50% |
| Other | . 2 | 25% |
| St Rose - San Martin Hospital, IP | 5335 | |
| Medicaid | 788 | 15% |
| Medicare | 3183 | 60% |
| Other | 993 | 19% |
| Sliding Fee Scale | 371 | 7% |
| St Rose Siena Campus | 10660 | |
| Medicaid | 572 | -5% |
| Medicare | 7524 | 71% |
| Other | . 1714 | 16% |
| Sliding Fee Scale | 848 | 8% |
| Indigent/Charity | 2 | 0% |
| St Rose Siena Campus, ER | 142 | |
| Medicaid | 5 | 4% |
| Medicare | 96 | 68% |
| Other | 36 | 25% |
| Sliding Fee Scale | 5 | 4% |
| St. Rose Delima Hospital | 71 | |
| Medicaid | 15 | 21% |
| Medicare | 31 | 44% |
| Other | 3 | 4% |
| Sliding Fee Scale | 22 | 31% |
| Summerlin Hospital | 24 | |
| Summer me nospital | 5990 | |
| Medicaid | | 16% |
| | 5990 | 16% 68% |
| Medicaid | 5990 961 | granded to the state of the sta |
| Medicaid Medicare | 5990 961 4068 | 68% |
| Medicaid Medicare Other | 5990 961 4068 745 | 68% 12% |

| 13645 | 54% |
|----------------------------|------------------------------------------------------------------------------------------------------------------------------------|
| 2411 | 9% |
| 3726 | 15% |
| 25 | 0% |
| 2 | |
| 1 | 50% |
| 1 | 50% |
| 3926 | |
| 934 | 24% |
| 2195 | 56% |
| 537 | 14% |
| 260 | 7% |
| 185 | |
| 37 | 20% |
| 140 | 76% |
| 8 | 4% |
| 5934 | |
| 1500 | 25% |
| 3446 | 58% |
| 824 | 14% |
| 164 | 3% |
| ndigent/charity encounters | |
| g fee schedule encounters | |
| isted as other | |
| | 2411 3726 25 2 1 1 1 3926 934 2195 537 260 185 37 140 8 5934 1500 3446 824 164 digent/charity encounters g fee schedule encounters |

Tab C - Candidate Information

1) Full Name: Sahityan Viswanathan

2)

3)

4)

5)

- 6) Describe residency training: Internal Medicine training at Medical City Forth Worth in Fort Worth, Texas and nephrology fellowship at UT Southwestern Medical Center in Dallas, Texas
- 7) Describe the candidate's qualifications: ECFMG and ABIM certified, published journal articles

Sahityan Viswanathan, MD



TRAINING

UT SOUTHWESTERN MEDICAL CENTER

Dallas, TX MD Nephrology Fellowship *(July 2020 - Present)*

MEDICAL CITY FORT WORTH

Fort Worth, TX MD Internal Medicine Residency (July 2017- Jun 2020)

SRM MEDICAL COLLEGE HOSPITAL AND RESEARCH CENTRE

Chennai, Tamil Nadu, India M.B.B.S (2014)

CERTIFICATIONS

2020 ABIM Internal Medicine 2016 ECFMG

LEADERSHIP

2019 Chief Resident of Internal Medicine Residency in Medical City Fort Worth

ADDITIONAL SKILLS

Well versed in EMRs : EPIC, Meditech, Eclinical works, CPRS

HOBBIES

Playing cricket, indoor soccer, Traveling

CLINICAL & RESEARCH EXPERIENCE

Research Co-ordinator for BARD PV in the following studies (Aug2016 - Jan 201

- AVeNEW Prospective, Multi-Center, Randomized, Concurrently Controlled Clinical Study of the BARD COVERA Arteriovenous(AV) Stent Graft in the treatment of Stenosis in the Venous Outflow of AV Fistula Access Circuits
- AVeVA Prospective, Multi-Center Clinical Study of the COVERA Arteriovenous Stent Graft in the treatment of Stenosis at the Graft-Veir Anastomosis of AV Graft Circuits

PUBLICATIONS/POSTER PRESENTATIONS

Peer Reviewed Journal Articles/Abstracts

Panjwani, Remina; Viswanathan, Sahityan. *Correlation between qSOFA, SOFA, APACHE II and number of ventilator days*. Critical Care Medicine. 2019, Jan; 47(£, 801. Pub Status: Published.

Swaminathan, Anandhalakshmi, Viswanathan, Sahityan. Perceived stress and sources of stress among first-year medical undergraduate students in a private medical college – Tamil Nadu. National Journal of Physiology, Pharmacy and Pharmacology. 2015, Sep; 6(1): 9-14. Pub Status: Published.

Poster Presentation

Viswanathan, Sahityan., Reddy, Prashanth., Veerappan Ganesan, Roshni., Balamuthusamy, Saravanan. Mortality in patients with Sepsis and non-sepsis Akrequiring CRRT: Retrospective single Center experience. Poster presented at Annual Conference of ASN Kidney Week in November 2019

Viswanathan, Sahityan., Capati, Jeffrey., Hoang, Long.T. *Gastroenterology, a guiding light in Hemophagocytic Lymphohistiocytosis.* Poster presented at Annu Conference of ACG(American College of Gastroenterology) in October 2019

Viswanathan, Sahityan., Dobin, Timothy., Hoang, Long.T. Size Matters: A Case of Recurrent Proximal Esophageal Stenosis Treated with a Biliary Self Expanding Metal Stent (SEMS). Poster presented at Annual Conference of ACG(American College of Gastroenterology) in October 2019

Subramanian, Anand., Dobin, Timothy., Viswanathan, Sahityan., Reddy, Prashanth., Aftabizadeh, Som., Balamuthusamy, Saravanan.. (November, 2018) Daily labs ordered by residents - How much impact does it have on clinical management?. Poster presented at: ACP - Texas Chapter; Austin, TX, USA.

Aftabizadeh, Som., Reddy, Prashanth. & Viswanathan, Sahityan.. (October, 2018 Neuroleptic Malignant Syndrome caused by Cyclobenzaprine. Poster presented Annual Conference of American College of Osteopathic Internists; Orlando, FL, USA.

Viswanathan, Sahityan., Jispescu, Daniel., Boehme, Matthew.. (October, 2018). rare case of Prinzmetal Angina in a non-verbal young male with multiple scleros Poster presented at Annual Conference of American College of Osteopathic Internists; Orlando, FL, USA

Nevada Conrad 30 J-1 Physician Visa Waiver Program Lee

Application Attestation

| Complete and check all appli | cable fields, corresponding boxes and enter all required information: |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|
| Candidate's Information: Candidate's Full Name: | Yee Liong Lee |
| Residency Discipline: Residency Timeframe: Location of Residency: | Internal Medicine Residency July 1, 2017 to June 30, 2020 John H. Stroger Hospital of Cook County, Chicago, Illinois |
| Fellowship(s)/Specialty: Fellowship(s) Timeframe1: Location of Fellowship(s)1: | Endocrinology, Diabetes and Metabolism Fellowship July 1, 2020 to June 30, 2022 University of Minnesota, Minneapolis, Minnesota |
| Employer's Information: Employer's Full Name: Employer's Address: | Carson Tahoe Physician Clinics 1600 Medical Parkway, Carson City, NV 89703 |
| Practice Site #1: Practice Site #1 Address: Number of Hours Candidate Select and input all that appl Practice Site #1 HPSA (#2) Federally Qualified Healt Rural Health Clinic (RHC) | 1328726421) Practice Site #1 MUA (#MUA#) Flex spot th Center (FQHC) Tribal Health Center |
| Practice Site #2*: Practice Site #2 Address: Number of Hours Candidate Select all that apply: Practice Site #2 HPSA (#6 Federally Qualified Healt Rural Health Clinic (RHC) | th Center (FQHC) Tribal Health Center |
| More than two additional pr | actice sites: Yes No please copy and add all additional practice locations here or at end of form* |
| Official Legal Representative Contact Name: Contact Mailing Address: Contact e-mail: Contact telephone: | Geoffrey Leibl 12250 El Camino Real, Suite 350 San Diego, CA 92130 leibl@usimmigrationlaw.net 858-481-5211 |

Nevada Conrad 30 J-1 Physician Visa Waiver Program Application Attestation

Official Contact Person for Employment Verification and Site Information:

Contact Name: Shay Dusek

Contact Mailing Address: 2874 N Carson St #300 Carson City NV, 89706

Contact e-mail: shay.dusek@carsontahoe.org

Contact telephone: 775-445-8774

Employer and Candidate, as identified above, seek a letter of support from the Physician Visa Waiver Program and requests the Division of Public and Behavioral Health to forward the J-1 Visa Waiver application to the U.S. Department of State as a State Health Agency request, per DS-3035. Employer and Candidate have agreed to comply with the duties set forth in Chapter 439A of the Nevada Revised Statutes (NRS) and Nevada Administrative Code (NAC) and to cooperate with the Physician Visa Waiver Program.

Employer and Candidates have provided all necessary information for review of this application by the Primary Care Council including the following:

- Letter from Employer: description of the Candidate's qualifications, responsibilities and how this employment will satisfy important unmet health care needs within the designated area;
- ☑ Summation tables identifying the breakdown of patient visits billed by payment category;
- Documentation of employer recruitment efforts for US citizens for two months prior to submission of the application, UNLESS the requirement was waived for a rural employer with emergent needs;
- Long-range retention plans which include the following: CME benefit, competitive salary and paid time off.
- □ Copy of letter from the Nevada State Board of Medical Examiners (NSBME) acknowledging Candidate's application for medical licensure;
- ☑ INS Form *G-28* OR letter from a law office if the candidate has an attorney OR a statement that the applicant does not have an attorney;
- □ Copies of all DS-2019's "Certificate of Eligibility for Exchange Visitor (J-1 Visa Waiver) Status" (INS form(s) I-94 for the candidate and any family members; proof of passage of examinations required by Bureau of Criminal Investigation (BCI); transcripts for all 3 sections of United States Medical Licensing Examinations (USMLE); and certification from Educational Commission for Foreign Medical Graduates (ECFMG).

In signing below, an authorized representative of the Employer and the Candidate declares under penalty of perjury that all statements submitted with this application are true and accurate and this application complies with the requirements of NRS 439A.175 and NAC 439.730 including as follows:

All practices sites where the Candidate will practice:

Are located in a federally designated Primary Care HPSA, MUA/P or a site approved by the state as a geographic exception or a flex slot (Public Law 108-441) to address the underserved;

Nevada Conrad 30 J-1 Physician Visa Waiver Program Lee Application Attestation

| and the same of th | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | |
| \boxtimes | Accept Medicare, Medicaid assignment and Nevada Checkup; |
| \boxtimes | Offer a sliding discount fee schedule and a minimum fee based on family size & income; and |
| | Has a policy stating all patients will receive treatment, regardless of their ability to pay which is either posted at the site or provided to the patients. |
| | entract between the Employer and the Candidate provides the following (verify and enter missing |
| data): | |
| \boxtimes | Candidate agrees to provide services during 3 -year waiver obligation; |
| \boxtimes | Candidate will provide services 40 hours per week minimum plus on-call time; |

- ☑ The salary meets or exceeds the prevailing wage for that area and for physicians of that specialty as reported by the Foreign Labor Certification Center, Department of Labor, (http://www.flcdatacenter.com): Prevailing wage (FLC Median wage for Endocrinologist: \$82,950 per year/ Contracted wage \$240,000.00 per year base pay
- ☑ The amount of time off for vacation, sick leave and for Continuing Medical Education is included. The employer shall maintain records to show the amount of time-off requested and the amount of time taken.
- ☑ Does not contain a "non-compete" clause that would prohibit the J-1 Visa Waiver physician from opening a new clinic or working in a clinic in that shortage area upon completing the three-year commitment;
- Conditions for termination of the contract, for both the physician and employer, are included. A "no-cause" termination is not allowed;
- ☐ Liquidated damages (suggested to be under \$50,000) in the event that the physician or employer terminates the contract before three years is included in the contract Employer \$Employer liquidated \$/or N/A/Physician \$Physician liquidated \$/or N/A;
- Agreement to begin employment at the stated practice site within 90 days of receiving a waiver from the United States Citizenship and Immigration Services (USCIS). During the 90 days, the physician must obtain the required licenses from the Nevada State Board of Medical Examiners, the Drug Enforcement Agency, the State Board of Pharmacy, and any other licenses as may be required for the physician to practice medicine in Nevada; and
- A statement that the physician agrees to meet the requirements set forth in section 214(I) of the Immigration and Nationality Act.

Please note in accordance with NRS Chapter 239, all public records, the contents not otherwise declared by law to be confidential, shall be open for inspection or to obtain copies.

Nevada Conrad 30 J-1 Physician Visa Waiver Program Application Attestation

By signing below, I hereby attest that the above requirements have been met and I hereby agree to abide by all the program policies and rules as described in NRS and NAC and as further required under the Rights and Responsibilities located at the Divisions website at: http://dpbh.nv.gov/Programs/Conrad30/Conrad30-Home/.

| Authorized Employer. | |
|--------------------------------------------------------------|----------------------------------------------------------------|
| Carson Tance Physician Clinics | |
| Employer Company/Business Name | 3 |
| Electronic Discov | A100147070 |
| Stephen Shay Dusek Employer Representative Name (First/Last) | Admistrator |
| Employer Representative Name (First/Last) | Title |
| Sall | 5-10-2022 |
| Employer Signature | Date |
| | |
| NOTARY PUBLIC: State of: Nevada | |
| County of: Carson City | |
| Subscribed and Sugar before me on this 10 th day of 1000 | 20 /2 /2 |
| Subscribed and Sworn before me on this 10 th day of May | , 20 d d |
| (Let) Treet | CHRISTINE ANN FOOTE |
| Notary Signature | NOTARY PUBLIC STATE OF NEVADA |
| My Commission Expires: 2/22/2023 | My Commission Expiree 02-22-2023 Certificate No: 21-5946-02 |
| | |
| Candidate/Physician: | |
| | |
| Yee Liong Lee | M.D. |
| Candidate Name (First/Last) | Title |
| - and | 5-12-2022 |
| | |
| Candidate Signature | Date |
| NOTARY PUBLIC: | |
| State of: | |
| County of: | |
| Subscribed and Sworn before me on this 2 th day of May | , 202-7 |
| . / | |
| Chang Win- | |
| | 3 |
| Notary Signature My Commission Expires: 01-31-2026 | CHAUNCEY CONRAD WILLIAMS NOTARY PUBLIC - MINNESOTA |



EMPLOYER ATTESTATION

I, Shay Dusek, Director, Carson Tahoe Medical Group, do hereby declare and certify that the Diabetes Clinic (2874 N. Carson Street, Carson City, Nevada 89706) must accept all patients regardless of ability to pay, accept Medicaid, Nevada Check-Up and Medicare on assignment, and use a sliding-fee scale based on federal poverty guidelines to discount services to low-income uninsured persons.

Signature 2-17-2022

Date

Attachment "A"

| | | | | | | | ALC: NO | |
|-------------|---------------|------------------|--------------|---------------|--------------|--------------|---------------|-------------|
| | | and the state of | Anne | ual Income Gu | idelines | USE L | | |
| Family Size | 100% | 133% | 150% | 185% | 200% | 250% | 300% | 400% |
| 1 | \$ 13,590.00 | \$18,074.70 | \$20,385.00 | \$ 25,141.50 | \$27,180.00 | \$ 33,975.00 | \$ 40,770.00 | \$ 54,360.0 |
| 2 | \$ 18,310.00 | \$24,352.30 | \$ 27,465.00 | \$ 33,873.50 | \$36,620.00 | \$ 45,775.00 | \$ 54,930.00 | \$ 73,240.0 |
| 3 | \$ 23,030.00 | \$30,629.90 | \$34,545.00 | \$42,605.50 | \$46,060.00 | \$ 57,575.00 | \$ 69,090.00 | \$ 92,120.0 |
| 4 | \$ 27,750.00 | \$36,907.50 | \$41,625.00 | \$51,337.50 | \$55,500.00 | \$ 69,375.00 | \$ 83,250.00 | \$111,000.0 |
| 5 | \$ 32,470.00 | \$43,185.10 | \$48,705.00 | \$60,069.50 | \$64,940.00 | \$ 81,175.00 | \$ 97,410.00 | \$129,880.0 |
| 6 | \$ 37,190.00 | \$49,462.70 | \$55,785.00 | \$ 68,801.50 | \$74,380.00 | \$ 92,975.00 | \$ 111,570.00 | \$148,760.0 |
| 7 | \$ 41,910.00 | \$55,740.30 | \$ 62,865.00 | \$77,533.50 | \$83,820.00 | \$104,775.00 | \$ 125,730.00 | \$167,640.0 |
| 8 | \$ 46,630.00 | \$62,017.90 | \$69,945.00 | \$86,265.50 | \$ 93,260.00 | \$116,575.00 | \$ 139,890.00 | \$186,520.0 |
| Zipiras | 7-38-77 (1) | | Mont | thly Income G | uidelines | | | |
| Family Size | 100% | 133% | 150% | 185% | 200% | 250% | 300% | 400% |
| 1 | \$ 1,133 | \$ 1,506 | \$ 1,699 | \$ 2,095 | \$ 2,265 | \$ 2,831 | \$ 3,398 | \$ 4,530 |
| 2 | \$ 1,526 | \$ 2,029 | \$ 2,289 | \$ 2,823 | \$ 3,052 | \$ 3,815 | \$ 4,578 | \$ 6,10 |
| 3 | \$ 1,919 | \$ 2,552 | \$ 2,879 | \$ 3,550 | \$ 3,838 | \$ 4,798 | \$ 5,758 | \$ 7,67 |
| 4 | \$ 2,313 | \$ 3,076 | \$ 3,469 | \$ 4,278 | \$ 4,625 | \$ 5,781 | \$ 6,938 | \$ 9,25 |
| 5 | \$ 2,706 | \$ 3,599 | \$ 4,059 | \$ 5,006 | \$ 5,412 | \$ 6,765 | \$ 8,118 | \$ 10,82 |
| 6 | \$ 3,099 | \$ 4,122 | \$ 4,649 | \$ 5,733 | \$ 6,198 | \$ 7,748 | \$ 9,298 | \$ 12,39 |
| 7 | \$ 3,493 | \$ 4,645 | \$ 5,239 | \$ 6,461 | \$ 6,985 | \$ 8,731 | \$ 10,478 | \$ 13,97 |
| 8 | \$ 3,886 | \$ 5,168 | \$ 5,829 | \$ 7,189 | \$ 7,772 | \$ 9,715 | \$ 11,658 | \$ 15,54 |
| | | | | | | | | |
| Financial A | ssistance Pro | gram Disco | unt based o | n Federal Po | verty Guide | lines: | | |
| FPL | Discount | | | | | | | |
| | | | | | | | | |
| 0-250% | 100% | | | | | | | |
| | 100% 75% | | | | | | | |

301-350%

351-400%

50%

25%



April 17, 2022

Nevada Division of Public and Behavioral Health Primary Care Office 4150 Technology Way Suite 300 Carson City, NV 89706-2009

J-1 WAIVER APPLICATION - STATE 30 PROGRAM

Requesting Institution: Carson Tahoe Physician Clinics

dba Carson Tahoe Medical Group

Carson City County, NV

Alien:

Yee Liong Lee, MD

Dear Primary Care Office:

This letter is written in conjunction with the J-1 Waiver application now being submitted in order to qualify Dr. Yee Liong Lee for an H-1B nonimmigrant visa. Through this action, Carson Tahoe Physician Clinics dba Carson Tahoe Medical Group wishes to employ Dr. Lee at the following practice site as an Endocrinologist:

Name of employment site: Diabetes Clinic

Name and title of contact person: Don Hemerson, Practice Manager

Employment site mailing address: 2874 N. Carson Street, Carson City, Nevada 89706 Employment site physical address: 2874 N. Carson Street, Carson City, Nevada 89706

HPSA identification number: 1328726421

MUA/P identification number:

Telephone number: 775-445-7171 FAX number: 775-882-7170

E-mail address for contact person: don.hemerson@carsontahoe.org

Diabetes was found as the number 3 overall priority for the primary service area of Carson Tahoe Physician Clinics. Currently there is a 6 month wait to establish with the current endocrinologist and Primary Care is being asked to manage diabetes as long as possible due to the shortage of providers.

Based on the above, it is our request that the Nevada Division of Public and Behavioral Health act as an interested government agency to recommend a J-1 waiver for Dr. Yee Liong Lee.

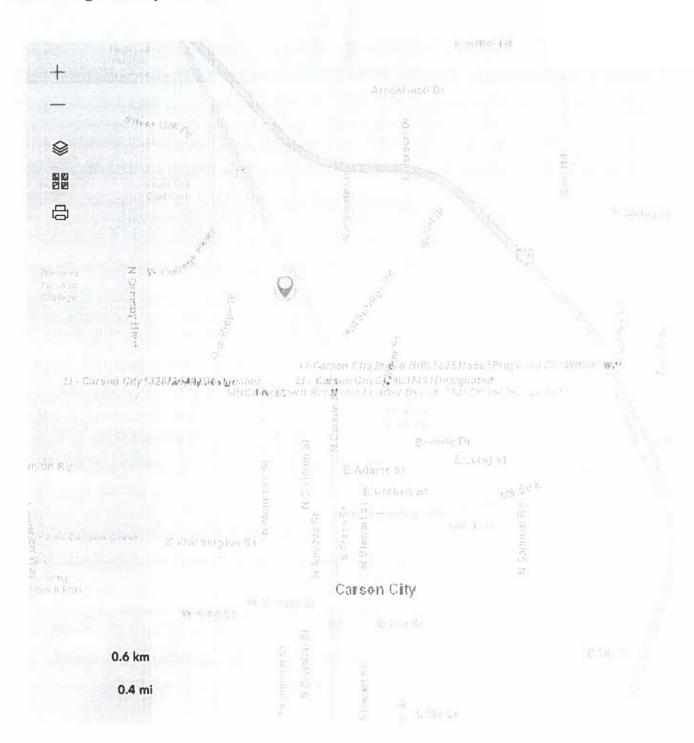
Thank you for your attention to this matter. We hope to receive the approval of this J-1 Waiver Application in the very near future. Please feel free to contact me with any further questions.

DO DE GROOT COME OF ANY COTOO . COME

Sincerely,

Shay Dusek

Director, Carson Tahoe Medical Group



Note: The address you entered is geocoded and then compared against the HPSA and MUA/P data in data.HRSA.gov. Due to geoprocessing limitations, the designation cannot be guaranteed to be 100% accurate and does not constitute an official determination.

[+] More about this address

In a Dental Health HPSA: ✔ Yes

HPSA Name: LI - Carson City

ID: 6329037491

Designation Type: HPSA Population

Status: Designated

Score: 16

Designation Date: 02/02/2022 **Last Update Date:** 02/02/2022

In a Mental Health HPSA: ✔ Yes

HPSA Name: MHCA Northern Rural and Frontier Nevada

ID: 7325796968

Designation Type: High Needs Geographic HPSA

Status: Designated

Score: 18

Designation Date: 12/22/2017 Last Update Date: 12/22/2017

In a Primary Care HPSA: ✔ Yes

HPSA Name: LI - Carson City

ID: 1328726421

Designation Type: HPSA Population

Status: Designated

Score: 12

Designation Date: 03/17/2022 **Last Update Date:** 03/17/2022

HPSA Name: LI-Carson City/Indian Hills

ID: 1325116605

Designation Type: HPSA Population **Status:** Proposed For Withdrawal

Score: 15

Designation Date: 12/20/2013 Last Update Date: 09/10/2021

In a MUA/P: X No



April 17, 2022

Nevada Division of Public and Behavioral Health Primary Care Office 4150 Technology Way Suite 300 Carson City, NV 89706-2009

Re:

Practice Site Information

Please note that Dr. Yee Liong Lee will practice at the following site:

Practice Site Name:

Diabetes Clinic

Practice Site Address:

2874 N. Carson Street, Carson City, Nevada 89706

HPSA Designation Number:

1328726421

MUA/P Designation Number:

Number of Hours Candidate Will Practice at This Site: 40 hours per week

Employer / Administration Address: 1600 Medical Parkway, Carson City, Nevada 89703

Shay Dusek

Director, Carson Tahoe Medical Group

4-17-2022

Date

April 17, 2022

Nevada Division of Public and Behavioral Health Primary Care Office 4150 Technology Way Suite 300 Carson City, NV 89706

Re: Physician Information

Name:

Yee Liong Lee

Date of Birth: Place of Birth:

Country of Citizenship: DOS Case Number:

Residency Training:

Internal Medicine Residency / July 1, 2017 to June 30, 2020 – John H. Stroger Hospital of Cook County, Chicago,

Illinois

Training to provide outpatient and inpatient medical care to patients, including examination, diagnosis, treatment and rehabilitative services, particularly as pertaining to organic and congenital diseases of the human internal organ systems. Prior to beginning his residency program, Dr. Lee obtained his medical degree from the Universiti Sains Malaysia School of Medical Sciences in Malaysia.

Fellowship Training:

Endocrinology, Diabetes and Metabolism Fellowship / July 1, 2020 to June 30, 2022 — University of Minnesota, Minneapolis, Minnesota

Training to diagnose and treat disorders of the internal (endocrine) glands, such as thyroid and adrenal glands including disorders such as diabetes, metabolic and nutritional disorders, obesity, pituitary diseases, and menstrual and sexual programs.

Physician Qualifications:

Dr. Lee will complete his Endocrinology, Diabetes and Metabolism Fellowship training program on June 30, 2022 and will be fully qualified to diagnose and treat disorders of the internal (endocrine) glands, such as thyroid and adrenal glands including disorders such as diabetes, metabolic and nutritional disorders, obesity, pituitary diseases, and menstrual and sexual programs.

Copy of CV attached.

Yee Liong Lee, MD

4/25/2022

Date

Resume

Yee Liong Lee

Present Mailing Address

Medical Education/Work Experience/Certification/License

07/2020- present (Graduation on 6/30/2022)

Endocrinology, Diabetes and Metabolism Fellowship training at University of Minnesota.

07/2020

American Board of Internal Medicine (ABIM) Certified, Year 2020 ABIM ID: 413733

07/2017-6/2020

Internal Medicine Residency at John H. Stroger Hospital of Cook County in Chicago, Illinois, USA.

07/2010-11/2015

Doctor of Medicine (MD) at Universiti Sains Malaysia School of Medical Sciences, Malaysia.

Research/ Publications/ Scientific Achievements

<u>SAT-506 Rare Case of Durvalumab-Induced Thyroiditis, Transient Secondary Adrenal Insufficiency and Autoimmune Diabetes</u>

Y Gorantla, A Amblee, YL Lee, SET Yap - Journal of the Endocrine Society, 2020

SAT-086 A Rare Case of Cholestatic Liver Disease Causing Markedly Elevated LDL Successfully Managed with Plasmapheresis and Ursodeoxycholic Acid YL Lee, V Prado, L Kheng Joe, MT Go... - Journal of the Endocrine Society, 2019

Retinal nerve fiber layer thickness in primary open angle glaucoma and primary angle closure glaucoma

L Kheng Joe, YL Lee, TJ Liang - Journal of Asian Medical Student Association, 2014

Abstracts submitted

In patients with Type 2 Diabetes Mellitus (T2DM), Continuous Glucose Monitoring System (CGMS) usage does not alter multiple measures of Glycemic Variability (GV)
Submitted to ADA Scientific Sessions Abstract. Control Number 2022-A-4639- Diabetes, 1/2022
YL Lee, A Mehfooz, Q Wang, LS Chow

Use of Continuous Glucose Monitoring does not Alter Hypoglycemic Awareness in Patients with Type 2 Diabetes Mellitus

Submitted to ADA Scientific Sessions Abstract. Control Number 2022-A-4927-Diabetes, 1/2022 A Mehfooz, YL Lee, Q Wang, LS Chow

Time-Restricted Eating Did Not Alter Glycemic Variability in Humans who are Overweight and Without Diabetes

Submitted to ADA Scientific Sessions Abstract. Control Number 2022-A-4874-Diabetes, 1/2022 A Mehfooz, YL Lee, Q Wang, LS Chow

Clinical Achievement

2017-2018 Outstanding performance as Program Representative. Internal Medicine Residency at John H. Stroger Hospital of Cook County in Chicago, Illinois, USA.

Presentations

2020 Oral presentation: YL Lee, A case of spontaneously recovered Cushing disease presented at First Endocrine Case International Web Case Conference University of Minnesota-Kobe University-Hokkaido University 2020

2019 Poster: YL Lee, Infrarenal inferior vena cava agenesis and recurrent deep vein thrombosis Poster presented at: Cook County Internal Medicine Residency Program Research Day; Chicago, IL, USA.

2019 Poster: YL Lee, V Prado, L Kheng Joe, MT Go. A Rare Case of Cholestatic Liver Disease Causing Markedly Elevated LDL Successfully Managed with Plasmapheresis and Ursodeoxycholic Acid Poster presented at: ENDO 2019; New Orleans, USA.

2019 Oral presentation: YL Lee, Aleida,R. Cases of Endocrine Related Adverse Event Associated with Check Point Inhibitors Oral Presentation presented at: RUSH University-Cook County Endocrinology Grand Rounds; Chicago, IL, USA.

Memberships

11/2018 to present Endocrinology Society, In-Training Associate

Medical Student Clerkship

Medical Student Clinical Elective 2015 Icahn School of Medicine at Mount Sinai, Beth Israel Department: Cardiology

Medical Student Clinical Elective 2015 Icahn School of Medicine at Mount Sinai, Beth Israel Department: Nephrology

Medical Student International Medical Awards/ Accomplishments

01/2014 Malaysia Representative for oral presentation at 27th East Asian Medical Student's Conference (EAMSC) in South Korea 01/2014

12/2012 1st Place & Malaysia Representative for Public Poster at EAMSC in Japan 12/2012

08/2012 Universiti Sains Malaysia Representative at 10th Inter-medical School Physiology Quiz (IMPSQ) in Malaysia 08/2012

06/2011 1st Place & Malaysia Representative for Public Poster at International Federation of Medical Student's Association –Asian Medical Student's Association (IFMSA-AMSA) Joint Conference in Hong Kong in 06/2011

Language Fluency

Mandarin (Native/functionally native)
Cantonese (Native/functionally native)
English (Advanced)
Japanese (Intermediate)
Bahasa Malaysia (Advanced)