



Samantha Wolfe

Partner
303.295.8479
Denver
sdwolfe@hollandhart.com

USCIS Creates New Path for Physician Cases Caught in Benefits Pause

Insight — May 7, 2026

On April 30, 2026, USCIS updated its Screening and Vetting guidance page to add "applications associated with medical physicians" to the group of cases eligible for its internal hold-lift review process, a notable development for healthcare employers with physician cases stalled under the agency's expanded benefits pause, in effect since January 1, 2026. See last month's update for more background information.

Key Takeaways:

- USCIS has added medical physicians to a priority review process that could move their stalled immigration cases forward.
- This is not a guarantee — cases are reviewed individually and exceptions are granted only in limited circumstances.
- Healthcare employers should act now by auditing physician immigration files and ensuring filings clearly establish the beneficiary's role as a medical physician

While this update does not guarantee immediate approvals, it signals that USCIS recognizes the urgency of physician cases and is willing to prioritize them within its existing framework.

Since January 2026, USCIS has imposed a broad adjudicative hold on immigration benefit applications for nationals of 39 countries designated under Presidential Proclamation 10998. This pause has affected pending EADs, change of status requests, extensions, and H-1B filings for affected individuals, creating significant workforce disruptions across the healthcare sector.

Under its March 30, 2026 update on Screening and Vetting, USCIS established an internal review process for lifting holds on certain categories of cases. Then, on April 30, 2026, the agency added the following language to that process, clarifying that holds may be lifted for the following:

Holds have been lifted for aliens vetted through Operation PARRIS, certain petitions filed by U.S. citizens, intercountry adoption forms, certain rescheduled oath ceremonies, statutory and regulatory decision issuance, refugee registrations for South African citizens/nationals, certain special immigrant visa petitions, certain employment authorization documents, and asylum applications from non high-risk countries, **and applications associated with medical**

physicians.

The addition of "applications associated with medical physicians" is new. Notably, while the date of the announcement and the review/update date on the USCIS page remain listed as March 30, 2026, the updated language was only added on April 30, 2026.

This update means that USCIS has identified physician-related cases as a category eligible for its internal hold-lifting process—placing physicians alongside other prioritized groups such as cases vetted through Operation PARRIS and certain petitions filed by U.S. citizens.

Employers need to understand the limitations of this development:

- **There is no external request process.** USCIS has confirmed that there is currently no external process for individuals, outside offices, or organizations to request an exception to the hold. Exceptions are determined exclusively by USCIS during its standard review of the benefit request.
- **Each case is assessed individually.** USCIS has stated that exceptions are "granted only in exceptional circumstances." The inclusion of physicians as a category does not mean all physician cases will be automatically released.
- **The scope of "applications associated with medical physicians" is undefined.** USCIS has not clarified whether this update covers only I-129 petitions for physicians, or also extends to associated EADs, change of status requests, or other benefit applications linked to a physician's employment.

Employers should work with counsel to ensure filings clearly identify the beneficiary as a medical physician. In light of this update, healthcare employers should consider the following actions:

- 1) **Identify all pending physician cases that maybe affected.** Review your immigration portfolio for any physicians from the 39 affected countries—including those identified by country of birth, not just current nationality—who have pending benefit applications with USCIS.
- 2) **Ensure filings clearly identify the physician's role.** Because the hold-lift category references "applications associated with medical physicians," it is important that pending and future filings clearly establish the beneficiary's status as a medical physician, including supporting documentation of medical licensure and employment.
- 3) **Consider including a National Interest Exemption (NIE) request.** The January 1, 2026 policy memo includes an exemption for "benefit requests filed by aliens whose entry would serve a United States national interest." For physician cases—particularly those serving underserved or rural communities—a written NIE request included in the cover letter articulating the physician's role in addressing healthcare access needs may support a favorable internal review.

This development is the first concrete indication that USCIS is

differentiating physician cases from the broader pool of applications subject to the benefits pause. It comes at a time when healthcare employers continue to face compounding immigration challenges, including the \$100,000 H-1B fee for workers abroad and the pending "H-1Bs for Physicians and the Healthcare Workforce Act," which has been introduced, but not yet taken up by Congress.

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