

# AN INTRODUCTION TO MEDICAL CARE IN ICE CUSTODY

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This packet is written for detainees in Immigration and Customs Enforcement (ICE) custody who are receiving medical services through the ICE Health Service Corps (IHSC). According to ICE policy, detainees with a *serious medical need* must receive appropriate treatment. If you feel that your medical conditions are serious enough that, if left untreated, you would experience greater injury; unnecessary, serious pain; and/or an ongoing condition, there are steps you can take to request better and 'medically appropriate treatment.' This packet outlines those steps so you can advocate for yourself.



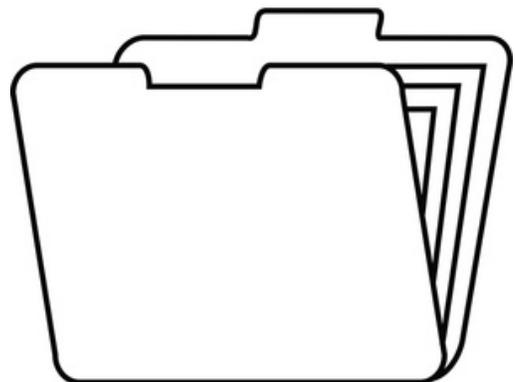
It is important to note that ICE follows a strict protocol when handling medical complaints, and like many large US governmental agencies, the government may not respond to your request very quickly. In order to receive the most immediate response from medical staff and ICE, it is best to follow these steps in the order they are presented in this packet. For example, request your medical record from the medical staff at the facility before contacting their supervisors in Washington DC.

## HELPFUL TIPS FOR MONITORING YOUR MEDICAL CARE:

### **1. Ask for your Medical Records!**

Every detainee has a medical record while they are in ICE custody. Your medical record contains all of your diagnoses, medications, test results, symptoms, dates of medical appointments, and your medical progress. In order for you to better understand decisions regarding your medical care, it's important to request your medical records.

It is also helpful to request records because by doing so, you are holding medical staff more accountable in following up on your requests. As you continue to visit medical staff and seek further treatment, remember to periodically ask for



your records, this will serve to enhance your communication and understanding of medical decisions.

## 2. **Document Everything!**

Just like the medical team keeps track of your medical records, it is important for you to have a personal, on-going record of your communication with the medical staff. Keep your own journal of notes of every visit with medical staff and record:

- Date of request and/or communication with medical staff
- Person you contacted/met with
- Reason for contact/visit
- Outcome of request/visit

## 3. **MedPAR System**

Any specialty services and treatment you receive by ICE requires approval from ICE headquarters in Washington DC. The Medical Payment



Authorization Request (MedPAR) must be completed by ICE medical staff at the detention center in order for the special procedure or treatment to be approved. For example, if you need outside care from a specialist (surgery, ultrasounds, dialysis, etc.), a MedPAR Request would need to be approved by ICE headquarters before you receive the treatment. While most requests are approved, some requests are denied.

If you have a medical condition that must be treated at an offsite hospital or clinic, ask the medical staff if a MedPAR

request has been made. If so, ask to be notified as soon as they receive a response. **Follow up** with medical to check on the outcome of the request and ask for a copy of the approval or denial of your treatment. Medical staff should receive a response within three days after they send in their request for your treatment.

***How to Write a Letter of Appeal to ICE Health Service Corps (IHSC) if a MedPAR request for treatment was denied:***

When medical requests (MedPAR Requests) are denied by ICE headquarters, detainees are allowed to submit an appeal asking that their request for medical treatment be *reconsidered*. This appeal is known as a “Level II appeal”. In order to submit an appeal, you must have a record of when and why the MedPAR request was denied. You will have to request a copy of the denial from the medical staff at your facility<sup>1</sup>. After you receive the record of your denied MedPAR request, submit a letter to ICE Health Service Corps and include the following information:



- Name & A#
- Facility name and address
- Date of denial
- Description of denied service(s)
- Explanation why the original denial should be overturned.

Send your letter to:

(Mail): ICE Health Service Corps  
Attn: Appeals-Level II  
500 12<sup>th</sup> St. SW  
2<sup>nd</sup> Fl., Mailstop 5202  
Washington, D.C. 20536

(Fax): 1-866-808-8154  
(Phone): 1-202-732-4600

**STEPS IN ADDRESSING MEDICAL CONCERNS**

***1. Discuss concerns with medical staff at your detention facility***

- Each facility has their own procedures for handling medical complaints. Most of the facilities have a grievance form that you can fill out and submit. If possible, make a copy of the grievance form you complete and remember to document the date and outcome of each grievance.
- Under certain circumstances (severe mental illness, chronic conditions, etc.) you may request to be transferred to a different pod or ICE facility. Speak to medical staff and your Deportation Officer about how to make a formal request for a transfer.

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<sup>1</sup> If the medical staff at your facility do not give you a copy of your denied MedPAR request, contact the Florence Project or ICE’s Office of Public Engagement (contact information is below), or send your appeal letter without the copy of the denial and explain that medical staff did not provide you with a copy.

- If you are denied a service, ask for documented proof of this denial (usually denial will come from the MedPAR system). At the very least, ask for your medical records and write down the date the request was submitted, the name of the person who denied your request, and the reason for the denial.

**2. Write a Letter to the Warden or Commander of your Facility AND the Assistant Field Office Director (AFOD) (see Attachment A)**

The **Warden/Commander** oversees the operations of the facility. Who you contact will depend on which facility you are being detained in. Letters to the



warden or commander can be sent through intrafacility mail. Remember to keep a copy of the letter you send and record the date you send the letter.

If you are in the Eloy Detention Center, Florence Correctional Center (FCC) & Central Arizona Detention Center (CADC) in Florence, address your letter to "Warden" or "Warden Commander."

If you are in the Pinal County Jail (PCJ), address your letter to "Commander."

If you are in Florence (Service Processing Center or SPC), address your letter to "AFOD."

The **Assistant Field Office Director (AFOD)** is responsible for reviewing and following up with special cases in their region. Major medical complaints and requests should be sent to the AFOD overseeing the detention center in which you are currently housed:

Florence:  
 Assistant Field Office Director  
 Florence Detention Center, SPC  
 3250 N Pinal Pkwy  
 Florence, AZ 85131

Eloy:  
 Assistant Field Office Director  
 Eloy Detention Center  
 1705 E. Hanna Rd.  
 Eloy, AZ 85131

### **3. Write a Letter to ICE's Office of Public Affairs & Office of Public Engagement**

ICE's Office of Public Affairs exists to resolve complaints and problems related to ICE operations. If you have a sensitive case or want to bring a problem with the way your treatment was handled to ICE's attention, write a letter to a representative from ICE's Office of Public Affairs. Include the following information in your letter:

- The topic of your problem/concern (medical, condition of detention, issue regarding parole/release, etc.);
- A brief description of the complaint or concern;
- Your contact information;
- All relevant information about individuals involved, including full names, alien numbers and if relevant, the name of the detention facility in which you are detained;
- A brief history of your previous contact with the local ICE office to resolve your concern (whenever possible, please provide a record of the time(s), date(s), and the name(s) of the ICE representative(s) contacted); and
- A clear statement on the action requested.

Eduardo Preciado  
2035 N. Central Avenue  
Phoenix, AZ 85004

Phoenix.Outreach@ice.dhs.gov  
Phone: (602) 766-7030

If Mr. Preciado does not respond to your letter in a timely manner, you may write a letter to the Public Engagement Officer in Washington DC. Include your original letter to Mr. Preciado to demonstrate that you have already tried to contact him in Phoenix.

Public Engagement Officer  
U.S. Immigration and Customs Enforcement  
500 12th St., SW  
Washington, D.C. 20536



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## ADDITIONAL RESOURCES

### **1. Contact the American Civil Liberties Union (ACLU)**

If you are punished, disciplined, or treated unfairly for refusing to take your medication or receive treatment *or* if you have been denied necessary treatment, contact James Lyle Duff or Victoria Lopez at (602) 650-1854. Every patient has the right to have control of their medical care, which includes receiving copies of your medical records and denying treatments or medications they do not feel comfortable taking.

American Civil Liberties Union of Arizona  
P.O. Box 17148  
Phoenix, AZ 85011

### **2. Write a Letter to the Field Office Director (FOD) to Request your Release**

If you are suffering from an extreme or severe medical condition or ICE is unable to provide treatment for your condition, you can write a letter to your deportation officer and the Field Office Director, Jon Gurule, requesting your release from detention. The FOD's address is below. You will need to describe in detail all of the reasons why you merit parole or release from detention. For specific information on how to request your release, read the Florence Project's packet named "How to Request Humanitarian Parole."

Field Office Director  
2035 N. Central Ave.  
Phoenix, AZ 85004

### **3. Write a Letter to the Department of Homeland Security's Office for Civil Rights and Civil Liberties (CRCL).**

The Department of Homeland Security has an Office for Civil Rights and Civil Liberties (CRCL), which reviews violations of detainee's rights while in immigration detention and/or custody. If you feel that you have been subject to discrimination or your rights have been severely violated while in detention, you can fill out the attached form, or write a letter to CRCL explaining the nature of these abuses.

You have the option to complete the attached form or write your letter *without* providing your name. By providing your name, it may be easier for CRCL to conduct an in-depth investigation. CRCL also advises that you should *not* experience any retaliation for submitting this complaint. If you become subject to such retaliation, call 1-866-644-8360.

Include the following information in your letter:

- Full Name
- Mailing Address
- Facility where you currently reside, A#

- Description of your complaint with as much detail as possible
- All the dates this occurred, and if the problem is ongoing, when circumstances began.
- Place where incidents occurred (e.g. name of detention facility)
- Who treated you unfairly (e.g. ICE Staff)
- Anyone who may have seen or heard what happened and provide their contact information
- Who you have previously contacted about this complaint, and what they have done to respond to your complaint
- Any information that supports your claim: documents, photos, medical records, grievances, witness statements
- Any other relevant information (see letter guidelines attached)
- If you are not fluent in English, in which language you prefer to communicate

\*\*\*Submit a COPY, NOT ORIGINAL to CRCL. Keep the original for your records.

Send your letter/form to:

(Mail): Department of Homeland Security  
 CRCL/Compliance Branch  
 245 Murry Lane, SW  
 Building 410, Mail Stop #0190  
 Washington, DC 20528

(Email): crcl@dhs.gov  
 (Phone): 1-866-644-8360  
 (Fax): 1-202-401-4708

**4. Contact Your Home Country's Consulate**

Often the United States government will work with your home country's Consulate to expedite and resolve issues on your behalf. Contacting your Consulate, with a letter describing your need for help, is the first step in forming a relationship between your home country and ICE.

**5. Write a Letter to Bellevue/New York University Program for Survivors of Torture** This program is a treatment and advocacy center for survivors of torture in New York City. Part of their work includes advocating for good medical care and treatment for detained immigrants in ICE custody.

Bellevue/New York University Program for Survivors of Torture  
 462 First Avenue, CD732  
 New York, NY 10016  
 (Phone) 212-562-8713

**6. Write a Letter to Accreditation Board (at time of review)**

Every three years, the detention facility is monitored by a National Standards Committee. Detainees can submit complaints to the National Standards Committee, who will follow-up on these complaints during their visits.

Approximately one month before the National Standards Committee comes to inspect the facility, signs will be posted around the facility. You can send a letter

addressing the complaint to the contact information posted on these signs around the facility. While the National Committee looks for violations of standards, they are more interested in learning about reoccurring and on-going violations of standards. Therefore, if several detainees experience the same complaint, it is more likely that these complaints will be addressed, rather than individual, isolated events.



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*An Introduction To Medical Care In Ice Custody* was prepared and updated by the staff of the Florence Immigrant & Refugee Rights Project and was written for immigrant detainees in Arizona who are representing themselves pro se in their removal proceedings. This guide is not intended to provide legal advice or serve as a substitute for legal counsel. The Florence Project is a nonprofit legal services organization and does not charge for its services to immigrant detainees in Arizona. This guide is copyright protected but can be shared and distributed widely to assist indigent immigrants around the country. All of our guides are available to download on our website: [www.firrp.org](http://www.firrp.org). We kindly ask that you give credit to the Florence Project if you are adapting the information in this guide into your own publication.

## **Appendix A: Sample Letter Expressing Medical Concerns**

Date

Your Name

A#

Mailing Address Line #1

Mailing Address Line #2

Recipient's Name

Recipient's Title

Recipients Address Line #1

Recipeints Address Line #2

Your Name, A#

Re: Request for/Complaint of (Or Concern about)

Dear Mr./Ms. Recipient's Last Name,

Paragraph #1: Introduction

- Purpose of letter
- Main complaint
- What you want to happen by sending this letter

### **Background of Complaint**

- Description of complaint with as much detail as possible
  - Date of onset
  - What has been happening with your illness, condition, etc. since your arrival in detention
  - Why if left untreated, you would experience more harm/pain

### **Steps Taken to Resolve Complaint**

- Date of contact/visit/grievance
- Who you contacted
- Where was person you contacted (what facilities/hospitals)
- Outcome of previous requests

### **Detailed Explanation of Request**

- What treatment do you want to receive? Release from facility or transfer to another facility is a valid request.
- Why is it necessary to receive this treatment?

Final Paragraph: Written Response to Request & Follow-Up

*As soon as a decision has been made in regards to my request, I ask that you please notify me, in writing, about your response. In the case that my request has been denied, I anticipate receiving a written explanation of your decision. In the event that I do not hear back from you, I plan to [next step in the process].*

*Thank you for taking the time to consider this request. I look forward from hearing from you shortly.*

Sincerely,

Your Signature