



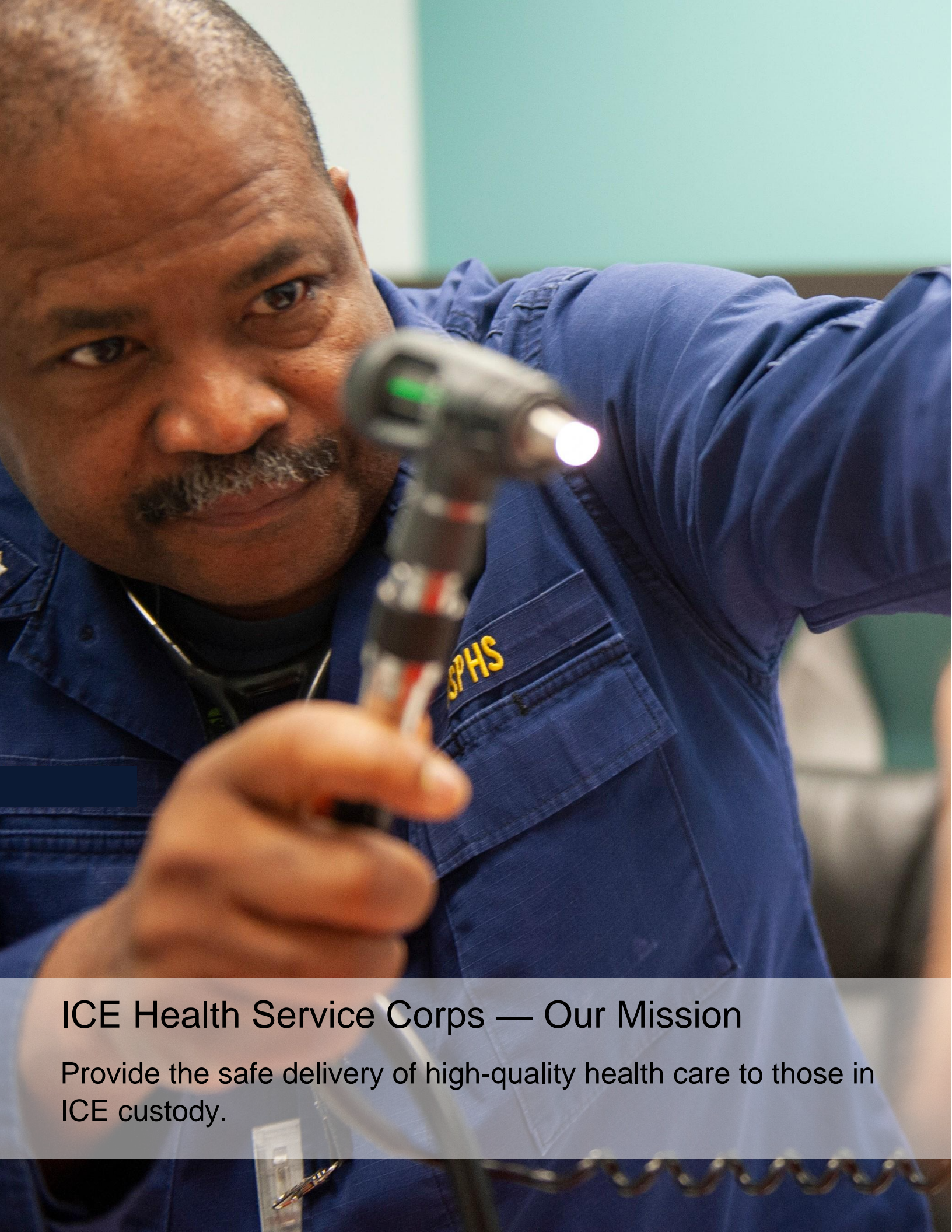
U.S. IMMIGRATION AND CUSTOMS ENFORCEMENT

Health Service Corps

Fiscal Year 2020



U.S. Immigration
and Customs
Enforcement



ICE Health Service Corps — Our Mission

Provide the safe delivery of high-quality health care to those in ICE custody.

ICE Health Service Corps — Our Vision

To be the best health care delivery system in the detention and correctional health care.





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A Message from Tony H. Pham

Dear Colleagues,

I am pleased to present the inaugural U.S. Immigration and Customs Enforcement (ICE) Health Service Corps (IHSC) Annual Report. To provide continued transparency to the American taxpayer, ICE is proud to share the exceptional work IHSC provides every single day across the country.

In accordance with its legal responsibility, IHSC provides ICE detainees humane and essential health care with the daily, dedicated efforts of their experienced staff. IHSC implements all necessary medical services ranging from a basic annual checkup to major surgeries and specialized care.

In Fiscal Year (FY) 2020, IHSC provided medical services to nearly 100,000 detainees from 180 different countries. They screen every alien for infectious diseases at intake and work tirelessly to combat the COVID-19 pandemic while following national requirements and guidelines.

As we look to the future, I am confident that IHSC will continue to advance their core mission to: *Provide the safe delivery of high-quality health care to those in ICE custody.*

Tony H. Pham

Senior Official Performing the Duties of the Director
U.S. Immigration and Customs Enforcement



A Message from the Assistant Director

Dear Colleagues,

In FY 2020, the ICE Health Service Corps (IHSC) administered and managed a health care system that provided direct care to approximately 100,000 detainees housed at 20 designated facilities throughout the nation, to include medical, dental, mental health care, and public health services. Oversaw health care for over 169,000 detainees housed in 148 non-IHSC-staffed facilities, totaling over 51,000 beds. IHSC also directly supports ICE field office directors on medical issues within their area of responsibility. IHSC executed a budget exceeding \$315M in FY 2020.



IHSC implemented successful solutions to continue its direct care of patients affected by COVID-19. IHSC teams communicated public health science to ICE stakeholders that influenced behaviors, decision-making, and policies. Collaboration with the Federal Bureau of Prisons, U.S. Marshals Service, ICE, and the Centers for Disease Control and Prevention (CDC) resulted in sustainable relationships that culminated in CDC-published COVID-19 guidance specifically for the detention environment.

Additionally, IHSC successfully modified an agency-wide contract with its laboratory vendor to expand COVID-19 testing capability at all IHSC-staffed facilities, thus saving 41% of the cost per test. This effort preserved the health and safety of the detained population, ICE employees, and contract personnel while simultaneously giving assurances to the international community that ICE performs all necessary public health measures to protect its respective populations during the removal process.

IHSC successfully navigated the complexities of the COVID-19 pandemic with swiftness, certainty, and determination. The innovation and enhancement resulting from the pandemic response aligned services in fundamental and sustainable ways, and ultimately strengthened the health care system.

ICE leadership values the work each staff member performs to provide the safe delivery of high-quality health care to those in ICE custody. This report captures and amplifies the dedication IHSC exhibits every day and codifies IHSC's commitment to caring for all individuals detained in ICE custody.

Dr. Stewart D. Smith

Assistant Director
ICE Health Service Corps



STATUTORY AUTHORITY

IHSC, formerly the Division of Immigration Health Services (DIHS), has a long history of providing health care to detained individuals. Beginning in 1891, the Immigration Act authorized the U.S. Public Health Service (PHS) to examine and quarantine aliens on Ellis Island. The role of PHS expanded when the U.S. Department of Health and Human Services (HHS) created the Division of Immigration and Health Services (DIHS). The new division's creation was in response to the "Freedom Flotilla" mass migration event in 1980, during which 124,769 Cubans arrived on the shores of Florida. HHS chartered DIHS to provide direct health care to detainees at the Krome Service Processing Center in Miami, Florida. In 2007, DIHS realigned to the U.S. Department of Homeland Security (DHS) within ICE, and in 2010 its name changed to ICE Health Service Corps. IHSC derives its primary operational authority from Section 232 of the *Immigration and Nationality Act* (INA), *Immigration Act* of 1891, the *Public Health Service Act*, and Title 42 of the *U.S. Code of Federal Regulations*. The work done and support provided to detainees is funded by Congress through annual appropriations.

IHSC ORGANIZATIONAL STRUCTURE

IHSC is a directorate within ICE Enforcement and Removal Operations (ERO). The IHSC Assistant Director is responsible for all administrative and operational elements of the IHSC health care system, and consequently all activities related to the health care of individuals in ICE custody. IHSC headquarters comprises 22 offices that provide strategic and operational guidance to 20 IHSC-staffed medical facilities/clinics; oversees care provided in non-IHSC-staffed detention facilities; initiates program and process improvements; monitors health care expenditures and the medical claims billing process; and manages the human and fiscal resources necessary to sustain the health care system. See [Appendix A](#) for a list of IHSC-staffed facilities.

IHSC is divided into divisions that support the organization in being the best health care delivery system in detention and correctional health care. The *Administration Division* supports the activities and the systems used by personnel for sustaining the IHSC health care system. The *Clinical Services Division* provides medical oversight, guidance, and instruction to IHSC providers and allied health professionals who deliver medical, mental, and dental health care to ICE detainees. The *Health Care Compliance Division* coordinates: continuous quality health care to detainees in non-IHSC-staffed facilities; ensures all IHSC-staffed facilities comply with accrediting body standards; oversees the agency's quality improvement, risk management and patient education programs; and reimburses clinicians who provide care for individuals in ICE custody outside the detention health system. IHSC's *Health Systems Support Division* oversees medical and administrative staff with IHSC-staffed facilities and ICE special operations support. The division comprises the Health Operations Unit, Health Information Technology Unit, and IHSC Special Operations Unit. The *Office of the Chief of Staff* coordinates across divisions to support the agency's communications, investigations, policy, and external information functions.

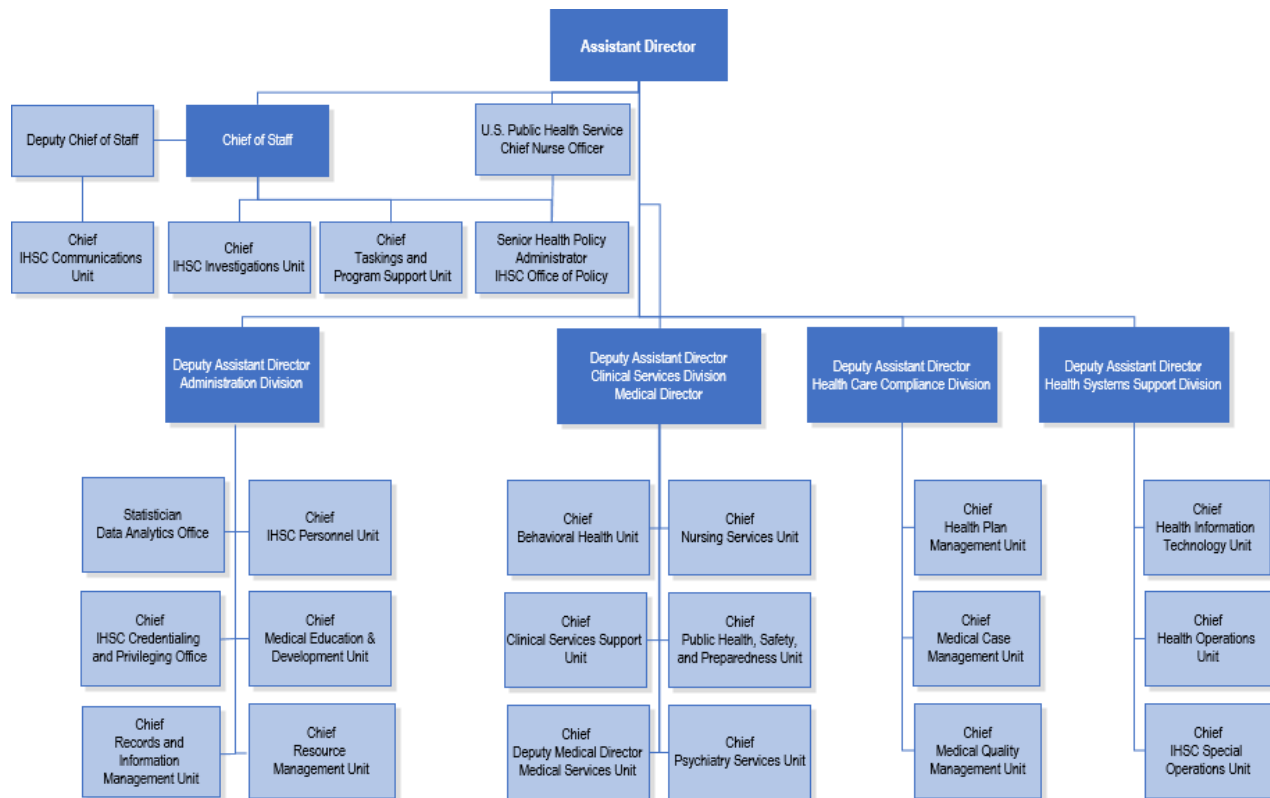


Figure 1. IHSC Organizational Chart

VISION STATEMENT

To be the best health care delivery system in detention and correctional health care.

MISSION STATEMENT

Provide the safe delivery of high-quality health care to those in ICE custody.

GUIDING PRINCIPLES

Be flexible and agile - continually improve while adapting to change.

We take advantage of opportunities and stay ahead of a rapidly changing world.

Align a culture of innovation with authority and accountability.

We manage resources and take calculated risks to achieve innovative advances in meeting our mission.



Promote performance-based, cost effective, efficient, patient-centered services.

We apply sound management principles to wisely utilize resources and will reward improvements that reduce costs or increase value.

Continuously improve health and resiliency.

We work to improve health and resiliency through prevention and evidence-based disease treatment – keys to IHSC effectiveness and improvement in the quality of life for our detainees.

Implement patient-centered care.

We partner with our patients to make them a member of the team focused on addressing their health needs.

OUR WORKFORCE

IHSC is a high-performing, results-producing workforce made up of a multi-sector, multidisciplinary staff of approximately 1,700 authorized positions that include PHS Commissioned Corps officers, federal General Schedule (GS) civil servants, and contract health professionals. IHSC staff comprise physicians, psychiatrists, psychologists, social workers, psychiatric nurses, dentists, dental assistants, dental hygienists, pharmacists, pharmacy technicians, radiology technicians, registered nurses, advanced practice providers, licensed vocational nurses, medical assistants, medical records technicians, other health professionals, and administrative support personnel.

Contractor vacancies over a three-year period peaked in FY 2019, while GS and PHS vacancies peaked in FY 2020. Retention rates across all staff types remained at or above 80 percent over the same three-year period.

- GS vacancies exponentially increased in FY 2020, as IHSC received an additional 172 clinical positions to add to the staffing plan. This increased the total number of GS positions from 39 to 211. Vacancies are expected to decrease in the FY 2021 as IHSC fills the additional GS positions.
- In FY 2020, the number of PHS positions increased from 469 to 569.

IHSC continues to collaborate with ICE Office of Human Capital, ERO Human Resources Unit, contract vendors, and PHS Commissioned Corps HQ to enhance recruitment strategies.

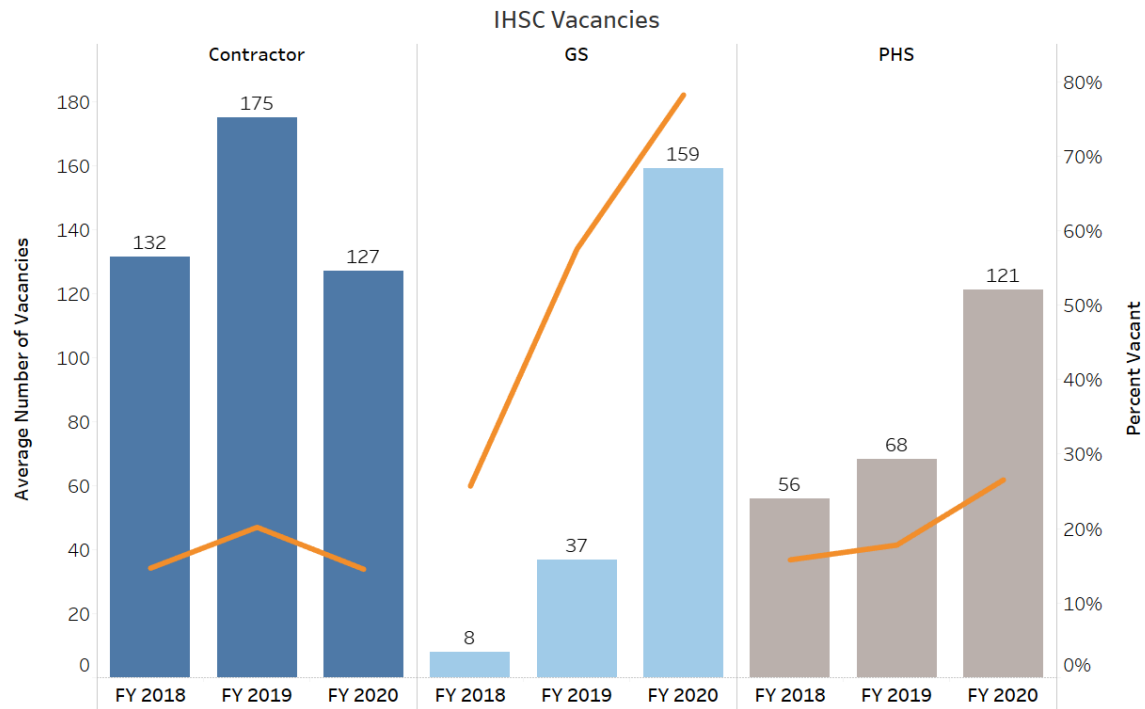


Figure 2. Vacancies at IHSC-staffed Facilities, FY 2018 – FY 2020

ICE HEALTH CARE SYSTEM

IHSC administers a detention health system that provides direct health care through ICE- owned facilities; oversees care for ICE detainees housed in contracted facilities; reimburses for off-site health care services detainees receive while in ICE and U.S. Customs and Border Protection custody; and supports special operations missions.

In FY 2020, IHSC executed a budget exceeding \$315M on medical, dental, mental, and public health services to detainees.

IHSC-Staffed Facilities

IHSC directly operates 20 medical facilities and clinics nationwide (see [Appendix A](#)). ICE receives a diverse and fluid detainee population, who receive comprehensive care for a multitude of pre-existing health ailments and conditions, such as tuberculosis, diabetes, sexually transmitted infections, mental health disorders, and dental cavities.

Detainees within IHSC-staffed facilities receive timely medical care. Individuals in IHSC-staffed facilities receive a health screening within 12 hours of arrival, and a complete health assessment within 14 days.



Initial health screenings include vital signs; initial dental, vision, medical and mental health history and status; continuation of current medication therapies, screening for tuberculosis and COVID-19 (as of January 2020); pregnancy screening for females; and patient education.

Comprehensive health assessments include a physical examination with vision screening; mental health screening; follow up assessments for acute and chronic conditions, as well as medication therapy; behavioral health referrals for mental health conditions; and dental screenings and problem-focused care.

Due to the COVID-19 pandemic, the overall census within IHSC-staffed facilities was lower than in previous years. However, IHSC continued daily operations and the number of health care services provided remained high. Additionally, in FY 2020, IHSC transitioned medical operations of Otay Mesa Detention Center to CoreCivic and prepared to open two new facilities in FY 2021.



Figure 3. Health Care Services Provided by 20 IHSC-staffed Facilities in FY 2020

Source: eBO report 1146 Facility Workload V2

Notes:

1. Total number of detainees who received services = Total number of unique subject IDs who has at least one encounter.
2. Intake screenings conducted for detainees booked on or after October 1, 2019 and held longer than 12 hours.
3. Otay Mesa included in the above stats because it was an IHSC facility for the majority of FY 2020 before it became an IGSA.

Be flexible and agile – continually improve while adapting to change.

We take advantage of opportunities and stay ahead of a rapidly changing world.





Non-IHSC-Staffed Facilities

ICE's Custody Management Division contracts with detention facilities nationwide to detain individuals in its custody. While IHSC does not directly provide or direct the medical care provided in non-IHSC-staffed facilities, IHSC does oversee those facilities' compliance with national detention standards¹ and coordinate care through medical referrals, as needed, through the Field Medical Coordinator Program.

In FY 2020, IHSC oversaw health care for over 169,000 detainees housed in 148 non-IHSC staffed facilities and directly supported ICE field leadership on medical issues within their area of responsibility.

Off-Site Referrals and Treatment

IHSC pays for medical services provided to the detainee while in ICE Enforcement and Removal Operations, ICE Homeland Security Investigations, and U.S. Customs and Border Protection (CBP) custody. IHSC insures detainees in ICE custody under Title 18, Part III, Chapter 301, Section 4006 of the U.S. Code. IHSC reimburses independent providers who provide care in local hospitals and health care systems for services rendered.

Over the past year, IHSC significantly increased efforts to secure letters of understanding (LOUs) with hospitals, health systems, and individual practitioners who provide off-site care to ICE detainees. The LOU details the types of services the provider will deliver and includes an explanation of the medical claims reimbursement process facilitated through the Veterans Administration Financial Services Center (VAFSC); ICE contracts with the VAFSC to process reimbursements. In addition to obtaining LOUs, providers must complete and submit information to receive payment.

IHSC currently has a total of 265 LOUs in place. Of these, IHSC signed 155 new letters of understanding in FY 2020.

Special Operations

IHSC provides medical support for ERO removals and special operations. Officers from the IHSC Special Operations Unit serve as medical service providers for ICE missions, both domestically and internationally. IHSC's Special Operations Unit supports ERO by delivering medical services during domestic transfers and international removals. It also provides medical services to migrants rescued or interdicted at sea on U.S. Coast Guard cutters in support of Alien Migrant Interdiction Operations.

¹ ICE Detention Standards. Source: <https://www.ice.gov/factsheets/facilities-pbnds>



COUNTRIES WE SERVE

IHSC provided health care to detainees from 180 countries across the world (see [Appendix B](#) for a complete list). IHSC's initial encounter with detainees, through the intake process is, for many of the detainees, their first time seeing a health care provider. IHSC identifies and diagnoses medical conditions detainees were unaware they were living with. This is a true testament of IHSC's commitment to provide the best healthcare to all detainees, regardless of race, nationality, sexual orientation, religion, or learning comprehension.

IHSC RESPONSE TO CORONAVIRUS (COVID-19) PANDEMIC

In early 2020, IHSC responded to an emerging public health threat caused by a new coronavirus, SARS-CoV-2 or COVID-19. COVID-19 spread easily within communities and quickly became a global pandemic. The nature of the illness, combined with its rapid spread around the globe, threatened our detained population and workforce alike and represented an unprecedented challenge to ICE operations and the IHSC health system.

Efforts to contain the virus necessitated comprehensive, coordinated, and innovative approaches executed at all levels of the organization. IHSC tracked national and international trends, and in turn issued real-time guidance for the detention environment as the pandemic evolved. IHSC continued to operate its medical facilities and clinics nationwide, support ERO removal operations, and oversaw care and compliance at non-IHSC-staffed facilities. National emergency declarations, such as the Title 42 Public Health Emergency Order, prompted the agency to implement the IHSC Hotel Operation (IHOP) mission. As states instituted mandatory restrictions and closures, IHSC activated its Continuity of Operations Plan to ensure uninterrupted HQ support to the field and ICE overall.

IHSC adjusted quickly by implementing virtual mental health services and infectious disease consults, as well as issuing and implementing preventive guidance in accordance with Centers for Disease Control recommendations. In addition to direct patient care provided, many staff worked behind the scenes to ensure coordination of daily operations between IHSC HQ, ERO, and the field. They monitored, tracked, and reported as the pandemic evolved; developed and managed the flow of guidance and direction to field staff; oversaw the safe onboarding of new employees; and responded to requests for information regarding the care of ICE detainees. IHSC communicated proactively, collaborated transparently with internal and external stakeholders, and quickly implemented preventive measures to mitigate COVID-19's impact on detainees, personnel, and ICE's overall health system.

Public Health Measures and COVID-19 Guidance

As part of its intake process, IHSC routinely screens for infectious disease, such as tuberculosis, within the detained population. The health system has protocols in place to isolate the ill, medically manage and treat infected individuals, and quarantine or cohort exposed individuals and groups to contain the disease. IHSC built upon its existing processes and infrastructure during the COVID-19 pandemic to enhance efforts to monitor, screen, test, detect, report, and



treat the disease, and prevent disease spread. As the world learned more about the emerging pandemic, IHSC implemented measures to protect its workforce and ICE detainees.

IHSC issued a health advisory to its workforce on January 22, 2020. On January 23, 2020, IHSC issued the first of many interim guidance for how to address COVID-19 within its health care system. The document included a summary of the situation to date, as well as recommendations for staff action during intake medical screening; during sick call examination or other clinical encounters with detainees who present with, or complain of, respiratory illness; detainees with recent relevant travel history and symptoms of respiratory illness; and infectious disease public health actions. As the situation progressed, subsequent guidance addressed a myriad of topics. See [Appendix C](#) for a complete list of disseminated messages.

IHSC partnered with other ERO components and federal correctional and public health partners to develop and disseminate guidance for the broader detained environment. Notably, IHSC contributed to the following notable publications:

- ERO COVID-19 Pandemic Response Requirements.
- ERO Release Clearance Checklist.
- CDC Guidance for Correctional and Detention Facilities.

Clinical Leadership

The COVID-19 pandemic significantly affected IHSC's clinical operations. As COVID-19 emerged as a public health threat and evolved into a global pandemic, clinical services leadership monitored the situation in real-time, delved into the existing science and guidance, stayed apprised of real-time changes, communicated updated guidance for the detained population to IHSC staff, and trained clinical staff to implement and adopt new protocols and preventive measures. The demand for clinical services increased across the board, while dental procedures halted for a short period in accordance with CDC guidance.

The Deputy Assistant Director, Clinical Services Division, represented ICE in national efforts to develop COVID-19 guidance for detention settings.

Special Operation: IHSC Hotel Operation (IHOP) Mission

International travel restrictions due to the COVID-19 pandemic complicated removal operations. In April 2020, IHSC was charged with developing and executing a plan to provide health care to families and unaccompanied children held until removal in three hotels located in El Paso, Texas; McAllen, Texas; and Phoenix, Arizona.

IHSC rapidly established the IHOP mission and deployed field medical coordinators, who are registered nurses, to the hotels within 48 hours of activation. The medical staff established a medical clinic inside hotel rooms where they provided sick call and urgent care. Over the course of five months, IHSC provided health care to over 600 individuals, including COVID-19 testing, as



required by their countries prior to deportation. El Paso Processing Center, Florence Service Processing Center, and Port Isabel Service Processing Center served as the primary facilities for collaboration, medical supplies, personnel, and logistical support.

The IHSC team of 48 registered nurses and advance practice providers, seven medical doctors, five behavioral health providers, and four IHSC facilities successfully executed the IHOP mission. These professionals came from every area of responsibility within ERO to assist as needed. This mission proved IHSC's adaptability to deploy resources to support ERO missions throughout the United States.

Personal Protective Equipment

IHSC maintained an adequate supply of personal protective equipment (PPE) throughout the COVID-19 pandemic by identifying par levels, which predicts depletion within 5 to 6 weeks. IHSC provided PPE to all IHSC medical staff across 20 facilities, in addition to field medical coordinators, for the execution of their daily duties. IHSC established regular updates to track PPE inventory and monitor supplies. This inventory proved invaluable; it allowed facilities to identify and send PPE to other facilities in need. Despite having a national shortage of PPE, IHSC maintained a stockpile and level of preparedness to last up to six months.

COVID-19 Testing Equipment and Supplies

IHSC swiftly established COVID-19 testing for ICE that used two testing methods to meet operational needs and comply with country requirements prior to removal.

- Abbott ID Now rapid test. These machines provide results within five minutes. It tests for the antigen of the virus, and if present, will yield a positive result. This method was instrumental in testing the majority of the aliens prior to removal and requested by 23 countries. IHSC tested over 9,000 detainees with Abbott machines.
- LabCorp rT-PCR test. LabCorp tests for COVID-19 at the molecular level; it is the most accurate test but can take up to five days to process and receive results. Ten countries requested this test for their returning aliens. IHSC tested 11,630 detainees using LabCorp tests.

The Health Systems Support Division developed, implemented, and tracked IHSC COVID-19 plans to test entire facilities (saturation testing) at 17 ICE and 26 contract detention facilities, resulting in COVID-19 tests performed on 20,630 detainees in FY 2020. The division provided ICE and contract detention facilities with COVID-19 Abbott ID Now training, testing materials, and oversight to monitor implementation. IHSC conducted tests onsite and received lab results in time to facilitate timely ERO removals and repatriations. Their coordination and documentation of daily LabCorp and Abbott COVID-19 tests enabled real-time reporting and responses to requests for information.



IHSC's COVID-19 testing capacity continues to strengthen and normalize over time. IHSC obtained over 19,000 test kits and 35 Abbott ID Now machines. IHSC distributes test kits and machines across 25 IHSC and non-IHSC-staffed facilities, testing detainees from over 65 different countries.

Testing Timeline:

April 22, 2020

- ERO received 10 Abbott IDNOW testing machines and 2,000 test kits from HHS and directed IHSC to prepare detainees for deportation.
- IHSC developed and implemented a testing plan.
- IHSC deployed three administrators, who are professionally trained medical laboratory technicians, to train four sites to use the machines within two days, resulting in 291 detainees tested within three days.

May 2020

- IHSC pilot tested whole facility testing to understand how the new virus circulates in a facility with asymptomatic detainees and identify asymptomatic cases; the practice proved effective.

June 2020

- IHSC received an additional 25 Abbott ID Now machines and 3,000 test kits.
- ICE facilities across the country prepared to implement comprehensive facility testing.
- Machines and test kits shipped throughout the United States and Puerto Rico weekly.

Budget Augmentation

IHSC secured additional funding through the Coronavirus Aid, Relief and Economic Security (CARES) ACT Emergency Supplemental Fund to support the agency's immediate and ongoing response to COVID-19, including \$1.3M for COVID-19 testing, equipment and supplies, and another \$57.8M through FY 2024 to enhance medical screening and patient medical care.

Align a culture of innovation with authority and accountability.

We manage resources and take calculated risks to achieve innovative advances in meeting our mission.





Component-Specific Contributions to IHSC's Pandemic Response

The COVID-19 pandemic impacted all aspects of the IHSC organization. IHSC mobilized to overcome every challenge and maintain the integrity of the ICE health care system.

- The Clinical Services Division (CS) led IHSC's clinical and public health actions in response to COVID-19.
- The Health Systems Support (HSS) Division spearheaded planning and implementation of special missions, and agency efforts to test for, and protect against, COVID-19.
- The Health Care Compliance (HCC) Division liaised with non-IHSC-staffed detention facilities and facilitated COVID-19 testing efforts for detainees housed in non-IHSC-staffed sites.
- The Administration Division (Admin) supported IHSC's financial, material, and human resource needs related to the COVID-19 Response.
- The Office of the Chief of Staff (OCoS) supported crisis communications and reporting for COVID-19.

In addition to the achievements described in the previous sections, **Appendix D** highlights component-specific contributions to the IHSC pandemic response.

PROGRAM SUMMARIES AND FY20 ACHIEVEMENTS

ADMINISTRATION DIVISION

The Deputy Assistant Director of Administration provides oversight essential to sustaining the IHSC health care system. The Administration Division supports the agency's financial, material, human resources, privileging, training, information technology, data analytics, and records management needs.

- *Data Analytics Office (DAO)*. Enables IHSC to analyze and interpret data for prediction and forecasting purposes in the promotion of the safe and effective delivery of health services that inform operations and evidenced-based decision-making.
- *IHSC Credentialing and Privileging Office (ICPO)*. Enables qualified practitioners to provide care in IHSC-staffed facilities. The office supports the IHSC health care system through dependable and objective review, primary source verification, documentation of credentials, granting privileges to licensed independent practitioners, and credentialing licensed supervisor practitioners and licensed dependent providers, to ensure all providers are credentialed or privileged to provide clinical care in IHSC facilities.



- *IHSC Personnel Unit (IPU)*. Provides visionary leadership, innovative solutions, and human resources services to further IHSC's mission and goals by recruiting and retaining a trained, ready, and equipped force of medical, administrative, and management professionals to support agencywide operations.
- *Medical Education and Development Unit (MEDU)*. Provides comprehensive educational program development, facilitation, and consultation that enhance agency skills, knowledge, and abilities, and advance professional and career acumen of IHSC personnel.
- *Resource Management Unit (RMU)*. Facilitates the optimal use of IHSC resources and systems. Elevates IHSC as the benchmark for all correctional health care systems through its budget, finance, property, and contract management functions.
- *Records and Information Management (RIM) Unit*. Manages IHSC's information and records management systems.

FY 2020 Administration Division Achievements:

- *Provided financial and material support for the IHSC health care system.* IHSC executed a budget exceeding \$315M to support the health system that provides medical dental, mental, and public health services to detainees in ICE custody. The division completed acquisitions and coordinated purchase card holders to procure needed system, equipment and supplies for the organization including medical supply orders at 20 facilities nationwide. Additionally, the division actively negotiated to lower the cost of an interagency agreement with the U. S. Department of Veterans Affairs, saving \$57M in FY20.
- *Supported IHSC operations.* The division contributed to IHSC operations both at HQ and in the field. Its units supported the transition of Otay Mesa Detention Center medical operations to CoreCivic contractor by executing medical services contract modifications; coordinating IT equipment and supply shipments; and electronically archiving and securing the transfer of over 1,300 medical records. In addition, they established a new dental waste management recycling program for IHSC facilities, and supported telehealth expansion efforts by disseminating webcams to behavioral health and pharmacy staff nationwide. The division actively enhanced administrative and medical records management at HQ and within IHSC-staffed facilities.
- *Strengthened and supported the IHSC workforce.* The IHSC workforce continued to grow in FY20, to fill critical gaps and perform essential functions required of the health care system. The division spearheaded innovative efforts to recruit, hire, and onboard new federal GS and PHS personnel. In FY20, applications for PHS positions doubled from the previous year.

IHSC also established a process to ensure all providers meet IHSC standards of care and programs to support their continued training and development. In FY20, the Medical



Executive Committee reviewed verified credentials for 95 medical providers and granted them privileges to practice within the IHSC health care system. IHSC provided orientation for almost 200 new employees and provided IHSC staff over 400 continuing medical education credits. IHSC also acquired the Public Health Foundation's TRAIN online platform, with access to curricula to meet mandatory continuing education requirement of the IHSC health workforce.

CLINICAL SERVICES DIVISION

The Deputy Assistant Director of Clinical Services provides medical oversights, guidance, and instruction to IHSC providers and allied health professionals who deliver quality medical, behavioral health, and dental services to ICE detainees.

- *Behavioral Health Unit (BHU)*. Provides clinical consultation, clinical oversight, placement coordination, and training to IHSC personnel who deliver timely and high-quality behavioral health care to individuals in ICE custody across the nation.
- *Clinical Services Support Unit (CSSU)*. Oversees all IHSC specialty consultants and supports all clinical services division initiatives, including IHSC's academic affairs, medical asset support team (MAST), and emergency response programs.
- *Deputy Medical Director/Medical Services Unit (MSU)*. Provides medical, dental, and pharmacy services to detainees in ICE custody.
- *Nursing Services Unit (NSU)*. Provides safe delivery of high-quality nursing care to those in ICE custody.
- *Psychiatry Services Unit (PSU)*. Led by the Chief Psychiatrist, this new unit includes tele-psychiatrists and psychiatric advanced practice providers who can prescribe medications.
- *Public Health, Safety, and Preparedness (PHSP) Unit*. Provides leadership and scientific expertise and facilitates interagency collaborations on broad areas of public health, infection prevention, environmental health, safety, and all-hazards emergency preparedness and response.

FY 2020 Clinical Services Division Achievements:

- *Provided high quality health care to individuals in ICE custody*. The Clinical Services Division directly cared for approximately 100,000 detainees within 20 IHSC-staffed facilities and provided clinical support for ICE special operations missions. Detainee care included 100% nationwide coverage for tele-psychiatry services, over 300 cardiology consultations, and 2,000 electrocardiogram reviews.

IHSC's public health professionals managed over 520 cases of suspected tuberculosis to ensure continuity of care and controlled a mumps outbreak in ICE facilities by early 2020. IHSC supported approximately 100 detainees across the IHSC health care system who required higher levels of behavioral health care.

Promote
performance-based,
cost effective,
efficient,
patient- centered
services.

We apply sound
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costs or increase value.





- *Strengthened the IHSC health care workforce.* A health care system is only as strong as its workforce. The Clinical Services Division expanded the agency's capacity to care for ICE detainees by hiring and training additional nursing, dental, and infection prevention staff; training its nurse managers and facility health program managers; integrating medical assistants (MAs) into the IHSC staffing model; and developing behavioral health provider and technician orientation and competency requirements.
- *Strengthened IHSC health care standards and systems.* Several clinical disciplines within the division developed and updated guidance across to align practice across sites nationwide. The division piloted clinical nursing guidelines for adult and pediatric acute, urgent, and emergent care; published updated formularies, and pharmaceutical and medication management policies; and developed a compendium of 30 behavioral health therapeutic group programs for use in the detention setting.

The division proactively identified and addressed issues specific to detainee health care. Utilizing new approaches, training, and tools in the electronic health record that align with clinical guidelines and policy, IHSC improved management of detainees with alcohol withdrawal in IHSC facilities. The division also developed a plan to increase suicide risk assessment completion for patients under suicide precautions.

HEALTH CARE COMPLIANCE DIVISION

The Deputy Assistant Director of Health Care Compliance coordinates continuous quality health care to detainees in non-IHSC-staffed facilities; ensures all IHSC-staffed facilities comply with accrediting body standards; oversees the agency's quality improvement, risk management and patient education programs; and reimburses clinicians and community providers who provide care for individuals in ICE and U.S. Customs and Border Protection (CBP) custody outside the detention health system.

- *Medical Case Management Unit (MCMU).* Coordinates continuity of care for individuals in ICE custody; ensures IHSC provides quality and appropriate health services, in accordance with the ICE Performance-Based National Detention Standards, ICE National Detention Standards, and Family Residential Standards.
- *Medical Quality Management Unit (MQMU).* Ensures all IHSC-staffed facilities adhere to the accreditation standards; evaluates and reviews the quality of health care delivery to those in ICE custody; oversees patient education program; and collaborates with stakeholders to identify, monitor, and improve processes within IHSC's health care system.
- *Health Plan Management Unit (HPMU).* Liaises with the Veterans Affairs Financial Services Center to process medical claims and payments for off-site medical services provided to those in CBP and ICE custody; administers the IHSC provider network; and, administers IHSC's utilization management program.



FY 2020 Health Care Compliance Division Achievements:

- Oversaw compliance with detention standards for contracted detention facilities. In FY 2020, IHSC oversaw care for 169,718 detainees housed in 148 non IHSC-staffed facilities, by ensuring these facilities complied with national detention standards.

IHSC field medical coordinators and medical care coordinators address many of the same issues and challenges experienced in IHSC-staffed facilities and collaborate closely with the ERO Custody Management Division and each detention facility to ensure ICE detainees receive appropriate care. In FY 2020, IHSC established a new national policy and procedure for medical transfers in collaboration with ERO, increasing efficiency and effectiveness; provided guidance and staff training to address hunger strikes; supported efforts to mitigate the impact of mumps among detainees; and supported medical logistics for high-risk removals.

- Strengthened IHSC's capacity to function as a health care insurer for those in ICE custody. In FY 2020, IHSC established the Health Plan Management Unit to facilitate IHSC's health plan management operations while reducing fraud, waste, and abuse of resources by evaluating the medical necessity, appropriateness, and efficiency of offsite health care services. In addition, the division created the Utilization Management Program and discovered \$25,000 in overpaid claims that the government can recoup. The division also enhanced its processes and electronic medical payment authorization request (MedPAR) system to manage, process, and track medical claims and facilitate timely provider payment.
- Oversaw management of and reimbursements for detainee offsite health care and services. In FY 2020, IHSC signed 155 new LOUs with community medical providers, expanding the IHSC provider network and detainee health care access nationwide. IHSC currently has 265 LOUs in place. Additionally, IHSC implemented a credentialing process for off-site providers, to confirm the provider's education, certification, licensure, regulatory compliance and malpractice history; hospitals are excepted as they conduct their own credentialing of staff.

IHSC oversaw medical care for individuals in ICE custody outside of IHSC-staffed facility. In FY 2020, the division monitored over 3,556 detainee hospitalizations and 223 significantly ill detainees; and secured prescriptions for approximately 211 detainees prior to international flights. IHSC supported air ambulance transports for medically complex cases. As good stewards of federal funds, the division achieved a cost-avoidance of over \$37,700 by utilizing more cost-efficient service providers when coordinating eight air ambulance flights for medically complex cases.

The division reimburses providers, hospitals, and health systems for care provided to detainees while in ICE and CBP custody. In FY 2020, IHSC adjudicated 57,134 medical claims payments for care delivered to ICE detainees by providers outside IHSC-staffed facilities, in addition to 22,040 claims payments for care provided while in U.S. CBP custody in FY 2020. In addition, IHSC resolved over 7,840 claims previously denied



between 2016-2019 due to untimely filing. The resolution resulted in payments to providers totaling \$24.6M, and improved provider relations and access to outside specialty care.

- *Supported quality improvement efforts for those in ICE custody.* IHSC prides itself in the excellent care it provides to those in ICE custody, which results from a culture of continuous learning and quality improvement. In FY20, IHSC implemented and reported on 15 standard national performance measures across its IHSC-staffed facilities and helped field staff develop local quality improvement measures. The division also developed national guidance to improve detainee safety and care, addressing risk management practices; accreditation and inspections; and health systems assessments, an annual self-audit that evaluates compliance with standards and addresses findings.

In FY20, the division provided materials and training to enhance detainees' health care experience. In FY20, the division developed and disseminated new patient education materials for use in IHSC-staffed facilities, to inform and empower detainees. The division required all IHSC staff receive training on detainee disability and reasonable accommodations requirements and services, to promote awareness and use.

HEALTH SYSTEMS SUPPORT DIVISION

The Deputy Assistant Director of Health Systems Support oversees all operational aspects of the IHSC health system. The division oversees the daily operations of IHSC-staffed facilities, personnel, and health information infrastructure to ensure ICE provides high quality health care services to individuals in its custody.

- *Health Information Technology Unit (HITU).* Advances and manages the electronic health record infrastructure; provides guidance and support to IHSC personnel by identifying priorities and streamlining standardized electronic health record documentation in line with national policy and procedures.
- *Health Operations Unit (HOU).* Provides high quality, direct health care services to individuals in ERO custody, and ensures uninterrupted support of ERO's mission. The unit comprises a cadre of health services administrators (HSAs) who expertly manage IHSC-staffed facilities nationwide.
- *IHSC Special Operations Unit (ISOU).* Provides compassionate, professional, mission-focused medical assessment and care to detained aliens and migrants in the air, on land, or sea, in support of ICE strategic objectives.

FY 2020 Health Systems Support Division Achievements:

- *Managed IHSC-staffed facility operations across the health system.* The division comprises professional administrators and program managers who oversee operations within IHSC-staffed facilities and ensure 24/7 support to the ERO mission. This involves strong leadership, planning, and coordination with numerous stakeholders to ensure each facility has the staff, supplies, and space needed to support the mission.



In FY 2020, the division spearheaded efforts to transition full operation of OMDC from IHSC to contractor Core Civic, including all medical services, equipment, and supplies. Concurrently, preparations began to open new IHSC-staffed facilities in FY 2021. Division leadership conducted remote teambuilding activities to promote camaraderie and high morale among staff, and site visits to Eloy Detention Center and Florence Correctional Center.

The division developed and published the IHSC Temporary Duty (TDY) On-call Schedule (ITOS) directive and guide in FY 2020, which ensures readiness of IHSC's clinical workforce to augment staffing at its facilities during times of critical shortages. Using this framework, the division deployed 237 PHS officers to temporarily staff field sites.

- Supported ICE and ERO special operation missions. In addition to leading the COVID-19 IHOP mission, the division supported several special missions and developed policy to guide its operations. ISOU conducted fit for travel screening for the Juvenile and Family Residential Management Unit's domestic transport missions and provided medical support crew for all ERO/IHSC Air Operations missions, totaling 36 flights. ISOU achieved a 100% crewmember safety record by implementing infection control practices during pandemic-era removals. In addition, the unit codified its procedures by authoring the IHSC Special Operations Unit policy and comprehensive guide in FY20.

CHIEF OF STAFF

The Chief of Staff serves as the principal advisor to the AD on major issues and challenges affecting IHSC. The Office of the Chief of Staff coordinates agencywide to investigate, inform, guide, and respond on behalf of IHSC to advance the IHSC mission and effectively manage the ICE health care system.

FY 2020 Office of the Chief of Staff Achievements:

- Promoted agencywide coordination. The Chief of Staff facilitated transparent and coordinated decision-making on matters affecting all aspects of the agency through the IHSC Executive Governing Board, comprised of division leadership who advise the IHSC Assistant Director. In addition, IHSC chartered the Chiefs and Program Leads Communication and Coordination Group to facilitate transparency and promote collaboration across its operational components.
- Stabilized and executed key functions that support IHSC. The Chief of Staff established two new components, the IHSC Office of Policy and Taskings and Program Support Unit, to enhance organizational support in the areas. In addition, the division enhanced the agency's communications, investigative, policy, SharePoint, and taskings capacity by expanding these functional teams and establishing standard processes. These functions are critical to guiding and sustaining IHSC's daily operations.

In FY 2020, the division responded to over 1,230 requests for information from external stakeholders, including congressional inquiries, complaints, and audits; 130%



more than the previous year. The division also facilitated timely strategic and routine internal communications with the IHSC workforce, including publications, electronic newsletters, IHSC Town Hall meetings and websites, which promote transparency, information-sharing, and agency morale. The migration of the entire IHSC SharePoint environment from SharePoint 2016 to SharePoint Online in Spring 2020 significantly impacted operations; the division coordinated with site managers agencywide to maintain and enhance core business functions, facilitate the migration and ensure data integrity, and address issues.

IHSC optimized its policy development and management processes and infrastructure in FY 2020, with the purchase of a new, web-based, electronic policy development system customized for IHSC's 211 policies and workflows. The new system will increase efficiencies and ensure compliance with national standards. IHSC published 14 directives, 16 guides, and three templates in FY 2020. The division published policies to standardize IHSC investigations, and mortality review and reporting, another core function.

DETAINEE HEALTH CARE COSTS

BUDGET OVERVIEW

IHSC annual funding is 10.1% of the entire funds available for ERO's Custody Operations. In FY 2020, IHSC executed over \$315M, an increase of \$64.95M from FY 2019 expenditures, to support delivery of medical care services and perform COVID-19 operational requirements. Funding for offsite referral care, contractor personnel, and Public Health Service (PHS) salaries are the three main drivers, attributing 90% cost of the overall budget. The remaining 10% of the budget is distributed across services contracts supporting biohazardous medical waste; language interpretation and translation services; medical and office supplies; laboratory services; National Commission on Correctional Health Care (NCCHC) accreditation; teleradiology; travel; in-patient behavioral health services; and other miscellaneous expenses.

IHSC formulated the FY 2021 budget using the prior year's "must fund" baseline for contractual line items and a 3% inflation factor used to calculate PHS salaries and benefits, travel, and purchase cards. In comparison, FY 2021 reflects a reduction of \$5.7M due the removal of IHSC as medical service component at Otay Mesa Detention Center, the impact of the COVID-19 pandemic on the average daily patient census, and a decrease in offsite referral care.

See [Appendix E](#) for a detailed list of actual IHSC expenditures in FY 2020, and projected expenditures in FY 2021.



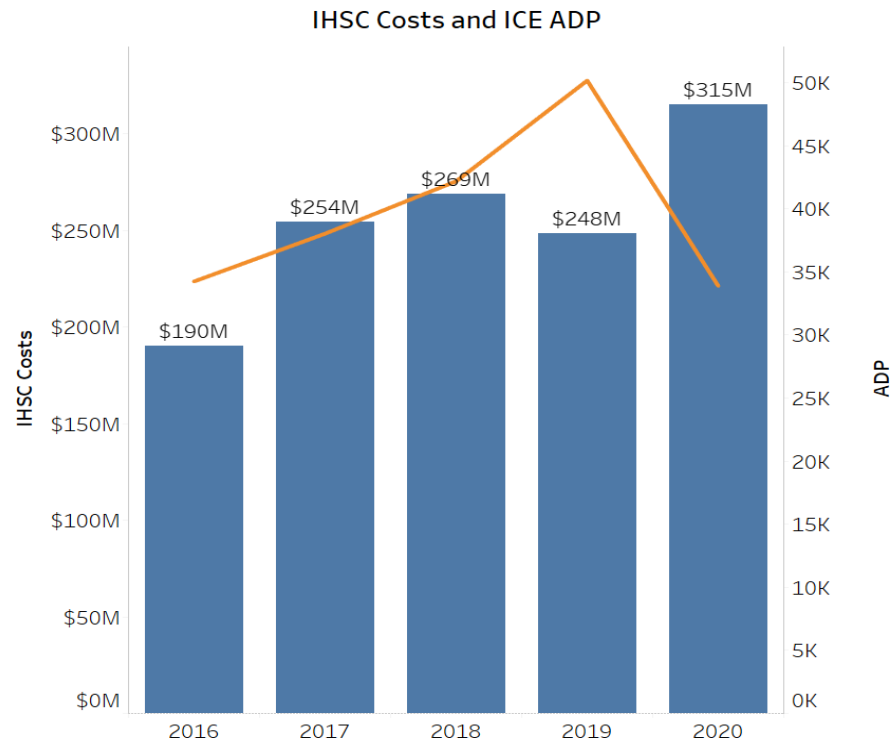
Continuously improve health and resiliency.

We work to improve health and resiliency through prevention and evidence-based disease treatment – keys to IHSC effectiveness and improvement in the quality of life for our detainees.



Historical ICE Average Daily Population (ADP) and IHSC Costs

IHSC's annual costs increased by 27% in FY 2020, a year with a low average daily population (ADP), due to COVID-19. This led to an 88% increase in the daily cost per person.



Fiscal Year	IHSC Costs	ADP	Daily Cost per Person
2016	\$190,215,479	34,240	\$15.22
2017	\$254,339,803	38,030	\$18.32
2018	\$268,708,158	42,183	\$17.45
2019	\$248,089,002	50,163	\$13.55
2020	\$315,098,069	33,724	\$25.59

Figure 4. ICE Average Daily Population and IHSC Costs

IHSC Cost Drivers

Three-line items drive the majority of changes to IHSC's annual budget: off-site medical claims, medical contractor personnel, and PHS salaries (medical personnel).

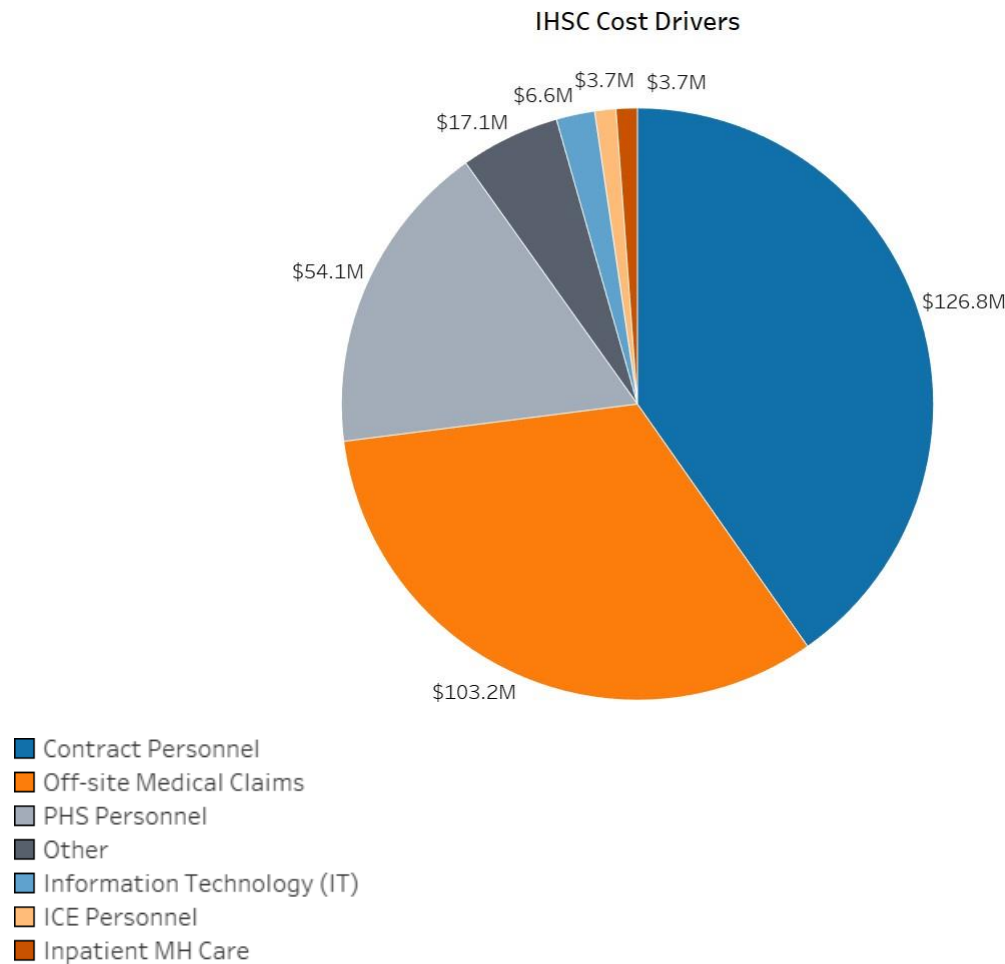
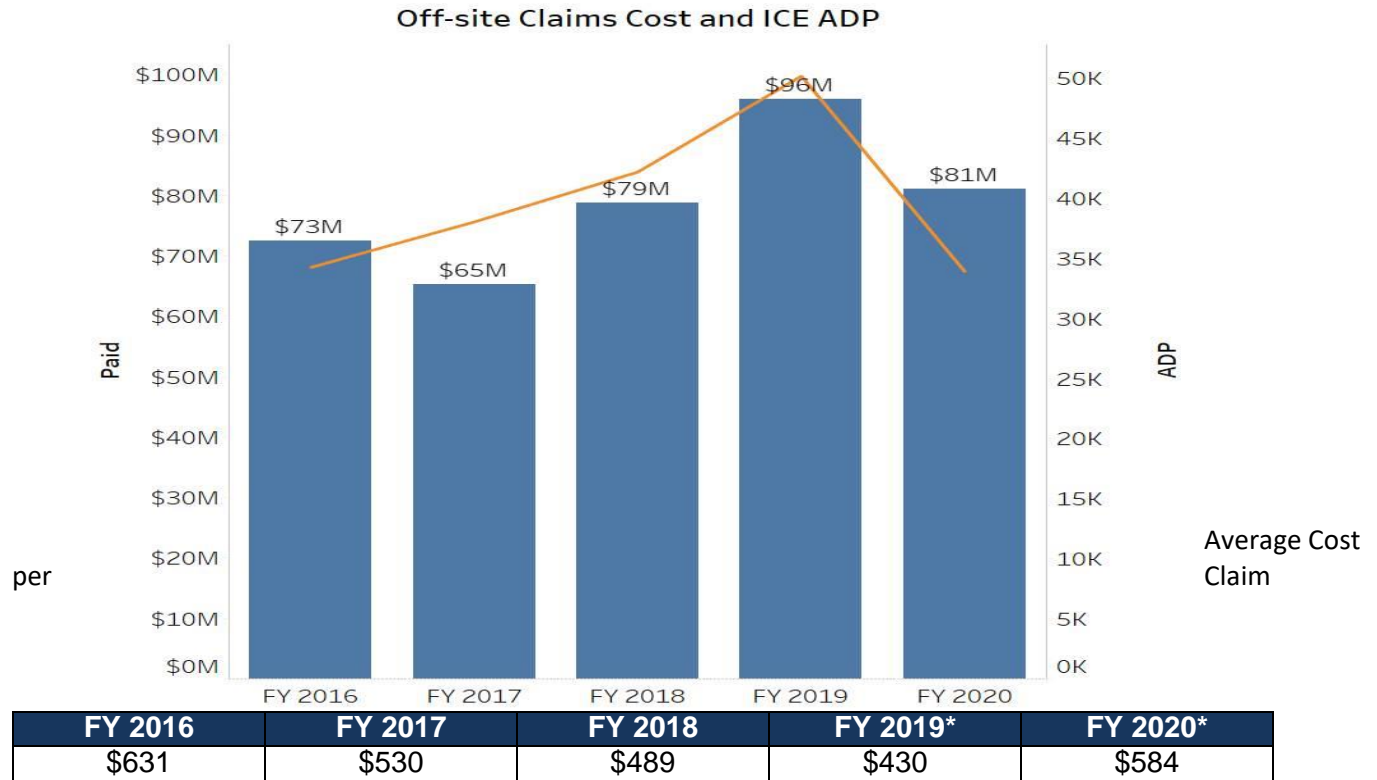
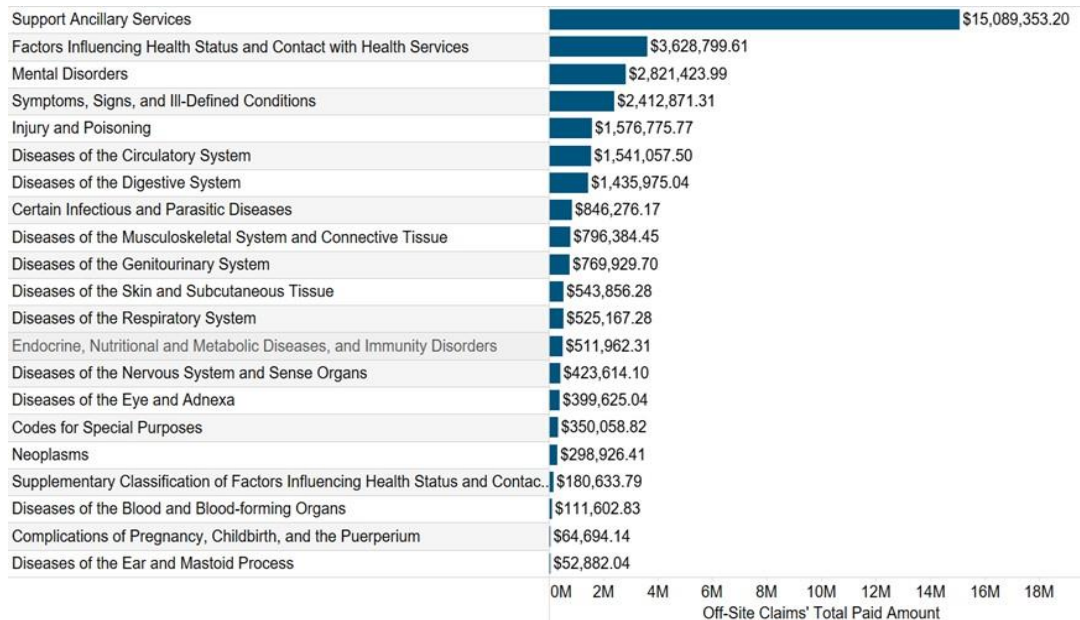


Figure 5. IHSC Cost Drivers in FY 2020

Historical ICE Payments to Veterans Affairs (VA) Financial Services Center (FSC) for Off-Site Medical Claims Trends

IHSC projects FY 2020 off-site claims cost to be \$81M. Currently, actual costs are \$50.5M*, but are expected to increase as providers have one year after the date of service to submit medical claims. The average cost per claim increased between FY 2019 and FY 2020 as the number of claims decreased by 61% year over year. However, the number of claims and cost for FY 2020 is expected to increase throughout FY 2021.

The figure below presents data based on the claims paid dataset from the VAFSC. ICE pays off-site medical claims submitted by ICE, Customs and Border Protection, and Homeland Security Investigations.

**Figure 6.** Off-site Medical Costs**FY 2020 ICE Off-site Paid Claims by Diagnosis Group****Figure 7.** FY 2020 ICE Off-site paid claims by diagnosis group

Note: A detailed break-out of the top ten FY 2019 and FY 2020 medical paid claims by ICE in [Appendix F](#).



FY2021 IHSC PRIORITIES

IHSC will begin to implement its new five-year a new strategic action plan in FY 2021. These overarching priorities will guide and align the organization, as we continue to enhance the IHSC health system and provide the very best health care possible to detainees in ICE custody.

Strengthen the IHSC Foundation

IHSC will design and implement the next generation of health systems assessments to improve compliance with applicable standards, enhance quality patient care, modernize the staffing model, and enhance technology platforms to support to address current and future needs.

Optimize IHSC Operations

IHSC will build and optimize several areas of operation, including clinical care, case management and IGSA oversight, health plan and administration functions, and agency communications.

Foster Resilient Teams and People

IHSC will strengthen the federal GS and PHS workforce, enhance training and development, build ready and resilient people and teams, and promote employee engagement and recognition.

CONCLUSION

In FY 2020, IHSC administered and managed a health care system that provided direct care to approximately 100,000 detainees housed at 20 designated facilities throughout the nation, to include medical, dental, mental health care, and public health services. It utilized 148 over 72-hour contracted facilities, totaling over 51,000 beds, and oversaw health care for over 169,000 detainees housed in 148 non-IHSC-staffed facilities.

IHSC's collective actions during FY 2020 significantly contributed to its mission of providing high-quality detainee health care. The infrastructure and systems IHSC established to overcome challenges posed by COVID-19 strengthened the national detention health system. Moreover, by cooperatively and transparently sharing its expertise and information, IHSC enhanced the department's overall capacity to meet current and future challenges. IHSC's efforts preserved the health and safety of the detained population, ICE employees, and the homeland.



Implement patient-centered care.

We partner with our patients to make them a member of the team focused on addressing their health needs.



APPENDIX A: IHSC-STAFFED FACILITIES

1. Alexandria Staging Facility, Alexandria, LA
2. Berks County Family Shelter, Berks, PA
3. Buffalo Federal Detention Facility, Buffalo, NY
4. Caroline Detention Facility, Bowling Green, VA
5. South Texas Family Residential Center, Dilley, TX
6. El Paso Processing Center, El Paso, TX
7. Elizabeth Contract Detention Facility, Elizabeth, NJ
8. Eloy Detention Center, Eloy, TX
9. Florence Service Processing Center, Florence, AZ
10. Houston Contract Detention Facility, Houston, TX
11. LaSalle Detention Facility, Jena, LA
12. Krome Service Processing Center, Miami, FL
13. Montgomery Processing Center, Conroe, TX
14. South Texas ICE Processing Center, Pearsall, TX
15. Otay Mesa Detention Center, San Diego, CA²
16. Port Isabel Service Processing Center, Los Fresnos, TX
17. Northwest Detention Center, Tacoma, WA
18. T. Don Hutto Residential Center, Taylor, TX
19. 26 Federal Plaza/Varick Staging Facility, New York, NY
20. York County Prison, York, PA

² Transitioned to IGSA in September 2020.



APPENDIX B: DETAINEE COUNTRY OF CITIZENSHIP

Afghanistan	Cyprus	Ivory Coast
Albania	Czech Republic	Jamaica
Algeria	Czechoslovakia	Japan
Angola	Democratic Republic of the	Jordan
Antigua-Barbuda	Congo	Kazakhstan
Argentina	Denmark	Kenya
Armenia	Dominica	Korea
Australia	Dominican Republic	Kosovo
Austria	Ecuador	Kuwait
Azerbaijan	Egypt	Kyrgyzstan
Bahamas	El Salvador	Laos
Bahrain	Equatorial Guinea	Latvia
Bangladesh	Eritrea	Lebanon
Belarus	Estonia	Lesotho
Belgium	Ethiopia	Liberia
Belize	Federated States of	Libya
Benin	Micronesia	Lithuania
Bermuda	Fiji	Macau
Bhutan	Finland	Malaysia
Bolivia	France	Mali
Bosnia-Herzegovina	Gabon	Malta
Botswana	Gambia	Marshall Islands
Brazil	Georgia	Mauritania
British Virgin Islands	Germany	Mauritius
Bulgaria	Ghana	Mexico
Burkina Faso	Greece	Moldova
Burundi	Guadeloupe	Mongolia
Cambodia	Guatemala	Montenegro
Cameroon	Guinea	Morocco
Canada	Guinea-Bissau	Mozambique
Cape Verde	Guyana	Nepal
Cayman Islands	Haiti	Netherlands
Central African Republic	Honduras	Netherlands Antilles
Chad	Hong Kong	Nicaragua
Chile	Hungary	Niger
Christmas Island	Iceland	Nigeria
Colombia	India	North Korea
Comoros	Indonesia	North Macedonia
Congo	Iraq	Norway
Costa Rica	Ireland	Oman
Croatia	Israel	Pakistan
Cuba	Italy	Palau



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Panama	Somalia	Trinidad and Tobago
Paraguay	South Africa	Tunisia
Peoples Republic of China	South Korea	Turkey
Peru	South Sudan	Turkmenistan
Philippines	Spain	Turks and Caicos Islands
Poland	Sri Lanka	Uganda
Portugal	St. Kitts-Nevis	Ukraine
Romania	St. Lucia	United Arab Emirates
Russia	St. Vincent-Grenadines	United Kingdom
Rwanda	Sudan	Unknown
Saudi Arabia	Suriname	Uruguay
Senegal	Sweden	Union of Soviet Socialist
Serbia	Switzerland	Republics (USSR)
Sierra Leone	Syria	Uzbekistan
Singapore	Taiwan	Venezuela
Slovakia	Tajikistan	Vietnam
Slovenia	Tanzania	Yemen
Solomon Islands	Togo	Yugoslavia
	Tonga	Zambia
		Zimbabwe

**APPENDIX C: IHSC COVID-19 GUIDANCE**

In 2020, IHSC developed and issued guidance to its internal workforce and operations. In addition, IHSC collaborated with ERO components and other federal correctional health care partners to develop and disseminate guidance for the detained environment.

IHSC contributed to the following notable publications:

- ICE Enforcement and Removal Operations COVID-19 Pandemic Response Requirements.
- ICE Enforcement and Removal Operations COVID-19 Checklist.
- CDC Guidance for Correctional and Detention Facilities.

IHSC Broadcast Messages		
<i>Issue Date</i>	<i>Authority</i>	<i>Topic</i>
January 22	AD	Health Advisory: Coronavirus
January 23	DAD-CS	Interim Reference for Coronavirus
January 27	DAD-CS	Update: Interim Reference for Coronavirus, version 2
January 30	DAD-CS	Update: Interim Reference for Coronavirus
January 31	DAD-CS	Coronavirus Update: Revised Interim Reference Sheet, Personal Protective Equipment, and Additional Guidance, version 2
February 4	DAD-CS	Coronavirus Update: Revised Interim Reference Sheet, Personal Protective Equipment, and Additional Guidance
February 10	PHSP	Updated: Revised Interim Reference for Coronavirus, version 2.1
February 14	PHSP	Updated: Revised Interim Reference for Coronavirus, version 3
February 15	PHSP	Updated: Revised Interim Reference for Coronavirus, version 3.1
February 25	PHSP	Updated: Revised Interim Reference for Coronavirus, version 4
February 28	PHSP	Updated: Revised Interim Reference for Coronavirus, version 5
March 3	PHSP	Updated: Revised Interim Reference for Coronavirus, version 5.1
March 4	AD	IHSC Amidst Coronavirus (COVID-19)
March 5	AD	Coronavirus (COVID-19) Preventive Actions
March 6	PHSP	Update: Updated Interim Reference Sheet for Coronavirus, version 6
March 11	DAD-CS	Temperature Check Guidance
March 11	PHSP	Update: Updated Interim Reference Sheet for Coronavirus, version 7
March 12	CoS	Fake Online Coronavirus Map
March 15	AD	IHSC Amidst Coronavirus (COVID-19) – Update 2
March 17	CoS	PHS Deployment Guidance – Reporting Update
March 21	AD	Extended Use and Reuse of N95 Respirators
March 23	AD	Extended Use and Reuse of N95 Respirators – Guidance for All IHSC Staff
March 25	AD	Resilience in Times of Stress and National Emergency
March 26	CoS	PHS Deployment Guidance – Reporting Update
March 27	AD	Introducing the IHSC COVID-19 Response Mailbox
March 27	MEDU	All MEDU Non-Essential Training is Postponed or Canceled Until Further Notice
March 27	MEDU	Leading in the Midst of Crisis: Tip of the Week
March 28	PHSP	Update: Updated Interim Reference Sheet for Coronavirus, version 8
April 1	PHSP	Update: Updated Interim Reference Sheet for Coronavirus, version 9
April 6	PHSP	Update: Updated Interim Reference Sheet for Coronavirus, version 9.1
April 10	DAD-CS	Temperature Check Guidance
April 16	MEDU	COVID-19 Clinical Resources
April 20	DAD-CS	Changes in Temperature Check Guidance for Removals



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IHSC Broadcast Messages (continued)		
Issue Date	Authority	Topic
April 21	AD	IHSC Amidst Coronavirus (COVID-19) – Update 3
April 22	DAD-CS	Changes in Temperature Check Guidance for Transfers and Removals
April 24	PHSP	Revised Interim Reference Sheet and COVID-19 Resources, version 10
April 27	DAD-CS	IHSC Guidance on COVID-19 Point of Care Testing for Removals
May 11	CoS	ICE Employee Assistance Program Overview
May 12	DAD-CS	IHSC Guidance on COVID-19 Point of Care Testing for Detainee Removals, Revision 1
May 21	PHSP	Revised Interim Reference Sheet and COVID-19 Resources, version 11
May 28	CoS	Ethics During the COVID-19 Pandemic
May 30	PHSP	New and revised COVID-19 Resources, version 12
June 2	MSU	New COVID-19 Phased Re-Opening Framework for IHSC Dental Clinics
June 22	AD	Whole Facility Coronavirus Testing
June 24	DAD-CS	Interim Reference Sheet for Monitoring Potential and Known Detainees with Coronavirus Disease 2019 (COVID-19)
July 1	AD	Continued Vigilance Amidst COVID-19
July 13	DAD-CS	Interim Reference for Testing Staff for SARS-CoV-2 Infection
August 18	MEDU	New Webinar Series on COVID-19 in Correctional Facilities

ERO Broadcast Messages		
Issue Date	Authority	Topic
March 10	CMD AD	Interim Reference Sheet on 2019-Novel Coronavirus (COVID-19) [CMD]
March 21	CMD AD	COVID-19 Response Plan and Best Practices [CMD]
April 15	CMD AD	Facility Postings – COVID-19 Flyer for Detention Facilities [CMD]
May 4	CMD AD	COVID-19 Checklist for All ICE ERO Transfers, Removals, and Releases [CMD]
May 14	CMD AD	Updated Interim Reference Sheet on 2019-Novel Coronavirus (COVID-19) [CMD]
May 18	CMD AD	Revised COVID-19 Checklist for All ICE ERO Transfers, Removals, and Releases [CMD]
May 27	CMD AD	COVID-19 Testing Operational Plan [CMD]
June 3	IHSC AD	UPDATED: COVID-19 Screening and Cohorting Practices for New Arrival Detainees [IHSC]
June 24	CMD AD	Updated ERO Coronavirus Disease 2019 (COVID-19) Pandemic Response Requirements [CMD]
July 2	IHSC AD	Updated COVID-19 Screening and Cohorting Practices for New Arrival Detainees [IHSC]
July 7	IHSC AD	COVID-19 Checklist and Health Department Notifications for All ICE ERO Transfers, Removals, and Releases [IHSC]
July 27	IHSC AD	COVID-19 Checklist and Health Department Notifications for All ICE ERO Transfers, Removals, and Releases [IHSC]
July 27	FOD AD	COVID-19 Testing of ICE Officers Performing Escorted Removals via Commercial Airlines [FOD]
July 31	CMD AD	Updated ERO Coronavirus Disease 2019 (COVID-19) Pandemic Response Requirements v. 3.0
September 4	CMD AD	Updated ERO Coronavirus Disease 2019 (COVID-19) Pandemic Response Requirements v. 4.0 [CMD]
September 10	IHSC AD	Updated COVID-19 Screening and Cohorting Practices [IHSC]
September 18	CMD AD	LabCorp Test Kits [CMD]

**APPENDIX D: COMPONENT-SPECIFIC CONTRIBUTIONS TO IHSC COVID-19 RESPONSE**

CS Component	Contribution
Public Health, Safety, and Preparedness Unit	<ul style="list-style-type: none">Managed 1,166 unique cohorts affecting 59,784 beds and 36,052 detainees; adjudicated positive COVID-19 cases.Monitored, tracked, and reported COVID-19 statistics daily for all levels of ICE leadership; provided data to 32 state and local health departments.Developed IHSC facility care practices and issued guidance to IHSC and ERO staff; created and maintained 16 guidance documents for IHSC.Created a COVID-19 tracking system for ICE detainees across the health care system; trained 32 field medical coordinators to use it to track cases and cohorts in contract detention facilities.Created a central IHSC COVID-19 resource webpage for guidance and near real-time data.
Medical Services Unit	<ul style="list-style-type: none">Facilitated coordination meetings for IHSC facility and HQ staff to share critical information.Supported guidance development for the IHSC Hotel Operation.Developed and issued guidance for IHSC and non-IHSC dental clinics to standardize clinical practice, mitigate exposure for patients and staff, and maintain access to care.Championed use of decontamination services for medical masks to assure adequate availability and maintenance of personal protective supplies for clinical staff.Implemented pharmacy contingency plans to ensure uninterrupted therapies.
Psychiatry Services Unit	<ul style="list-style-type: none">Provided telepsychiatry services for 10 facilities.

HSS Component	Contribution
Health Operations Unit	<ul style="list-style-type: none">Led IHSC plans and implementation of IHSC COVID-19 plans to test entire facilities (saturation testing).Trained ICE and contract detention facilities to use COVID-19 Abbot ID Now equipment.Obtained over 19,000 test kits and 35 test machines.Implemented the IHSC Hotel Operation (IHOP) mission.Managed personal protective equipment for IHSC facilities.
IHSC Special Operations Unit	<ul style="list-style-type: none">Continued to support removals during the COVID-19 pandemic.

HCC Component	Contribution
Medical Case Management Unit	<ul style="list-style-type: none">Field medical coordinators liaised with over 100 non-IHSC-staffed facilities, ICE/ERO, and IHSC to track exposed detainees, positive cases, and cohorted detainees.Coordinated with HSS Division to conduct rapid COVID-testing at non-IHSC-staffed facilities, as well as saturation and intake testing at multiple IGSA's, to ensure compliance with training, tracking, and reporting requirements.Completed over 3,000 hours of staff support for the IHSC Hotel Operation mission.
Medical Quality Management Unit	<ul style="list-style-type: none">Established and implemented a COVID-19 mitigation plan for all compliance programs.



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Admin Component	Contribution
Records and Information Management Unit	<ul style="list-style-type: none">• The partnered with Clinical Services Division to create and continually update the COVID-19 Intake Form in tandem with evolving CDC and IHSC guidance.
Data Analytics Office	<ul style="list-style-type: none">• Developed a dashboard and weekly COVID-19 reports for IHSC and ERO leadership.
Medical Education Development Unit	<ul style="list-style-type: none">• Upgraded web conferencing capability by 50% to support employee telework and over 134 remote meetings attended by over 2,400 participants.

OCoS Component	Contribution
IHSC Communications Unit	<ul style="list-style-type: none">• Facilitated mass communications with the IHSC workforce on behalf of senior leadership to provide informational updates, guidance, and direction throughout the pandemic.• Coordinated monthly Town Hall meetings since April 2020 to keep the IHSC workforce informed and address concerns during the pandemic.• Developed new SharePoint-based tools for COVID-19 data tracking, monitoring, and reporting.
Taskings and Program Support Unit	<ul style="list-style-type: none">• Initiated emergency alerts to notify staff of IHSC continuity of operation plan activation.• Liaised with ERO to relay multiple daily COVID-19 reports and respond to hundreds of COVID-19 related requests for information on behalf of IHSC.



APPENDIX E: IHSC BUDGET

Budget Item	FY20 Actuals	FY21 Projections	Description
GS Personnel	3,652,018.24	3,834,619.00	Civilian payroll
PHS Personnel	54,077,627.93	55,699,957.00	Salaries and benefits for PHS Commissioned Corps officers
Contract Medical Personnel	126,829,892.49	124,865,784.40	Medical staffing contract
Household Good Moves	2,232,611.10	2,299,589.43	Average \$38K per officer
Veterans Administration Service Level Agreement	103,156,034.00	100,889,605.20	VAFC for off-site referrals care and medical claims processing
Information Technology	6,605,508.23	5,778,203.65	ICE Office of the Chief Information Officer Service Level Agreement. Includes electronic health record, contracts, Azure Cloud support, licenses, policy documenting system, TRAIN platform.
CDC Interagency Agreement	750,000.00	600,000.00	Referral and tracking of TB cases.
Correct Care Services	3,650,000.00	2,000,000.00	Behavioral inpatient services at Columbia Care
Language Services	2,200,000.00	2,266,000.00	Language interpretation and translation services
Pharmalogistics	50,000.00	50,000.00	Pharmaceutical return services, waste collection, removal, disposal
Teleradiology	1,600,200.00	1,600,200.00	Radiology Services
Dosimetry	12,580.08	13,209.72	Equipment, monitor/report radiation exposure
Medical Supplies BPA	1,560,000.00	1,560,000.00	Provides medical supplies to all sites
Sirona Dental Sensors	17,940.00	17,940.00	Annual renewal - Schick CDR X-Ray sensors at 12 IHSC-staffed facilities
LabCorp	2,280,724.32	2,349,146.00	Laboratory Services (collection, analysis, and interpretation)
LabCorp (COVID-19 Testing)	1,282,932.00	1,282,932.00	COVID-19 equipment, testing, and analysis
Biohazard Medical Waste	237,803.04	208,576.18	Medical Waste Collection and Disposal Services
Accreditation	62,028.00	67,160.00	NCCHC accreditation for 20 IHSC-staffed facilities
Data Analytics	980,175.53	989,977.27	Contract support for data analytics operations
Deloitte	941,955.30	670,725.00	Healthcare and medical analytic services
Medical Trailers	617,575.00	-	Repairs of medical and dental trailers located at T. Don Hutto, 6-month
Travel	1,581,000.00	1,630,000.00	Mission essential travel
Purchase Cards-Citibank	654,509.03	674,144.30	Consumables, annual certification fees, micro-purchases, training
Other Expenses	64,955.00	-	Miscellaneous (IT equipment, contactless thermometers, oral cameras)
Total	\$ 315,098,069.29	\$ 309,347,769.15	



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APPENDIX F: FY2020 Detailed Costs by Diagnosis

High Level Diagnosis Group	Granular Diagnosis Group	Total Paid Amount
Certain Infectious and Parasitic Diseases	Other Sepsis	\$400,918.81
Certain Infectious and Parasitic Diseases	Respiratory Tuberculosis	\$164,446.15
Certain Infectious and Parasitic Diseases	Human Immunodeficiency Virus [HIV] Disease	\$95,560.41
Certain Infectious and Parasitic Diseases	Zoster [Herpes Zoster]	\$30,407.11
Certain Infectious and Parasitic Diseases	Varicella [Chickenpox]	\$24,230.88
Certain Infectious and Parasitic Diseases	Viral Infection of Unspecified Site	\$17,011.45
Certain Infectious and Parasitic Diseases	Tuberculosis of Other Organs	\$15,484.09
Certain Infectious and Parasitic Diseases	Other Acute Viral Hepatitis	\$13,576.47
Certain Infectious and Parasitic Diseases	Unspecified Viral Hepatitis	\$11,344.67
Certain Infectious and Parasitic Diseases	Other Predominately Sexually Transmitted Diseases, Not Elsewhere Classified	\$10,397.15
	Total	\$783,377.19
Codes for Special Purposes	Conditions of Uncertain Etiology (Includes COVID)	\$350,058.82
	Total	\$350,058.82
Diseases of the Blood and Blood-forming Organs	Iron Deficiency Anemia	\$48,606.81
Diseases of the Blood and Blood-forming Organs	Other Anemias	\$27,333.84
Diseases of the Blood and Blood-forming Organs	Sickle-cell Disorders	\$9,151.48
Diseases of the Blood and Blood-forming Organs	Other Disorders of White Blood Cells	\$6,716.06
Diseases of the Blood and Blood-forming Organs	Acquired Hemolytic Anemia	\$6,179.07
Diseases of the Blood and Blood-forming Organs	Other Aplastic Anemias and Other Bone Marrow Failure Syndromes	\$3,073.67
Diseases of the Blood and Blood-forming Organs	Purpura and Other Hemorrhagic Conditions	\$2,282.97
Diseases of the Blood and Blood-forming Organs	Other Immunodeficiencies	\$1,659.26
Diseases of the Blood and Blood-forming Organs	Sarcoidosis	\$1,125.14
Diseases of the Blood and Blood-forming Organs	Methemoglobinemia	\$922.35
	Total	\$107,050.65
Diseases of the Circulatory System	Chronic Ischemic Heart Disease	\$227,759.88
Diseases of the Circulatory System	Acute Myocardial Infarction	\$188,494.14
Diseases of the Circulatory System	Angina Pectoris	\$136,414.86
Diseases of the Circulatory System	Essential (Primary) Hypertension	\$127,406.37
Diseases of the Circulatory System	Hypertensive Chronic Kidney Disease	\$110,296.04
Diseases of the Circulatory System	Hypertensive Crisis	\$102,098.55
Diseases of the Circulatory System	Cerebral Infarction	\$100,830.89
Diseases of the Circulatory System	Atrial Fibrillation and Flutter	\$69,642.93
Diseases of the Circulatory System	Hypertensive Heart and Chronic Kidney Disease	\$69,571.65
Diseases of the Circulatory System	Pulmonary Embolism	\$37,348.19
	Total	\$1,169,863.50
Diseases of the Digestive System	Acute Appendicitis	\$336,495.69
Diseases of the Digestive System	Cholelithiasis	\$322,605.65
Diseases of the Digestive System	Inguinal Hernia	\$122,187.73
Diseases of the Digestive System	Gastritis and Duodenitis	\$67,039.00
Diseases of the Digestive System	Other Diseases of Digestive System	\$61,726.78
Diseases of the Digestive System	Cholecystitis	\$56,848.17
Diseases of the Digestive System	Ventral Hernia	\$43,834.05
Diseases of the Digestive System	Other Diseases of Liver	\$40,436.59
Diseases of the Digestive System	Other Functional Intestinal Disorders	\$35,040.78
Diseases of the Digestive System	Other and Unspecified Noninfective Gastroenteritis and Colitis	\$27,441.88
	Total	\$1,113,656.32



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High Level Diagnosis Group	Granular Diagnosis Group	Total Paid Amount
Diseases of the Eye and Adnexa	Disorders of Refraction and Accommodation	\$195,026.77
Diseases of the Eye and Adnexa	Glaucoma	\$42,917.75
Diseases of the Eye and Adnexa	Age-related Cataract	\$23,792.49
Diseases of the Eye and Adnexa	Other Disorders of Conjunctiva	\$18,148.67
Diseases of the Eye and Adnexa	Blindness and Low Vision	\$13,573.55
Diseases of the Eye and Adnexa	Other Disorders of Optic [2nd] Nerve and Visual Pathways	\$11,341.54
Diseases of the Eye and Adnexa	Visual Disturbances	\$10,950.31
Diseases of the Eye and Adnexa	Other Disorders of Lens	\$9,268.81
Diseases of the Eye and Adnexa	Disorders of Lacrimal System	\$9,259.79
Diseases of the Eye and Adnexa	Retinal Detachments and Breaks	\$9,135.14
	Total	\$343,414.82
Diseases of the Genitourinary System	Calculus of Kidney and Ureter	\$85,821.64
Diseases of the Genitourinary System	Chronic Kidney Disease (CKD)	\$74,672.37
Diseases of the Genitourinary System	Noninflammatory Disorders of Ovary, Fallopian Tube and Broad Ligament	\$73,634.55
Diseases of the Genitourinary System	Excessive, Frequent and Irregular Menstruation	\$65,152.77
Diseases of the Genitourinary System	Orchitis and Epididymitis	\$57,250.01
Diseases of the Genitourinary System	Benign Prostatic Hyperplasia	\$54,228.18
Diseases of the Genitourinary System	Other Disorders of Urinary System	\$49,594.52
Diseases of the Genitourinary System	Urethral Stricture	\$46,535.89
Diseases of the Genitourinary System	Obstructive and Reflux Uropathy	\$39,429.39
Diseases of the Genitourinary System	Other and Unspecified Disorders of Male Genital Organs	\$22,617.43
	Total	\$568,936.75
Diseases of the Musculoskeletal System and Connective Tissue	Other Joint Disorder, Not Elsewhere Classified	\$164,659.07
Diseases of the Musculoskeletal System and Connective Tissue	Dorsalgia	\$113,538.60
Diseases of the Musculoskeletal System and Connective Tissue	Other and Unspecified Soft Tissue Disorders, Not Elsewhere Classified	\$101,917.50
Diseases of the Musculoskeletal System and Connective Tissue	Osteomyelitis	\$48,167.24
Diseases of the Musculoskeletal System and Connective Tissue	Other Inflammatory Spondylopathies	\$46,770.48
Diseases of the Musculoskeletal System and Connective Tissue	Thoracic, Thoracolumbar, and Lumbosacral Intervertebral Disc Disorders	\$44,872.04
Diseases of the Musculoskeletal System and Connective Tissue	Other Disorders of Muscle	\$39,233.19
Diseases of the Musculoskeletal System and Connective Tissue	Shoulder Lesions	\$37,421.20
Diseases of the Musculoskeletal System and Connective Tissue	Pyogenic Arthritis	\$35,499.53
Diseases of the Musculoskeletal System and Connective Tissue	Soft Tissue Disorders Related to Use, Overuse and Pressure	\$34,666.39
	Total	\$666,745.24
Diseases of the Nervous System and Sense Organs	Epilepsy and Recurrent Seizures	\$208,193.89
Diseases of the Nervous System and Sense Organs	Other Disorders of Brain	\$43,482.84
Diseases of the Nervous System and Sense Organs	Migraine	\$29,744.13
Diseases of the Nervous System and Sense Organs	Facial Nerve Disorders	\$27,213.18
Diseases of the Nervous System and Sense Organs	Inflammatory Polyneuropathy	\$19,651.85
Diseases of the Nervous System and Sense Organs	Sleep Disorders	\$17,622.16
Diseases of the Nervous System and Sense Organs	Pain, Not Elsewhere Classified	\$16,298.59
Diseases of the Nervous System and Sense Organs	Other Headache Syndromes	\$12,242.70
Diseases of the Nervous System and Sense Organs	Paraplegia (Paraparesis) and Quadriplegia (Quadriparesis)	\$8,423.46
Diseases of the Nervous System and Sense Organs	Other Paralytic Syndromes	\$7,901.52
	Total	\$390,774.32



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High Level Diagnosis Group	Granular Diagnosis Group	Total Paid Amount
Diseases of the Respiratory System	Pneumonia, Unspecified Organism	\$150,163.26
Diseases of the Respiratory System	Respiratory Failure, Not Elsewhere Classified	\$76,589.94
Diseases of the Respiratory System	Bacterial Pneumonia, Not Elsewhere Classified	\$51,160.13
Diseases of the Respiratory System	Influenza Due to Other Identified Influenza Virus	\$45,536.79
Diseases of the Respiratory System	Viral Pneumonia, Not Elsewhere Classified	\$33,701.11
Diseases of the Respiratory System	Acute Pharyngitis	\$18,925.54
Diseases of the Respiratory System	Influenza Due to Unidentified Influenza Virus	\$17,069.56
Diseases of the Respiratory System	Other Chronic Obstructive Pulmonary Disease	\$16,738.93
Diseases of the Respiratory System	Pleural Effusion, Not Elsewhere Classified	\$13,737.37
Diseases of the Respiratory System	Pneumonia Due to Streptococcus Pneumoniae	\$11,317.08
	Total	\$434,939.71
Diseases of the Skin and Subcutaneous Tissue	Cellulitis and Acute Lymphangitis	\$286,057.98
Diseases of the Skin and Subcutaneous Tissue	Cutaneous Abscess, Furuncle and Carbuncle	\$131,940.31
Diseases of the Skin and Subcutaneous Tissue	Pressure Ulcer	\$32,475.45
Diseases of the Skin and Subcutaneous Tissue	Granulomatous Disorders of Skin and Subcutaneous Tissue	\$23,105.38
Diseases of the Skin and Subcutaneous Tissue	Urticaria	\$10,815.47
Diseases of the Skin and Subcutaneous Tissue	Pilonidal Cyst and Sinus	\$10,011.77
Diseases of the Skin and Subcutaneous Tissue	Non-pressure Chronic Ulcer of Lower Limb, Not Elsewhere Classified	\$9,449.21
Diseases of the Skin and Subcutaneous Tissue	Psoriasis	\$8,410.98
Diseases of the Skin and Subcutaneous Tissue	Nail Disorders	\$5,445.07
Diseases of the Skin and Subcutaneous Tissue	Follicular Cysts of Skin and Subcutaneous Tissue	\$5,373.02
	Total	\$523,084.64
Endocrine, Nutritional and Metabolic Diseases, and Immunity Disorders	Type 2 Diabetes Mellitus	\$151,487.34
Endocrine, Nutritional and Metabolic Diseases, and Immunity Disorders	Volume Depletion	\$97,162.46
Endocrine, Nutritional and Metabolic Diseases, and Immunity Disorders	Other Disorders of Fluid, Electrolyte, and Acid-base Balance	\$67,723.43
Endocrine, Nutritional and Metabolic Diseases, and Immunity Disorders	Other Nontoxic Goiter	\$60,259.33
Endocrine, Nutritional and Metabolic Diseases, and Immunity Disorders	Type 1 Diabetes Mellitus	\$31,492.03
Endocrine, Nutritional and Metabolic Diseases, and Immunity Disorders	Hyperfunction of Pituitary Gland	\$19,016.68
Endocrine, Nutritional and Metabolic Diseases, and Immunity Disorders	Disorders of Lipoprotein Metabolism and Other Lipidemias	\$18,944.28
Endocrine, Nutritional and Metabolic Diseases, and Immunity Disorders	Other Hypothyroidism	\$8,396.53
Endocrine, Nutritional and Metabolic Diseases, and Immunity Disorders	Overweight and Obesity	\$7,795.80
Endocrine, Nutritional and Metabolic Diseases, and Immunity Disorders	Other Disorders of Pancreatic Internal Secretion	\$7,065.79
	Total	\$469,343.67



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High Level Diagnosis Group	Granular Diagnosis Group	Total Paid Amount
Factors Influencing Health Status and Contact with Health Services	Encounter for Screening for Infectious and Parasitic Diseases	\$1,795,166.20
Factors Influencing Health Status and Contact with Health Services	Encounter for Other Special Examination without Complaint, Suspected, or Reported Diagnosis	\$954,772.39
Factors Influencing Health Status and Contact with Health Services	Encounter for General Examination without Complaint, Suspected, or Reported Diagnosis	\$315,974.32
Factors Influencing Health Status and Contact with Health Services	Orthopedic Aftercare	\$208,193.11
Factors Influencing Health Status and Contact with Health Services	Encounter for Other Postprocedural Aftercare	\$50,574.91
Factors Influencing Health Status and Contact with Health Services	Encounter for Screening for Other Diseases and Disorders	\$49,103.23
Factors Influencing Health Status and Contact with Health Services	Contact with and (Suspected) Exposure to Communicable Diseases	\$39,234.74
Factors Influencing Health Status and Contact with Health Services	Acquired Absence of Limb	\$35,009.19
Factors Influencing Health Status and Contact with Health Services	Encounter for Other Prophylactic Measures	\$21,889.11
Factors Influencing Health Status and Contact with Health Services	Encounter for Screening for Malignant Neoplasms	\$19,760.30
	Total	\$3,489,677.50
Injury and Poisoning	Fracture of Lower Leg, Including Ankle	\$207,268.88
Injury and Poisoning	Effects of Other Deprivation	\$192,518.02
Injury and Poisoning	Intracranial Injury	\$82,543.26
Injury and Poisoning	Complications of Procedures, Not Elsewhere Classified	\$82,359.78
Injury and Poisoning	Fracture of Forearm	\$65,118.60
Injury and Poisoning	Fracture of Foot and Toe, Except Ankle	\$57,630.50
Injury and Poisoning	Other and Unspecified Injuries of Head	\$55,285.97
Injury and Poisoning	Dislocation and Sprain of Joints and Ligaments at Ankle, Foot and Toe Level	\$53,790.65
Injury and Poisoning	Fracture of Skull and Facial Bones	\$50,136.06
Injury and Poisoning	Complications of Cardiac and Vascular Prosthetic Devices, Implants and Grafts	\$49,066.73
	Total	\$895,718.45
Mental Disorders	Schizoaffective Disorders	\$618,042.77
Mental Disorders	Schizophrenia	\$565,943.43
Mental Disorders	Major Depressive Disorder, Recurrent	\$458,776.43
Mental Disorders	Major Depressive Disorder, Single Episode	\$332,751.05
Mental Disorders	Bipolar Disorder	\$196,233.09
Mental Disorders	Opioid Related Disorders	\$146,126.40
Mental Disorders	Alcohol Related Disorders	\$127,393.37
Mental Disorders	Unspecified Psychosis Not Due to a Substance or Known Physiological Condition	\$119,707.30
Mental Disorders	Reaction to Severe Stress, and Adjustment Disorders	\$58,300.13
Mental Disorders	Other Psychotic Disorder Not Due to a Substance or Known Physiological Condition	\$41,686.13
	Total	\$2,664,960.10



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High Level Diagnosis Group	Granular Diagnosis Group	Total Paid Amount
Neoplasms	Leiomyoma of Uterus	\$59,013.81
Neoplasms	Other Specified Types of T/NK-Cell Lymphoma	\$55,483.22
Neoplasms	Non-follicular Lymphoma	\$39,099.27
Neoplasms	Malignant Neoplasm of Liver and Intrahepatic Bile Ducts	\$26,677.03
Neoplasms	Benign Neoplasm of Colon, Rectum, Anus, and Anal Canal	\$19,556.78
Neoplasms	Malignant Neoplasm of Thyroid Gland	\$14,852.46
Neoplasms	Secondary Malignant Neoplasm of Other and Unspecified Sites	\$10,406.50
Neoplasms	Carcinoma in Situ of Cervix Uteri	\$10,390.12
Neoplasms	Malignant Neoplasm of Prostate	\$8,661.07
Neoplasms	Benign Lipomatous Neoplasm	\$7,732.92
	Total	\$251,873.18
Supplementary Classification of Factors Influencing Health Status and Contact with Health Services	Occupant of Heavy Transport Vehicle Injured in Noncollision Transport Accident	\$174,968.12
Supplementary Classification of Factors Influencing Health Status and Contact with Health Services	Bus Occupant Injured in Collision with Two- or Three-wheeled Motor Vehicle	\$5,665.67
	Total	\$180,633.79
Symptoms, Signs, and Ill-Defined Conditions	Pain in Throat and Chest	\$634,873.38
Symptoms, Signs, and Ill-Defined Conditions	Abdominal and Pelvic Pain	\$333,483.26
Symptoms, Signs, and Ill-Defined Conditions	Illness, Unspecified	\$256,735.06
Symptoms, Signs, and Ill-Defined Conditions	Syncope and Collapse	\$120,560.59
Symptoms, Signs, and Ill-Defined Conditions	Other Abnormal Immunological Findings in Serum	\$90,503.61
Symptoms, Signs, and Ill-Defined Conditions	Convulsions, Not Elsewhere Classified	\$85,064.55
Symptoms, Signs, and Ill-Defined Conditions	Abnormal Findings on Diagnostic Imaging of Lung	\$81,529.84
Symptoms, Signs, and Ill-Defined Conditions	Abnormalities of Breathing	\$69,953.06
Symptoms, Signs, and Ill-Defined Conditions	Headache	\$54,536.50
Symptoms, Signs, and Ill-Defined Conditions	Localized Swelling, Mass and Lump of Skin and Subcutaneous Tissue	\$49,696.64
	Total	\$1,776,936.49
Support Ancillary Services	Bulk Pharmacy	\$14,987,744.00
Support Ancillary Services	Language Services	\$96,857.00
Support Ancillary Services	Medical Supplies	\$4,752.00
	Total	\$15,089,353.00
	FY2020 Grand Total	\$31,270,398.14



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APPENDIX F: FY2019 Detailed Costs by Diagnosis

High Level Diagnosis Group	Granular Diagnosis Group	Total Paid Amount
Certain Infectious and Parasitic Diseases	Other Sepsis	\$1,134,750.92
Certain Infectious and Parasitic Diseases	Respiratory Tuberculosis	\$293,284.87
Certain Infectious and Parasitic Diseases	Human Immunodeficiency Virus [HIV] Disease	\$143,025.70
Certain Infectious and Parasitic Diseases	Coccidioidomycosis	\$47,974.62
Certain Infectious and Parasitic Diseases	Varicella [Chickenpox]	\$37,712.37
Certain Infectious and Parasitic Diseases	Mumps	\$35,419.08
Certain Infectious and Parasitic Diseases	Candidiasis	\$25,480.05
Certain Infectious and Parasitic Diseases	Chronic Viral Hepatitis	\$23,303.35
Certain Infectious and Parasitic Diseases	Viral and Other Specified Intestinal Infections	\$19,716.23
Certain Infectious and Parasitic Diseases	Viral Meningitis	\$18,683.29
	Total	\$1,779,350.48
Complications of Pregnancy, Childbirth, and the Puerperium	Spontaneous Abortion	\$44,606.81
Complications of Pregnancy, Childbirth, and the Puerperium	Maternal Care for Other Conditions Predominantly Related to Pregnancy	\$30,729.07
Complications of Pregnancy, Childbirth, and the Puerperium	Hemorrhage in Early Pregnancy	\$29,601.03
Complications of Pregnancy, Childbirth, and the Puerperium	Infections of Genitourinary Tract in Pregnancy	\$28,959.54
Complications of Pregnancy, Childbirth, and the Puerperium	Extopic Pregnancy	\$21,768.93
Complications of Pregnancy, Childbirth, and the Puerperium	Other Maternal Diseases Classifiable Elsewhere but Complicating Pregnancy, Childbirth and the Puerperium	\$19,420.82
Complications of Pregnancy, Childbirth, and the Puerperium	Supervision of High Risk Pregnancy	\$15,891.44
Complications of Pregnancy, Childbirth, and the Puerperium	Antepartum Hemorrhage, Not Elsewhere Classified	\$12,203.27
Complications of Pregnancy, Childbirth, and the Puerperium	Preterm Labor	\$7,361.51
Complications of Pregnancy, Childbirth, and the Puerperium	Excessive Vomiting in Pregnancy	\$6,060.50
	Total	\$216,602.92
Congenital Anomalies	Other Congenital Malformations of Circulatory System	\$26,154.03
Congenital Anomalies	Other Congenital Malformations, Not Elsewhere Classified	\$20,584.05
Congenital Anomalies	Other Congenital Malformations of Face and Neck	\$20,418.52
Congenital Anomalies	Other Congenital Malformations of Limb(s)	\$16,424.74
Congenital Anomalies	Congenital Musculoskeletal Deformities of Head, Face, Spine and Chest	\$6,942.15
Congenital Anomalies	Other Congenital Malformations of Peripheral Vascular System	\$3,052.69
Congenital Anomalies	Congenital Malformations of Cardiac Septa	\$2,990.27
Congenital Anomalies	Other Congenital Malformations of Heart	\$1,794.23
Congenital Anomalies	Undescended and Ectopic Testicle	\$1,101.76
Congenital Anomalies	Congenital Malformations of Spine and Bony Thorax	\$688.63
	Total	\$100,151.07
Diseases of the Blood and Blood-forming Organs	Other Aplastic Anemias and Other Bone Marrow Failure Syndromes	\$233,490.44
Diseases of the Blood and Blood-forming Organs	Sickle-cell Disorders	\$69,682.15
Diseases of the Blood and Blood-forming Organs	Iron Deficiency Anemia	\$49,959.32
Diseases of the Blood and Blood-forming Organs	Other Anemias	\$44,306.39
Diseases of the Blood and Blood-forming Organs	Purpura and Other Hemorrhagic Conditions	\$44,230.15
Diseases of the Blood and Blood-forming Organs	Neutropenia	\$19,309.20
Diseases of the Blood and Blood-forming Organs	Hereditary Factor VIII Deficiency	\$18,433.77
Diseases of the Blood and Blood-forming Organs	Other Disorders of White Blood Cells	\$15,887.37
Diseases of the Blood and Blood-forming Organs	Sarcoidosis	\$11,017.90
Diseases of the Blood and Blood-forming Organs	Other Coagulation Defects	\$10,682.73
	Total	\$516,999.42



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High Level Diagnosis Group	Granular Diagnosis Group	Total Paid Amount
Diseases of the Circulatory System	Nontraumatic Intracerebral Hemorrhage	\$300,878.88
Diseases of the Circulatory System	Essential (Primary) Hypertension	\$228,089.16
Diseases of the Circulatory System	Hypertensive Chronic Kidney Disease	\$221,646.80
Diseases of the Circulatory System	Hypertensive Crisis	\$188,306.46
Diseases of the Circulatory System	Chronic Ischemic Heart Disease	\$157,754.22
Diseases of the Circulatory System	Atrial Fibrillation and Flutter	\$145,701.12
Diseases of the Circulatory System	Acute Myocardial Infarction	\$116,166.86
Diseases of the Circulatory System	Nontraumatic Subarachnoid Hemorrhage	\$101,229.88
Diseases of the Circulatory System	Acute and Subacute Endocarditis	\$90,458.60
Diseases of the Circulatory System	Cerebral Infarction	\$83,914.46
	Total	\$1,634,146.44
Diseases of the Digestive System	Acute Appendicitis	\$610,443.08
Diseases of the Digestive System	Cholelithiasis	\$541,095.44
Diseases of the Digestive System	Inguinal Hernia	\$292,895.57
Diseases of the Digestive System	Gastritis and Duodenitis	\$111,903.66
Diseases of the Digestive System	Acute Pancreatitis	\$83,974.84
Diseases of the Digestive System	Cholecystitis	\$80,833.51
Diseases of the Digestive System	Duodenal Ulcer	\$79,870.94
Diseases of the Digestive System	Intraoperative and Postprocedural Complications and Disorders of Digestive System, Not Elsewhere Classified	\$78,922.59
Diseases of the Digestive System	Fibrosis and Cirrhosis of Liver	\$76,904.53
Diseases of the Digestive System	Alcoholic Liver Disease	\$67,862.61
	Total	\$5,292,999.65
Diseases of the Eye and Adnexa	Disorders of Refraction and Accommodation	\$188,333.82
Diseases of the Eye and Adnexa	Glaucoma	\$75,549.44
Diseases of the Eye and Adnexa	Age-related Cataract	\$53,372.27
Diseases of the Eye and Adnexa	Retinal Detachments and Breaks	\$46,899.21
Diseases of the Eye and Adnexa	Visual Disturbances	\$39,197.72
Diseases of the Eye and Adnexa	Blindness and Low Vision	\$20,123.29
Diseases of the Eye and Adnexa	Other Disorders of Conjunctiva	\$20,008.96
Diseases of the Eye and Adnexa	Other Cataract	\$15,887.38
Diseases of the Eye and Adnexa	Other Retinal Disorders	\$15,645.92
Diseases of the Eye and Adnexa	Other Disorders of Eye and Adnexa	\$14,743.69
	Total	\$489,761.70
Diseases of the Genitourinary System	Obstructive and Reflux Uropathy	\$184,497.13
Diseases of the Genitourinary System	Chronic Kidney Disease (CKD)	\$149,544.73
Diseases of the Genitourinary System	Acute Kidney Failure	\$147,953.57
Diseases of the Genitourinary System	Other Disorders of Urinary System	\$126,570.97
Diseases of the Genitourinary System	Calculus of Kidney and Ureter	\$125,947.66
Diseases of the Genitourinary System	Noninflammatory Disorders of Ovary, Fallopian Tube and Broad Ligament	\$66,752.11
Diseases of the Genitourinary System	Orchitis and Epididymitis	\$60,347.82
Diseases of the Genitourinary System	Other and Unspecified Disorders of Male Genital Organs	\$57,637.76
Diseases of the Genitourinary System	Excessive, Frequent and Irregular Menstruation	\$55,286.31
Diseases of the Genitourinary System	Benign Prostatic Hyperplasia	\$47,344.54
	Total	\$1,021,882.60
Diseases of the Musculoskeletal System and Connective Tissue	Other Joint Disorder, Not Elsewhere Classified	\$317,881.92
Diseases of the Musculoskeletal System and Connective Tissue	Osteomyelitis	\$194,675.54
Diseases of the Musculoskeletal System and Connective Tissue	Dorsalgia	\$189,183.15
Diseases of the Musculoskeletal System and Connective Tissue	Other Disorders of Muscle	\$156,948.12
Diseases of the Musculoskeletal System and Connective Tissue	Other and Unspecified Soft Tissue Disorders, Not Elsewhere Classified	\$141,027.81
Diseases of the Musculoskeletal System and Connective Tissue	Thoracic, Thoracolumbar, and Lumbosacral Intervertebral Disc Disorders	\$72,107.16
Diseases of the Musculoskeletal System and Connective Tissue	Cervical Disc Disorders	\$27,029.13
Diseases of the Musculoskeletal System and Connective Tissue	Osteoarthritis of Knee	\$22,429.18
Diseases of the Musculoskeletal System and Connective Tissue	Other Inflammatory Spondylopathies	\$21,531.09
Diseases of the Musculoskeletal System and Connective Tissue	Shoulder Lesions	\$21,480.20
	Total	\$1,164,293.30



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High Level Diagnosis Group	Granular Diagnosis Group	Total Paid Amount
Diseases of the Nervous System and Sense Organs	Epilepsy and Recurrent Seizures	\$267,406.12
Diseases of the Nervous System and Sense Organs	Multiple Sclerosis	\$52,102.14
Diseases of the Nervous System and Sense Organs	Other Disorders of Brain	\$51,422.45
Diseases of the Nervous System and Sense Organs	Secondary Parkinsonism	\$45,725.61
Diseases of the Nervous System and Sense Organs	Pain, Not Elsewhere Classified	\$40,117.52
Diseases of the Nervous System and Sense Organs	Transient Cerebral Ischemic Attacks and Related Syndromes	\$33,559.87
Diseases of the Nervous System and Sense Organs	Migraine	\$29,658.16
Diseases of the Nervous System and Sense Organs	Sleep Disorders	\$16,989.12
Diseases of the Nervous System and Sense Organs	Facial Nerve Disorders	\$13,839.54
Diseases of the Nervous System and Sense Organs	Encephalitis, Myelitis, and Encephalomyelitis	\$13,348.20
	Total	\$564,168.73
Diseases of the Respiratory System	Pneumonia, Unspecified Organism	\$249,505.96
Diseases of the Respiratory System	Influenza Due to Other Identified Influenza Virus	\$133,188.54
Diseases of the Respiratory System	Viral Pneumonia, Not Elsewhere Classified	\$95,236.96
Diseases of the Respiratory System	Pleural Effusion, Not Elsewhere Classified	\$81,183.32
Diseases of the Respiratory System	Other Chronic Obstructive Pulmonary Disease	\$60,501.17
Diseases of the Respiratory System	Bronchiectasis	\$60,235.11
Diseases of the Respiratory System	Bacterial Pneumonia, Not Elsewhere Classified	\$51,723.01
Diseases of the Respiratory System	Asthma	\$50,538.74
Diseases of the Respiratory System	Acute Upper Respiratory Infections of Multiple and Unspecified Sites	\$46,294.65
Diseases of the Respiratory System	Other Interstitial Pulmonary Diseases	\$44,805.62
	Total	\$873,213.08
Diseases of the Skin and Subcutaneous Tissue	Cellulitis and Acute Lymphangitis	\$449,323.76
Diseases of the Skin and Subcutaneous Tissue	Cutaneous Abscess, Furuncle and Carbuncle	\$304,470.74
Diseases of the Skin and Subcutaneous Tissue	Non-pressure Chronic Ulcer of Lower Limb, Not Elsewhere Classified	\$38,266.54
Diseases of the Skin and Subcutaneous Tissue	Follicular Cysts of Skin and Subcutaneous Tissue	\$18,724.42
Diseases of the Skin and Subcutaneous Tissue	Pilonidal Cyst and Sinus	\$18,549.49
Diseases of the Skin and Subcutaneous Tissue	Dermatitis Due to Substances Taken Internally	\$16,390.09
Diseases of the Skin and Subcutaneous Tissue	Acute Lymphadenitis	\$13,437.72
Diseases of the Skin and Subcutaneous Tissue	Other Follicular Disorders	\$11,693.60
Diseases of the Skin and Subcutaneous Tissue	Nail Disorders	\$8,820.44
Diseases of the Skin and Subcutaneous Tissue	Other Local Infections of Skin and Subcutaneous Tissue	\$4,699.08
	Total	\$884,375.88
Endocrine, Nutritional and Metabolic Diseases, and Immunity Disorders	Type 2 Diabetes Mellitus	\$481,796.19
Endocrine, Nutritional and Metabolic Diseases, and Immunity Disorders	Other Disorders of Fluid, Electrolyte, and Acid-base Balance	\$120,607.74
Endocrine, Nutritional and Metabolic Diseases, and Immunity Disorders	Volume Depletion	\$100,206.86
Endocrine, Nutritional and Metabolic Diseases, and Immunity Disorders	Type 1 Diabetes Mellitus	\$53,395.23
Endocrine, Nutritional and Metabolic Diseases, and Immunity Disorders	Hyperfunction of Pituitary Gland	\$22,840.11
Endocrine, Nutritional and Metabolic Diseases, and Immunity Disorders	Unspecified Severe Protein-calorie Malnutrition	\$22,201.78
Endocrine, Nutritional and Metabolic Diseases, and Immunity Disorders	Overweight and Obesity	\$19,789.07
Endocrine, Nutritional and Metabolic Diseases, and Immunity Disorders	Thyrotoxicosis [Hyperthyroidism]	\$18,863.96
Endocrine, Nutritional and Metabolic Diseases, and Immunity Disorders	Disorders of Lipoprotein Metabolism and Other Lipidemias	\$16,945.74
Endocrine, Nutritional and Metabolic Diseases, and Immunity Disorders	Other Nontoxic Goiter	\$16,592.03
	Total	\$873,238.71



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High Level Diagnosis Group	Granular Diagnosis Group	Total Paid Amount
Factors Influencing Health Status and Contact with Health Services	Encounter for Screening for Infectious and Parasitic Diseases	\$5,458,090.78
Factors Influencing Health Status and Contact with Health Services	Encounter for Other Special Examination without Complaint, Suspected, or Reported Diagnosis	\$1,345,821.51
Factors Influencing Health Status and Contact with Health Services	Encounter for General Examination without Complaint, Suspected, or Reported Diagnosis	\$523,956.60
Factors Influencing Health Status and Contact with Health Services	Orthopedic Aftercare	\$144,742.42
Factors Influencing Health Status and Contact with Health Services	Encounter for Screening for Other Diseases and Disorders	\$116,457.61
Factors Influencing Health Status and Contact with Health Services	Encounter for Other Aftercare and Medical Care	\$81,862.48
Factors Influencing Health Status and Contact with Health Services	Encounter for Other Postprocedural Aftercare	\$78,883.18
Factors Influencing Health Status and Contact with Health Services	Encounter for Medical Observation for Suspected Diseases and Conditions Ruled Out	\$61,669.10
Factors Influencing Health Status and Contact with Health Services	Encounter for Supervision of Normal Pregnancy	\$52,577.89
Factors Influencing Health Status and Contact with Health Services	Acquired Absence of Limb	\$50,636.81
	Total	\$7,914,698.38
Injury and Poisoning	Fracture of Lower Leg, Including Ankle	\$422,472.72
Injury and Poisoning	Effects of Other Deprivation	\$383,018.47
Injury and Poisoning	Complications of Procedures, Not Elsewhere Classified	\$352,530.49
Injury and Poisoning	Complications of Internal Orthopedic Prosthetic Devices, Implants and Grafts	\$352,419.64
Injury and Poisoning	Fracture of Femur	\$260,628.15
Injury and Poisoning	Fracture of Skull and Facial Bones	\$248,645.91
Injury and Poisoning	Fracture of Forearm	\$166,033.92
Injury and Poisoning	Fracture of Shoulder and Upper Arm	\$96,493.60
Injury and Poisoning	Intracranial Injury	\$90,454.25
Injury and Poisoning	Open Wound of Head	\$84,764.16
	Total	\$2,457,461.31
Mental Disorders	Schizophrenia	\$830,259.35
Mental Disorders	Major Depressive Disorder, Recurrent	\$612,295.21
Mental Disorders	Schizoaffective Disorders	\$590,474.92
Mental Disorders	Bipolar Disorder	\$413,918.05
Mental Disorders	Major Depressive Disorder, Single Episode	\$378,579.27
Mental Disorders	Alcohol Related Disorders	\$313,231.01
Mental Disorders	Unspecified Psychosis Not Due to a Substance or Known Physiological Condition	\$159,825.92
Mental Disorders	Other Anxiety Disorders	\$127,798.71
Mental Disorders	Reaction to Severe Stress, and Adjustment Disorders	\$108,074.81
Mental Disorders	Opioid Related Disorders	\$100,868.63
	Total	\$3,635,325.88
Neoplasms	Malignant Neoplasm of Stomach	\$160,860.15
Neoplasms	Leiomyoma of Uterus	\$55,890.56
Neoplasms	Other Specified and Unspecified Types of non-Hodgkin Lymphoma	\$44,802.16
Neoplasms	Malignant Neoplasm of Colon	\$42,676.33
Neoplasms	Secondary Malignant Neoplasm of Respiratory and Digestive Organs	\$27,777.02
Neoplasms	Hodgkin Lymphoma	\$23,230.17
Neoplasms	Benign Lipomatous Neoplasm	\$21,202.39
Neoplasms	Benign Neoplasm of Other and Unspecified Endocrine Glands	\$19,551.39
Neoplasms	Malignant Neoplasm of Pancreas	\$16,559.14
Neoplasms	Neoplasms of Unspecified Behavior	\$16,497.75
	Total	\$429,047.06
Supplementary Classification of Factors Influencing Health Status and Contact with Health Services	Occupant of Heavy Transport Vehicle Injured in Noncollision Transport Accident	\$101,487.71
Supplementary Classification of Factors Influencing Health Status and Contact with Health Services	Car Occupant Injured in Other and Unspecified Transport Accidents	\$47.31
	Total	\$101,535.02



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High Level Diagnosis Group	Granular Diagnosis Group	Total Paid Amount
Symptoms, Signs, and Ill-Defined Conditions	Pain in Throat and Chest	\$885,414.05
Symptoms, Signs, and Ill-Defined Conditions	Abdominal and Pelvic Pain	\$602,237.59
Symptoms, Signs, and Ill-Defined Conditions	Other Abnormal Immunological Findings in Serum	\$438,582.55
Symptoms, Signs, and Ill-Defined Conditions	Illness, Unspecified	\$342,073.36
Symptoms, Signs, and Ill-Defined Conditions	Convulsions, Not Elsewhere Classified	\$238,546.14
Symptoms, Signs, and Ill-Defined Conditions	Syncope and Collapse	\$200,276.21
Symptoms, Signs, and Ill-Defined Conditions	Abnormal Findings on Diagnostic Imaging of Lung	\$166,883.18
Symptoms, Signs, and Ill-Defined Conditions	Headache	\$117,168.94
Symptoms, Signs, and Ill-Defined Conditions	Abnormalities of Breathing	\$94,771.46
Symptoms, Signs, and Ill-Defined Conditions	Other Symptoms and Signs Involving Cognitive Functions and Awareness	\$74,397.47
	Total	\$3,160,350.95
Support Ancillary Services	Bulk Pharmacy	\$20,859,346.00
Support Ancillary Services	Language Services	\$614,050.00
Support Ancillary Services	Laboratory Corporation of America	\$116,049.00
Support Ancillary Services	Medical Supplies	\$46,041.00
Support Ancillary Services	Other	\$11,026.50
	Total	\$21,646,512.50
	FY2019 Grand Total	\$53,121,968.84

