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United States Senate

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July 11, 2024

The Honorable Gene L. Dodaro
Comptroller General of the United States
U.S. Government Accountability Office
441 G Street, NW
Washington, DC 20548

Dear Comptroller General Dodaro:

I write to request the Government Accountability Office (GAO) conduct a comprehensive review of the provision of health care services, including mental and physical health, to individuals in the custody of U.S. Immigration and Customs Enforcement (ICE). Specifically, I request that GAO review ICE and its contractors' compliance with ICE's detention standards and other relevant policies related to the provision of care for individuals in custody.

ICE has a responsibility to maintain safe, humane conditions for detained noncitizens who may be subject to removal while they await the resolution of their cases or who have been ordered removed. Although three different sets of standards are applied at facilities housing detained noncitizens, these standards all require certain services be provided to individuals in custody. This includes initial medical, dental, and mental health screenings; routine and preventative care, specialty care, emergency care, and hospitalizations; timely responses to medical complaints; and language services when needed during any appointment, treatment, or consultation.

GAO previously examined the provision and oversight of medical care in immigration detention facilities. Given concerns reported by individuals in ICE custody regarding access to and quality of medical services, I specifically request GAO assess:

1. What is known about the effects of detention on an individual's mental and physical health?
2. What barriers exist for detained noncitizens in accessing care, including receiving care at nearby hospitals for medical emergencies and specialized services, and how is ICE addressing any barriers to accessing care?
3. Does the quality and accessibility of medical services differ between dedicated and non-dedicated facilities?
4. Does the quality and accessibility of medical services differ for individuals in segregation?
5. To what extent do oversight mechanisms indicate that detention facilities are complying with ICE detention standards for medical care?

6. To what extent has ICE established letters of understanding (LOU) with offsite providers (e.g. hospitals) that treat detained noncitizens, and how does ICE ensure providers adhere to LOU requirements that they provide appropriate care?

In assessing these questions, I request that GAO conduct case studies of a variety of types of facilities housing detained noncitizens to identify whether there are disparities in the provision of medical care across facilities.

Sincerely,



Patty Murray

Chair

U.S. Senate Committee on Appropriations