

Request for Records Disposition Authority (See Instructions on reverse)		Leave Blank (NARA use only)	
		Job Number <i>N1-567-08-1</i>	
To: National Archives and Records Administration (NIR) WASHINGTON, DC 20408		Date Received <i>2/20/2008</i>	
1. From: (Agency or establishment) Immigration and Customs Enforcement (ICE)		Notification to Agency In accordance with the provisions of 44 U.S.C. 3303a, the disposition request, including amendments, is approved except for items that may be marked "disposition not approved" or "withdrawn" in column 10.	
2. Major Subdivision Division of Immigration Health Services			
3. Minor Subdivision			
4. Name of Person with whom to confer Joseph M. Gerhart	5. Telephone (include area code) 202-732-6337	Date <i>9-16-09</i>	Archivist of the United States <i>Adrienne Thomas</i>
6. Agency Certification I hereby certify that I am authorized to act for this agency in the matters pertaining to the disposition of its records and that the records proposed for disposal on the attached _____ page(s) are not needed for the business of this agency or will not be needed after the retention periods specified; and that written concurrence from the General Accounting Office, under the provisions of Title 8 of the GAO Manual for Guidance of Federal Agencies,			
<input checked="" type="checkbox"/> is not required; <input type="checkbox"/> is attached; or <input type="checkbox"/> has been requested.			
Signature of Agency Representative <i>Joseph M. Gerhart</i>		Title Records Manager/Program Manager	Date (mm/dd/yyyy) <i>07/28/2009</i>
7. Item Number	8. Description of Item and Proposed disposition	9. GRS OR Superseded Job Citation	10. Action taken (NARA Use Only)
	U.S. Immigration and Customs Enforcement (ICE) Medical Program Clinical Records See attached	N1-85-99-1 N1-85-92-1 Superseded	

<p>1.</p>	<p><u>Medical Program Clinical Records</u> Medical records providing information about health care benefits for persons in the custody of ICE, US Marshall prisoners housed in ICE facilities, and migrants detained at federal, state and local jails. The services are provided by DIHS staffs who are currently detailed to ICE. Medical staffs consist of U.S. Public Health Service officers, contract staff, and General Schedule (GS) employees. The services provided include but are not limited to: medical, dental, mental health, pharmacy, x-ray, laboratory, short stay unit (inpatient services) and isolation rooms. Medical records consist of, but are not limited to: reports of physicians, nurses, and allied health professional; graphs and charts; results of laboratory and special diagnostic procedures; interpretation of X-rays and other radiological procedures; and all other reports related to the treatment or care of any detainee.</p> <p>This disposition instruction is media neutral and applies to all detainee medical files whether they are maintained in hardcopy or in electronic format. It therefore applies to the records maintained in the following electronic information systems, or their equivalents: Case Trakker, Treatment Authorization Request (TAR) System, MedEZ, Criminal Institution Pharmacy System (CIPS), Infectious Disease Tracking Database, Mental Health Coordination Database, Detainee Deaths Database, Social Services Database, and Pharmacy Database.</p> <p><u>Disposition:</u> TEMPORARY. Cut off at end of calendar year in which individual is released from custody. Destroy 10 years after cutoff.</p>	<p>Supersedes N1-85-99-1 Item 1a</p>	
<p>2.</p>	<p><u>Outputs of Medical Program Clinical Records Electronic Information Systems</u> (All ad hoc printouts are covered by GRS 20.)</p>		
<p>2a.</p>	<p>Annual Tuberculosis and Infectious Diseases Surveillance Statistics Electronic statistical data including information about tuberculosis and infectious disease case counts by facility and country of nationality.</p> <p><u>Disposition:</u> PERMANENT. Cut off at end of calendar year in which created. Transfer to the National Archives in 5-year blocks immediately following the last cutoff in the block.</p> <p><u>Additional Information:</u> Date Span: 2003-present Year of First Transfer to the National Archives: 2009 Estimated Current Volume: less than 3 GB Estimated Annual Accumulation: less than 700 MB</p>		
<p>2b.</p>	<p>Annual Detainee Deaths Data Electronic data containing information about individuals who died while in ICE custody, including but not limited to: age, gender, nationality, and location.</p>		

<p>2b1.</p>	<p><u>Data ICE transfers to the Bureau of Justice Statistics (BJS). BJS then analyzes the data and creates reports.</u></p> <p>Disposition: TEMPORARY. Cut off at end of calendar year in which data is created. Destroy 10 years after cutoff.</p>	<p>Superseded by job / item number: <u>DAA-0567-2015-0013-0004</u> Date (MM/DD/YYYY): <u>12/11/2019</u></p>
<p>2b2.</p>	<p><u>Data ICE does not transfer to the Bureau of Justice Statistics (BJS).</u></p> <p>Disposition: PERMANENT. Cut off at end of calendar in which data is created. Transfer to the National Archives in 5-year blocks immediately following the last cutoff in the block.</p> <p>Additional Information: Date Span: n/a. Currently ICE transfers all data to BJS.</p>	<p>Superseded by job / item number: <u>DAA-0567-2015-0013-0004</u> Date (MM/DD/YYYY): <u>12/11/2019</u></p>
<p>2c.</p>	<p>Monthly Statistical Reports Electronic statistical data compiled monthly.</p> <p>Disposition: TEMPORARY. Destroy when no longer needed for business purposes.</p>	
<p>3.</p>	<p>Medical Program Operations Workload Database The Operations Workload Database is a relational database system designed to collect, organize, analyze, track, and report workload/productivity data from DIHS-staffed sites. Workload data includes information about population (new arrivals, releases, daily on-site population), medical visits (i.e., intake screenings, Physical examinations, sick calls, urgent care, dental mental health, pill line distributions, etc.), chronic disease visits, patient visits by provider, offsite referrals, prescriptions filled, transfer summaries prepared, essential events, site significant events, and short stay unit visits are reported to identify problems and needs at each facility. This database can create statistical reports by individual medical facility site as well as overall across all facilities. Information/data from this database may be shared with DHS, ICE, the United States Congress, and various non-governmental organizations.</p> <p>Disposition: PERMANENT. Cut off at end of calendar year in which created. Transfer to the National Archives in 5-year blocks immediately following the last cutoff in the block.</p> <p>Additional Information: Date Span: 2007-present Year of First Transfer to the National Archives: 2012 Estimated Current Volume: less than 2 GB Estimated Annual Accumulation: 700 MB</p>	
<p>4.</p>	<p>Outputs of Operations Workload Database Monthly and annual statistical reports.</p> <p>Disposition: TEMPORARY. Destroy when no longer needed for business purposes.</p>	

<p>5.</p> <p>5a.</p>	<p><u>Medical Program Derivative Reports</u></p> <p>Tuberculosis and Infectious Disease Surveillance Annual Reports Narrative reports synthesizing select information about annual statistics about occurrences of tuberculosis and infectious diseases of individuals in ICE custody.</p> <p>Disposition: TEMPORARY. Cut off at end of calendar year in which report is created. Destroy 10 years after cutoff.</p>		
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Additional Information for Item 1 above:

Currently medical records are created and maintained in hard copy and electronic format.

Hard copy records are generated at the following detention facilities: (Buffalo) Batavia, NY, Eloy, AZ, Jena, LA, Varick, NY, Pinal County, AZ, Taylor, TX, Burk County, PA, Aguadilla, PR, Florence, AZ, Los Angeles, CA, Santa Ana, CA, Harlingen, TX, San Pedro, CA and Willacy, TX.

Electronic records are generated at the following detention facilities, El Centro, CA, El Paso, TX, Elizabeth, NJ, Houston TX, Krome, FL, Stewart, GA, San Diego, CA, Tacoma, WA, Port Isabel, TX and Pearsall, TX. The DIHS system consists of the following programs:

Electronic medical records are maintained in various systems, including but not limited to, the following systems or their equivalents:

CaseTrakker:

DIHS has an electronic medical records system called CaseTrakker. CaseTrakker is used for managed care/utilization management and medical records collection and management for health services provided by DIHS staff and contractors. CaseTrakker collects medical, dental and mental health data. This data is accessible by all DIHS staff and contractors who utilize the system at their site. Data is shared as necessary with other detention facilities, Veterans Affairs, CDC, Cure TB, TBNet, and ICE.

TAR System:

Treatment Authorization Request (TAR) data is placed in the CaseTrakker database. TAR data includes patient demographics, reasons for referrals, diagnosis, treatment plans, and authorized treatment. An external web system is accessible by anyone with custody of an undocumented migrant, including Boarder Patrol Officers, SPCs, CDFs, and IGSA's. Passwords are requested through the TAR web site and granted after validation. TAR data is entered into the system via a web application by the person who maintains custody of the undocumented migrant. Managed Care Coordinators review and make a determination on each TAR. This data is shared with Veterans Affairs so that they can match claims to TARs prior to making payments. A history of all TARs submitted by each facility is available to all members of that facility through the TAR web application.

EARM data is shared with Veterans Affairs so that they can ensure that undocumented migrants were in custody of ICE prior to paying claims. (Detainee Alien Control System the predecessor system will be taken off-line by the end of FY 2008, and will be replaced with the Enforce Alien Removal Module)

MedEZ:

MedEZ is a clinic scheduling system used to schedule patients for clinic visits. It includes identification information, appointment type, special needs, TB test results, and diagnoses.

CIPS:

Criminal Institution Pharmacy System (CIPS) is a pharmacy system that is used to dispense medications. It includes identification information and medications prescribed.

Infectious Disease Database:

The Infectious Disease Tracking Database consists of the Infectious Disease Surveillance and Tuberculosis Monitoring. It is a system that tracks all reported infectious diseases, using the CDC's list of reportable diseases. Information regarding the patient, diagnosis, and medical treatment are shared with CDC, State Public Health Centers, and International Programs such as TBNET and CureTB.

Mental Health Coordination Database:

The Mental Health Coordination Database is a relational database system designed to collect, organize, analyze, track, and store data related to detainees with mental health disorders. The detainees' placements, diagnoses, statuses, psychological assessments/evaluations, and points of contact are recorded in this database. Information/data from this database may be shared with DHS, ICE, the United States Congress, and various non-governmental organizations.

Detainee Deaths Database:

The Detainee Deaths Database is a relational database system used to store information about detainees who have died in ICE custody. This database contains the detainees' personal information, medical history, the location, cause of death, and points of contact. This information is shared with DHS, ICE, the United States Congress, and various non-governmental organizations.

Social Services Database:

The Social Services Database is a relational database system used to track information about social services being provided to ICE detainees. Information about the detainees, the social services provider, and the claims are all gathered in this database. Information/data from this database may be shared with DHS, ICE, the United States Congress, and various nongovernmental organizations.

Pharmacy Database:

The Pharmacy database is a relational database system designed to collect, organize, analyze, and track the volume of prescriptions filled and the related expenditures at DHS-staffed sites. Information/data from this database may be shared with DHS, ICE, the United States Congress, and various non-governmental organizations.