



FACT SHEET

ON THE

DIVISION OF IMMIGRATION HEALTH SERVICES

PURPOSE

- ! To provide information about the Division of Immigration Health Services (DIHS)

BACKGROUND

- ! The Immigration and Naturalization Service (INS) and Public Health Service (PHS) relationship dates back to 1891 when the Immigration Act authorized the PHS to examine and quarantine aliens at Ellis Island
- ! An interagency agreement links the PHS of the Health Resources Services Administration (HRSA), Bureau of Primary Health Care (BPHC) with INS

DISCUSSION

- ! The DIHS is responsible for assuring that the provision of health care services to detained individuals is consistent with community standards
- ! The DIHS supports the INS mission by providing or arranging for the most appropriate and cost effective health care services
 - Our Mission Statement: We promote global health through the delivery of primary health care to undocumented migrants
 - The DIHS Balanced Scorecard (BSC) outlines our major priorities to be our employees, the quality of care we provide, and its cost-effectiveness.
- ! Health services are provided by U.S. Public Health Service commissioned officer and government service physicians, dentists, physician assistants, nurse practitioners, nurses, pharmacists, and health care administrators
 - In FY01, there are approximately 276 FTEs supporting the DIHS
 - DIHS staff provided over 260,000 visits in FY99 and over 290,000 visits in FY00
- ! DIHS staff provide medical consultation and technical assistance to all INS regions, districts, and sectors on detainee health care

- ! Primary care is provided at 11 Service Processing Centers (SPCs) through INS medical facilities and one staging facility
 - If sub-specialty services are required, contract physicians are employed through agreements
 - Secondary and tertiary care is arranged for through local hospitals
- ! The DIHS management structure consists of a Director, Deputy Director, Chief of Staff and the following branch chiefs:
 - Clinical Services
 - Field Operations
 - Managed Care
 - Resource Management
- ! Health Service Administrators (HSA) and Clinical Directors (CD) operate medical facilities at Aguadilla, PR; Buffalo, NY; El Centro, CA; El Paso, TX; Elizabeth, NJ; Florence, AZ; Los Angeles, CA; Miami, FL; New York, NY; Port Isabel, TX; Queens, NY; and San Pedro, CA
- ! Short-stay units are located at El Centro, El Paso, and Miami
- ! Managed Care Coordinators (MCCs) provide medical oversight and utilization management for all detainees located in non-SPCs (jails) under the Medical Jail Management System (MJMS)
- ! Some current initiatives of the DIHS are as follows:
 - Introduce 22 cost-containment initiatives to reduce health care costs for all SPCs in the areas of acquisition issues, case management, service delivery, and information technology
 - Implement telepharmacy at three SPCs to reduce costs while still maintaining quality services
 - Initiate new and improve upon current federal partnerships with HRSA and the CDC
 - Construct and manage the first DIHS hospital at the Port Isabel, TX SPC
 - Expand our health care delivery to 4 new SPCs: Houston, TX, San Antonio, TX, San Diego, CA, and Seattle, WA
 - Expand information resources support via wide-area networks for all medical facilities
 - Establish a telemedicine program for TB screening at all sites

RECOMMENDATION

- ! None, for information only

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