U.S. IMMIGRATION AND CUSTOMS ENFORCEMENT ENFORCEMENT AND REMOVAL OPERATIONS ICE HEALTH SERVICE CORPS

AGE ASSESSMENT FACILITATION

IHSC Directive: 01-54

ERO Directive Number: 11771.1

Federal Enterprise Architecture Number: 306-112-002b

Effective Date: September 26, 2023

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- 1. **PURPOSE**: The purpose of this directive is to set forth policies and procedures to facilitate the completion of medical age assessments requested by Enforcement and Removal Operations (ERO).
- 2. APPLICABILITY: This directive applies to all ICE Health Service Corps (IHSC) personnel, including but not limited to, U.S. Public Health Service (PHS) officers, civil service employees, and contract personnel. It is applicable to IHSC personnel supporting health care operations in ICE-owned and contracted detention facilities (CDFs) and to IHSC Headquarters (HQ) staff. This directive applies to contract personnel when supporting IHSC in detention facilities and at HQ. Federal contractors are responsible for the management and discipline of their employees supporting IHSC.

3. AUTHORITIES AND REFERENCES:

- **3-1.** William Wilberforce Trafficking Victims Protection and Reauthorization Act (TVPRA) of 2008, (Public Law 110-457), Section 235(b)(4).
- 3-2. HHS Office of Refugee Resettlement (ORR). (2015). Children Entering the United States Unaccompanied: Section 1, 1.6 Determining the Age of an Individual without Lawful Immigration Status," (August 28, 2015).
- **3-3.** Office Inspector General (OIG). (2010). OIG-10-122, Office of Inspector General report, Age Determination Practices for Unaccompanied Alien Children Update, dated Sept. 29, 2010.
- **3-4.** ERO. (2015). <u>Directive 11301.4</u>, Age Determination Procedures for Custody Determination.
- **3-5.** IHSC <u>01-36 G-02</u>, Medical Payment Authorization Request (MedPAR) Guide for IHSC Staffed Facilities Guide.

- **3-6.** IHSC <u>01-36 G-03</u>, IHSC Medical Payment Authorization Request (MedPAR) Guide for Non-IHSC Managed Facilities.
- 3-7. IHSC. IHSC Age Assessment Instructions.
- 3-8. American Dental Association (ADA). (2021). <u>ADA Technical Report No.</u>

 1077 For Human Age Assessment by Dental Analysis, American Board of Forensic Odontology Standards and Guidelines for Dental Age Assessment.
- 4. POLICY: IHSC coordinates with independent forensic age assessment practitioners to complete medical age estimation procedures requested by ERO. The Medical Case Management Unit (MCMU), Health Plan Management Unit (HPMU), and facility-level referral coordinators collaborate to facilitate the completion of age assessment requests through the medical payment authorization request (MedPAR) referral and authorization process. IHSC does not employ any credentialed or privileged forensic subject matter experts and IHSC staff do not render age assessment opinions or generate reports.
 - **4-1.** IHSC 01-36 G-02, Medical Payment Authorization Request (MedPAR) for IHSC-Staffed Facilities, IHSC 01-36 G-03, MedPAR Guide for Non-Managed IHSC Facilities and the IHSC Age Assessment Instructions establish procedures for the IHSC age assessment facilitation process.
 - 4-2. The IHSC Health Plan Management Unit maintains a list of forensic age assessment practitioners who are fully qualified in age assessment techniques, as evidenced by board certification through either the American Board of Forensic Odontologists (ABFO) or the American Board of Forensic Anthropologists (ABFA). HPMU maintains and posts the forensic age practitioner list in the IHSC Age Assessment Instruction.
 - **4-3.** Forensic age assessment practitioners complete medical age assessments and reports using population-specific reference data. Whenever possible, they use multiple independent dental and non-dental methodologies that account for the individual's ethnic and genetic background.

5. RESPONSIBILITIES:

- 5-1. IHSC Field Medical Coordinators (FMC).
 - 5-1.1 Assist ERO by coordinating medical age assessment procedures through the MedPAR (2) referral and authorization process for detainees housed in non-IHSC-staffed facilities.
 - 5-1.2 Approve age assessment requests in accordance with the MedPAR

 Guide for Non-IHSC Managed Facilities and the IHSC Age

 Assessment Instructions.

- 5-1.3 Enter and approve age assessment and age assessment radiograph requests, if the non-IHSC-staffed facility referral coordinator does not enter the MedPAR referrals.
- 5-1.4 Approve separate MedPAR requests, if necessary, to obtain radiographs required by the age assessment practitioner but are unobtainable on-site, if necessary.
- 5-1.5 Ensure the final age assessment report includes an estimated probability percentage of the detainee being 18 years or older.
- 5-1.6 Send the completed age assessment report to the field office director (FOD) or designee.

5-2. IHSC Referral Coordinators (RC).

- 5-2.1 Enter, process, and approve age assessment MedPAR requests in accordance with the IHSC 01-36 G-02, *MedPAR Guide for IHSC-Staffed Facilities* and the IHSC Age Assessment Instructions.
- 5-2.2 Inform the facility dentist about the ERO age assessment and panoramic radiograph request. RCs may obtain these at IHSC-staffed facilities with on-site dental clinic, panoramic machine.
- 5-2.3 Enter, process, and approve a separate MedPAR request, if necessary, for any radiographs required by the age assessment practitioner but are unobtainable on-site.
- 5-2.4 Ensure the final age assessment report includes an estimated probability percentage of the detainee being 18 years or older.
- 5-2.5 Send the completed age assessment report to the facility HSA or designee.

5-3. Non-IHSC Referral Coordinators.

- 5-3.1 Enter age assessment MedPAR (2) requests in accordance with IHSC 01-36 G-03, <u>Medical Payment Authorization Request</u>
 (MEDPAR) Guide for Non-IHSC Managed Facilities and IHSC Age
 Assessment Instructions.
- 5-3.2 Assign the age assessment MedPAR request to the respective FMC for review and approval.

5-4. Health Services Administrators (HSA).

- 5-4.1 Alert the facility referral coordinator about ERO age assessment requests received from the FOD.
- 5-4.2 Route the final age assessment report to the FOD or designee.

5-4.3 Collaborate with the FOD to ensure completion of all other administrative steps in the ERO age assessment process prior to requesting a medical age assessment, if feasible.

5-5. IHSC Dentist.

- 5-5.1 Expose a digital panoramic radiograph, if necessary, when alerted about the ERO age assessment orders and forward to the facility referral coordinator.
- 5-5.2 IHSC dentists document the age assessment panoramic radiograph exposure encounter in the electronic medical record using the <u>Documentation Template-Panoramic radiograph for medical age assessment.</u>

5-6. Claims Management Program Administrator.

- 5-6.1 Vets forensic age assessment practitioners through the Health Plans Management Unit (HPMU) provider network process in the IHSC Age Assessment Instructions.
- 5-6.2 Maintains a current list of forensic age assessment practitioners.
- **5-7. Data Analytics Office (DAO) Lead** maintains and posts the age assessment facilitation data on the Tableau Age Assessment dashboard on the IHSC HPMU SharePoint page.

6. PROCEDURES:

- **6-1.** ERO requests IHSC to facilitate age assessment procedures (e.g., dentition and bone maturity assessments using X-rays or other methodologies identified by the medical community as appropriate) as a last resort, when all other information has proven inconclusive.
- 6-2. The HSA or designee collaborates with the FOD or designee for medical age assessment requests to determine if all other administrative steps in the ERO age assessment process have been completed when feasible, in accordance with section 5.1 of the ERO directive 11301.4, Age Determination Procedures for Custody Determination.
- 6-3. The RC or FMC enters, processes, and approves age assessment MedPAR requests in accordance with IHSC 01-36 G-02, Medical Payment Authorization Request for IHSC-Staffed Facilities; the IHSC 01-36 G-03, Medical Payment Authorization Request Guide for Non-IHSC Managed Facilities and the IHSC Age Assessment instructions.

- 6-4. The forensic age assessment practitioner provides age assessment reports that include a probability percentage of the noncitizen being 18 years or older, the type and number of radiographs used, photo(s) of the individual, providers contact information and signature, country of origin, ethnicity, statistical population-specific data referenced, and staging methods used.
- **6-5.** HITU uses electronic medical record eBO reports to tabulate age assessment data.
- **6-6.** IHSC HITU tracks and reports the following age assessment data fields annually and when requested:
 - 6-6.1 Total number of age assessment referrals entered.
 - 6-6.2 Total number of age assessments entered for all IHSC-staffed facilities.
 - 6-6.3 Total number of age assessment referrals entered for non-IHSC-staffed facilities.
 - 6-6.4 Total number of age assessment referrals entered per facility.
 - 6-6.5 Total number of age assessment referrals per qualified age assessment practitioner.
 - 6-6.6 Total number of radiographs used for all age assessment referrals (sorted by type).
- 7. **HISTORICAL NOTES**: None. This directive is the first IHSC policy that describes IHSC's role in facilitating medical age determination. Annual review conducted with no changes.
- **8. DEFINITIONS:** The following definitions apply for purposes of this directive only:
 - 8-1. Medical Age Assessment The use of certain biological processes that occur during childhood (tooth development, bone development, and sexual maturity) in a predictable sequence to assess a person's chronological age. Staff use these biological processes to estimate an individual's biologic age using medical/dental data and subsequently correlate biologic age to chronologic age.
 - **8-2. Biologic Age -** The age corresponding with the developmental, degenerative, biochemical, or isotopic status of an individual.
 - **8-3.** Chronologic Age The difference between the individual's date of birth and a specific later date (the actual number of years an individual has been alive). The legal age used to define adults and children for custody determinations.

- **8-4. Forensic Age Assessment Practitioner -** A licensed physician or dentist with training and qualifications in forensic age assessment methodologies as evidenced by board certification through either the American Board of Forensic Odontologists (ABFO) or the American Board of Forensic Anthropologists (ABFA).
- 9. APPLICABLE STANDARDS: None.
- 10. PRIVACY AND RECORDKEEPING: ICE uses detainee health records and information maintained in accordance with the DHS/ICE-013 Alien Health Records System of Records to provide for the care and safety of detainees. IHSC limits access to detainee health records and information to those individuals who need to know the information for the performance of their official duties, and who have appropriate clearances or permissions. IHSC secures paper records in a locked cabinet or room when not under the direct control of an officer or employee with a need for the paper record to perform their duties.
 - **10-1.** IHSC staff complete annual training on the protection of patient health information and Sensitive Personally identifiable information.
 - 10-2. IHSC staff reference the Department of Homeland Security Handbook for Safeguarding Sensitive PII (Handbook) at DHS Handbook for Safeguarding Sensitive PII for additional information concerning safeguarding sensitive PII.
 - 10-3. All relevant documents produced or provided in accordance with this Directive must be maintained in accordance with an applicable National Archives and Records Administration (NARA) General Records Schedule (GRS) or a NARA-approved agency-specific records control schedule. If the records are not subject to a records schedule, they must be maintained indefinitely by the agency. In the event the records are subject to a litigation hold, they may not be disposed of under a records schedule until further notification. Prior to the disposition of any records referenced in this directive, ICE Records Officer approval must be obtained.
- 11. NO PRIVATE RIGHT STATEMENT: This directive is an internal directive statement of IHSC. It is not intended to, and does not create any rights, privileges, or benefits, substantive or procedural, enforceable against the United States; its departments, agencies, or other entities; its officers or employees; or any other person.
- 12. POINT OF CONTACT: Deputy Assistant Director (DAD) of Clinical Services.