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June 25, 2026

Secretary Markwayne Mullin
U.S. Department of Homeland Security
2707 Martin Luther King Jr. Avenue SE
Washington, DC 20528

Acting ICE Director David J. Venturella
U.S. Immigration and Customs Enforcement
500 12th Street SW
Washington, DC 20536

Dear Secretary Mullin and Acting Director Venturella:

The undersigned Attorneys General are alarmed by the decision of Immigration and Customs Enforcement (“ICE”) to stop investigating and reporting the deaths of individuals who pass away days after being released from ICE custody.¹ This decision comes amid increasingly frequent reports of substandard and abusive conditions at ICE detention facilities. Because this is a moment when more transparency is needed, not less, we urge ICE to rescind its new policy and to carefully review all cases involving the death of a newly-released detainee.²

¹ Compare David J. Venturella, ICE Directive 11003.7: Notification, Review, and Reporting Requirements for Detainee Deaths (June 2, 2026), <https://www.ice.gov/doclib/foia/policy/11003.7.pdf> (“2026 Directive”), with Caleb Vitello, ICE Directive 11003.6: Notification, Review, and Reporting Requirements for Detainee Deaths (Feb. 27, 2025), <https://www.ice.gov/doclib/foia/policy/11003-6.pdf> (“2025 Directive”); see Douglas MacMillan, *ICE to stop reporting deaths of newly released detainees, internal memo says*, Washington Post (June 4, 2026), <https://www.washingtonpost.com/immigration/2026/06/04/ice-stop-reporting-deaths-newly-released-detainees-internal-memo-says/>.

² We use the term “newly-released detainee” to refer to an individual whose death occurs within 30 days of release from ICE custody, which was the time range considered relevant for post-release review under prior policy. See 2025 Directive; Tae Johnson, ICE Directive 11003.5: Notification, Review, and Reporting Requirements for Detainee Deaths (Oct. 15, 2021), <https://www.ice.gov/doclib/detention/directive11003-5.pdf> (“2021 Directive”).

Immigration detention is strictly civil in nature; it must not be used to punish or harm detainees.³ Many individuals detained by ICE have never been held in criminal or civil custody before; some have medical conditions that require ongoing care and may be exacerbated by detention. This is particularly true under the current Administration, which has limited the discretion of line officers to release elderly and medically vulnerable immigrants from custody.⁴

ICE is required to enforce detention standards which, among other things, direct immigration detention facility operators to undertake initial health screenings of any individual that arrives at a facility; provide any necessary medical, mental health, or dental treatment; and engage in subsequent monitoring and follow-up.⁵ In addition, facility operators must ensure that individuals in their custody are not subjected to unsafe or unsanitary conditions or unnecessary uses of force.⁶

Congress has long been concerned that ICE fails to hold facility operators to minimum standards of care.⁷ To promote accountability, Congress requires that ICE investigate and publicly report on the death of any individual in its custody.⁸ When a detainee dies, ICE must undertake “[a]n objective examination of the facts and circumstances surrounding the detention and death . . . to determine whether or not the deceased detainee received treatment in accordance with applicable detention standards on health, safety, and security.”⁹

³ U.S. Immigr. & Customs Enf’t, *Detention Management*, <https://www.ice.gov/detain/detention-management>, accessed June 14, 2026 (“Detention is non-punitive.”); *Zadvydas v. Davis*, 533 U.S. 678, 690 (2001).

⁴ This Administration’s draconian detention policies have led to “an older and sicker detainee population. . . Only about 800 people estimated to be 65 or older were booked into ICE detention during the last year of Biden’s presidency, compared to about 2,500 people in the first year of Trump’s second term.” Casey Tolan et al., *How understaffing and DHS policy drives rising deaths in ICE detention centers*, CNN.com (May 15, 2026), <https://www.cnn.com/2026/05/15/us/ice-immigration-detention-centers-medical-care-deaths-invs-vis>. In addition, advocates have reported significant increases in the number of pregnant, postpartum, and nursing people in ICE detention. Letter from the ACLU et al. to Todd Lyons et al. Regarding ICE’s Detention of Pregnant Individuals (Oct. 22, 2025), <https://www.aclu.org/documents/aclu-partners-demand-ice-release-pregnant-and-postpartum-people-from-ice-detention>.

⁵ See U.S. Immigr. & Customs Enf’t, *National Detention Standards 2026*, pt. 4.3 (Medical Care) at 119 (2026), <https://www.ice.gov/doclib/detention-standards/2025/nds2025.pdf> <https://www.ice.gov/doclib/detention-standards/2026/nds2026.pdf>; U.S. Immigr. & Customs Enf’t, *Performance-Based National Detention Standards 2011*, pt. 4.3 (Medical Care), at 257 (2011), <https://www.ice.gov/detain/detention-management/2011>.

⁶ See, e.g., *National Detention Standards 2026*, supra note 5, at 36, 53.

⁷ H.R. Rep. No. 116-9, Making Further Continuing Appropriations for the Department of Homeland Security for Fiscal Year 2019, and for Other Purposes, at 480 (2019).

⁸ *Id.* at 479-80; H.R. Rep. No. 115-239, Dep’t of Homeland Security Appropriations Bill, at 33 (2018).

⁹ 2026 Directive, supra note 1, at 2; accord 2025 Directive, supra note 2, at 2; 2021 Directive, supra note 2, at 2.

ICE has previously acknowledged that the purposes underlying Congress’s directive often require investigation when an individual has died in the days following release from detention. Specifically, in 2021, ICE clarified that the review and reporting requirements for detainee deaths apply after an individual’s release from ICE custody, “when a death occurs within a reasonable time, not to exceed 30 days of release from ICE custody and review is requested by the ICE Director.”¹⁰ The practical effect of this rule was that following the death of a newly released detainee, ICE frequently conducted investigations and prepared reports based on its findings.¹¹

On June 2, 2026, ICE changed its policy and announced that it will stop investigating and reporting any death that occurs in the days after an individual is released from ICE custody.¹²

According to news reports, the Department of Homeland Security (“DHS”) contends that this change is justified by the “common sense” conclusion that ICE should not be responsible for monitoring or reviewing deaths that transpire outside of its custody.¹³ This assertion ignores the far more common sense reality that deaths that occur days after a release may relate to abusive or negligent conditions inside of the detention facility. Even more troubling, the new policy creates a perverse incentive for facility operators to simply release critically ill individuals right before they die rather than provide medically necessary care while individuals are in custody.

This change comes as deaths in ICE custody have risen to historic levels, with 51 detainee deaths occurring since January 20, 2025, as compared to 19 in the two years prior.¹⁴ For example, three detained individuals died within a six-week period at Camp East Montana in Texas, which is ICE’s largest immigration detention facility.¹⁵ One of these deaths was deemed a homicide, and the U.S. Government Accountability Office (“GAO”) subsequently found that evidence associated with the incident was missing or destroyed.¹⁶ In the same oversight report, the GAO also concluded that “detained noncitizens with chronic conditions did not receive treatment and care [at Camp East Montana] in accordance with National Detention Standards.”¹⁷ The report further highlighted unsanitary living conditions and concluded that the issues present

¹⁰ 2021 Directive, *supra* note 2, at 1.

¹¹ *Id.*; see MacMillan, *supra* note 1 (citing account that the prior policy “led to several government investigations into the deaths of former detainees who died shortly after being released”).

¹² See generally 2026 Directive, *supra* note 1; MacMillan, *supra* note 1.

¹³ MacMillan, *supra* note 1.

¹⁴ U.S. Immigr. & Customs Enf’t, *Detainee Death Reporting*, U.S. Immigr. & Customs Enf’t (May 21, 2026) <https://www.ice.gov/detain/detainee-death-reporting>.

¹⁵ Jeff Abbott, *Nicaraguan man arrested by ICE in Minnesota dies at Camp East Montana*, El Paso Times (Jan. 18, 2026), <https://www.elpasotimes.com/story/news/immigration/2026/01/18/third-immigrant-dies-at-ice-camp-east-montana-in-el-paso-victor-manuel-diaz-of-nicaragua/88243759007/>

¹⁶ U.S. Gov’t Accountability Off., *GAO-26-108886, Immigration Detention: Waste and Performance Issues at Camp East Montana Provide Valuable Lessons for Future Facilities* 18 (2026), <https://www.gao.gov/assets/gao-26-108886.pdf>.

¹⁷ *Id.* at 17.

at this facility “contributed to waste of government resources and threats to the health and life of detained noncitizens.”¹⁸

Independent investigatory reporting has shown that inadequate and delayed medical treatment in ICE facilities has contributed to the spike in detainee deaths.¹⁹ For example, in September 2025, Ismael Ayala-Uribe, a 39-year-old man, died in ICE custody from septic shock caused by an untreated abscess after his request for medical treatment was ignored.²⁰ He is one of the “at least 17 people in ICE custody [who] died after medical staff delayed or failed to provide critical care that might have saved their lives,” according to doctors who reviewed the deceased detainees’ medical records.²¹ In addition, there have been at least 15 additional cases where doctors found there was not enough medical information to make a definitive determination, but found that “the person was so medically frail that detention likely hastened their death.”²²

These deaths have been disproportionately concentrated in detention facilities ICE knows to provide deficient medical care, with more than half the deaths since 2025 occurring in nine of the more than 220 immigration detention facilities across the country.²³ ICE’s Office of Detention Oversight cited five of these nine facilities as having deficient medical care.²⁴ On June 4, Mamuka Artmeladze was the second detainee to die in as many months at Winn Correctional Center in Winnfield, Louisiana. His death came two days after an Office of the Inspector General report on the Winn Correctional Center found that staff failed to update detainees’ medical records which “could negatively affect communication among medical staff and impact patient safety and appropriate treatment,” in addition to multiple maintenance and sanitary issues.²⁵

We also note that ICE’s change in investigation and reporting comes at a time when the agency has acted to shield its detention practices from review by state and federal officials. In recent months, ICE and its private contractors have unlawfully denied public health officials²⁶

¹⁸ *Id.* at 23.

¹⁹ St. John BARNED-SMITH, Ko Lyn Cheang, *In ICE custody, medical delays drive record deaths*, S.F. Chron. (Apr. 9, 2026), <https://www.sfchronicle.com/projects/2026/ice-detention-deaths/>.

²⁰ *Id.*

²¹ *Id.*

²² *Id.*

²³ *Id.*

²⁴ *Id.*

²⁵ U.S. Dep’t of Homeland Sec. Off. of Inspector Gen., OIG-26-08, *Results of an Unannounced Inspection of Winn Correctional Center in Winnfield, Louisiana* 12 (2026), <https://www.oig.dhs.gov/sites/default/files/assets/2026-06/OIG-26-08-Jun26.pdf>.

²⁶ *See Cty. of San Diego v. U.S. Dep’t of Homeland Sec.*, No. 3:26-CV-01520-JES-MSB, 2026 WL 1595979, at *2 (S.D. Cal. June 3, 2026) (directing defendants ICE and the private contractor to permit a health and safety inspection of detention facility over defendants’ objection); *The GEO Grp., Inc. v. Ferguson*, No. C23-5626 BHS, 2026 WL 1469690, at *1 (W.D. Wash. May 26, 2026) (allowing claim that private immigration detention contractor violated state law when it denied access to health and safety inspectors); Text Order, *Washington v. The GEO Grp.*, 25-cv-6466 (D.N.J. June 6, 2026), ECF No. 3

and Congressional representatives²⁷ access to detention facilities for routine inspections of detention conditions. These moves accompany the closure of the Office of Immigration Detention Ombudsman and significant cuts to the Office for Civil Rights and Civil Liberties, both of which are independent oversight bodies within DHS that historically have addressed complaints about deficient detention conditions.²⁸

Adequate transparency is critical if ICE is to be accountable to the people. We urge ICE to reverse course on this new policy and to ensure that individuals detained in its custody receive adequate care and protection from harm.

Sincerely,



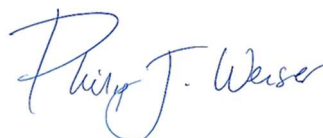
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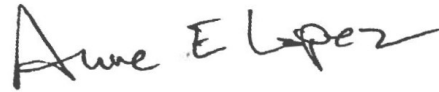
(directing private immigration detention contractor to show cause as to why the New Jersey Department of Health was not entitled to inspect a local immigration detention facility).

²⁷ See *Neguse v. U.S. Immigr. & Customs Enf't*, 813 F. Supp. 3d 45, 92 (D.D.C. 2025) (concluding that DHS's policy of preventing members of Congress from visiting immigration detention facilities was likely contrary to law and in excess of statutory authority); accord *Neguse v. U.S. Immigr. & Customs Enf't*, No. 25-CV-2463 (JMC), 2026 WL 575509, at *8 (D.D.C. Mar. 2, 2026).

²⁸ See Zolan Kanno-Youngs, et al., *Trump Shuts Down 3 Watchdog Agencies Overseeing Immigration Crackdown*, N.Y. Times (Mar. 21, 2025), <https://www.nytimes.com/2025/03/21/us/politics/trump-civil-rights-homeland-security-deportations.html>; Rebecca Beitsch, *DHS closes office of immigration detention watchdog*, The Hill (May 25, 2026), <https://thehill.com/homenews/5864182-oido-dhs-watchdog-closure>; *Kennedy Human Rights Center v. U.S Dep't of Homeland Sec.*, 25-cv-01270-ACR (D.D.C. filed Apr. 24, 2025).



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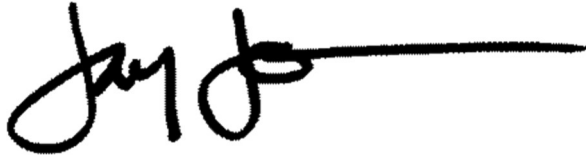
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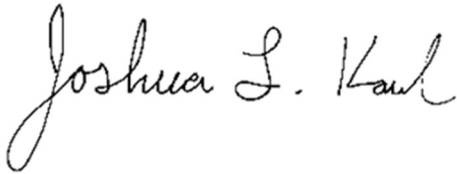
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