CAMPAIGN ZERO REPORT

Paying for One's Own Incarceration: National Landscape of "Pay-to-Stay" Fees

Campaign Zero Research & Policy Brief

JUNE 2025

This report takes an in-depth look at a policy commonly known as pay-to-stay fees. Pay-to-stay fees entail the harmful practice of charging adults and youths held in jails, prisons, and youth residential facilities for the costs of their incarceration, including medical fees and expenses for room & board.

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Executive Summary

This report examines the practice of pay-to-stay fees, which involves charging individuals—both adults and youths—in correctional facilities for costs relating to their incarceration. Pay-to-stay fees not only affect individuals during their time of incarceration but can also result in post-release debt. While the report considers the overarching issues with pay-to-stay fees broadly, **it looks more specifically at the imposition of room and board and medical fees at the state level for incarcerated adults and youths serving a sentence.**

Based on an in-depth literature review, discussions with other researchers, and interviews with people directly impacted by pay-to-stay fees, we argue that these fees are highly problematic for several reasons.

Specifically, pay-to-stay fees:

- Impose excessive financial burdens on incarcerated individuals and their families, many of whom are already economically strained before and during incarceration;
- Serve as significant barriers to accessing basic goods and services during incarceration, such as medical care;
- Hinder successful reentry after a person has served their sentence; and
- Are ineffective fiscal policies that fail to generate significant revenue or meaningfully impact states' budgets.

Despite the lasting harms that pay-to-stay fees pose, these policies are pervasive across the country. Based on our analysis of qualitatively coded state statutes and corrections department policies related to pay-to-stay fees between June 2022 and December 2023, we found that

- 48 states allow for the imposition of at least one category of pay-to-stay fees
- 26 states explicitly allow for both room & board and medical fees for both adults and youths who are incarcerated
- Only the states of California and Illinois have repealed fees for all categories in state correctional facilities

Given the widespread prevalence of pay-to-stay fees, we conclude the report by urging correctional systems and state & local governments across the country to explicitly ban the imposition of these fees and work towards dismantling the broader web of legal fines and fees that trap individuals in cycles of incarceration and debt.

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A Note on CZ Research & Data Products

Campaign Zero is a research and data-driven organization working to end police violence and carceral harm by shining a light on the impacts of harmful policies and practices. We center people with lived experience in the U.S. criminal legal system and value co-creation over ego in all of our research and data initiatives. Exercising humility and course correcting when we make mistakes is one of our core values. If you have feedback or questions, please email us at pts@campaignzero.org.

Acknowledgements

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Introduction

This report takes an in-depth look at a policy commonly known as pay-to-stay fees. **Pay-to-stay fees entail the practice of charging adults and youths held in jails, prisons, and youth residential facilities for the costs of their incarceration, including medical fees and expenses for room & board.** Depending on the state, these fees may be collected either by the relevant corrections department or by the state more broadly.

Pay-to-stay fees may be referenced in legal statutes by any of the following terms:

For adults, fees may be referred to as **costs of incarceration** or **cost of care**, or more specifically as costs for **room & board**, **medical service** or **medical-copay**.

For youths, fees are identified as court-imposed **cost of care** or **cost of support**, which may encompass other costs besides room & board or medical service such as costs for food, clothes, hygiene supplies, etc.

Sometimes, pay-to-stay fees are charged and collected during incarceration and automatically deducted from individuals' wages or prison accounts (ACLU & The University of Chicago Global Human Rights Clinic, 2022). However, because many incarcerated individuals are not able to fully pay off these fees during their sentences, the fees often accumulate as debt that they are still responsible for following their release after time served. In other instances, incarcerated individuals are not notified of the fees during their incarceration, and the fees are then collected by the state following their release by garnishing wages, seizing assets, or using collection agencies (Friedman et al., 2021). Considering the country's longstanding racial disparities in arrests and sentencing, the impact of pay-to-stay fees is disproportionately felt by low-income Black and Brown communities.

These fees are ubiquitous across the country and are imposed by individual states, counties, and localities. However, the scope, implementation, and impact of these fees remain understudied. This report focuses specifically on room & board fees and medical co-pays and their imposition at the state level for both adults and youths serving a sentence (i.e., in state prisons and youth facilities).

In order to better understand the impact and variation of these fees, Campaign Zero staff:

- Reviewed literature on monetary sanctions (i.e., fines and fees);
- Analyzed and coded state statutes and corrections department policies related to pay-to-stay fees;
- Surveyed state correctional administrators about their departments' pay-to-stay practices and policies;
- Filed Freedom of Information Act (FOIA) requests related to pay-to-stay practices and records with relevant departments; and
- Conducted semi-structured interviews with formerly incarcerated adults who were charged pay-to-stay fees.

Our data collection found that, as of December 2023, correctional facilities in the vast majority of states can impose daily room & board fees and medical co-pays on incarcerated adults, either by state law or through the absence of any prohibitive statutes. Additionally, they can bill parents or legal guardians of incarcerated youths for child support or per diem fees. Our descriptive analysis found that 48 of the 50 states and Washington D.C. allow for the imposition of at least one category of pay-to-stay fees; only the states of California and Illinois have repealed fees for all categories.[1]

In what follows, we first review existing research and underscore how pay-to-stay fees are both harmful and counterproductive. Next, we discuss our methodology and research framework that were developed to qualitatively code state-level statutes for four pay-to-stay categories: adult room & board, adult medical co-pay, youth room & board, and youth medical co-pay. Subsequently, we present a landscape descriptive analysis of our findings at the state-level. Finally, we share the lived experiences of formerly incarcerated individuals impacted by pay-to-stay fees and conclude with our call to action.

1 In California, adult medical co-payments were repealed in 2019 pursuant to Assembly Bill 45, and adult room & board fees were repealed in 2022 pursuant to Assembly Bill 177. Youth room & board and medical fees were repealed in 2018 pursuant to Senate Bill 190. In the state of Illinois, adult and youth medical fees were repealed in 2020 pursuant to Public Act 101-86, while adult room & board fees were repealed in 2020 pursuant to Public Act 101-0235; youth room & board fees were repealed in 2023 pursuant to Public Act 103-0379.

How Pay-to-Stay Fees Cause Lasting Harm

A significant body of research points to the lasting harms of pay-to-stay fees. Not only do pay-to-stay fees serve to make confinement in prisons and jails more difficult for incarcerated individuals, these fees follow and burden individuals far beyond the terms of their sentencing. These fees can make reentry more onerous and strain relationships with loved ones, thereby perpetuating cycles of incarceration and harming communities. Recognizing these harms, the states of California and Illinois have prohibited these fees, and have thereby joined a broader movement of state and local governments seeking to address the negative impacts of criminal legal fines and fees.[2]

Pay-to-stay fees are problematic for several reasons

The following pages will explore each of these reasons in greater detail.

1 **Pay-to-stay fees impose excessive financial burdens** on incarcerated individuals and their families, many of whom are already economically strained before and during incarceration.

2 **Pay-to-stay fees serve as significant barriers** to accessing basic goods and services during incarceration, such as medical care.

3 The financial burden of pay-to-stay fees **hinders successful reentry.**

4 **Pay-to-stay fees are ineffective fiscal policies** that fail to generate significant revenue or meaningfully impact states' budgets.

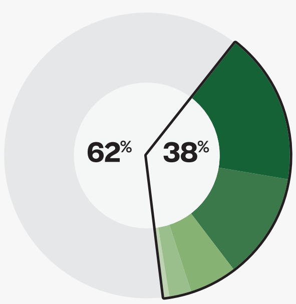
2 For example, many localities have implemented debt amnesty programs to relieve individuals of outstanding debt stemming from accumulated fines and fees; see the criminal justice fee forgiveness programs implemented in Dane County, WI; Washtenaw County, MI; and others featured in the Fines and Fees Justice Center's Cities & Counties for Fine and Fee Justice Network Program (Local Policy Guide, 2022; Press Release, 2022).

1 Pay-to-stay fees impose excessive financial burdens on incarcerated individuals and their families, many of whom are already economically strained.

FIGURE 1

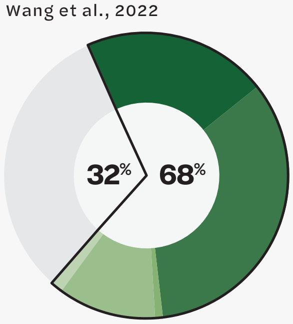
People of color are disproportionately represented in prisons, while white people are significantly underrepresented.

In 2016 the United States population was **mostly white.**
Wang et al., 2022



- White (62%)
- Hispanic (17%)
- Black (12%)
- Asian, Pacific Islander, Hawaii Native (5.4%)
- Two or more races (2.3%)
- American Indian or Alaska Native (0.7%)

However, the 2016 combined U.S. state prison population was **mostly people of color.**
Wang et al., 2022



- White (32%)
- Hispanic (21%)
- Black (34%)
- Asian, Pacific Islander, Hawaii Native (0.9%)
- Two or more races (11%)
- American Indian or Alaska Native (1.4%)

People who enter the criminal legal system in the U.S. are overwhelmingly poor and disproportionately Black and Brown—a deeply disturbing outcome stemming from historical disinvestment, the criminalization of poverty, and the over-policing of Black and Brown communities (National Academies of Sciences, Engineering, and Medicine, 2023). A 2022 study found that in 2016, individuals who identify as Black comprised 34% of state prison populations despite representing only 12% of the U.S. population, while individuals who identify as Hispanic comprised 21% of the state prison populations while accounting for 17% of the U.S. population (Wang et al., 2022). Research further suggests that a significant share of incarcerated individuals experienced the effects of poverty and family disruption prior to incarceration, including homelessness, living in public housing, receiving public assistance, and/or spending time in foster care (Ibid.). Relatedly, incarcerated people have a significantly lower median annual income prior to their incarceration than non-incarcerated people of similar ages (Rabuy & Kopf, 2015). The socio-economic conditions of individuals disproportionately impacted by incarceration is a critical backdrop for understanding the compounding harms that pay-to-stay fees can pose.

Pay-to-stay policies in effect impose fees on individuals who are uniquely unable to pay them, thereby setting up incarcerated people—and by extension their families who often have to financially support them—for lasting debt and hardship.

In Connecticut, for example, individuals imprisoned in state institutions had to pay $249 per day for room & board (Eaton-Robb, 2022). These fees are all the more concerning when considering that incarcerated individuals, if and when employed while in prison, earn wages that often amount to less than a dollar per hour (Sawyer, 2017). There are even seven states[3] where incarcerated individuals are not paid at all for most prison work (ACLU & The University of Chicago Global Human Rights Clinic, 2022).

3 Alabama, Arkansas, Florida, Georgia, Mississippi, South Carolina, and Texas.

FIGURE 2

Hypothetical pay-to-stay scenario: 168 days in prison

Consider a hypothetical scenario in which "John Doe" is sentenced to 168 days in prison. While incarcerated, he is employed in a regular prison job at the correctional facility in which he is confined. Sometimes called "facility" or "institutional support" jobs, these are the most common forms of employment in prisons and include functions like custodial, laundry, grounds keeping, and food services. These jobs are distinct from working in "prison industries," which are state-owned businesses that employ incarcerated people to produce goods and provide services sold to government agencies.

Income*	**$0.63** /hour John is paid the highest wage for a regular, facility job.	**30** hrs/wk Average working week.	+ 453.60
Expenses**	**$18** /week Average spending in the commissary for coffee and toiletries.	**$130** /month Phone calls, transportation & other miscellaneous expenses.	− (1212.00)
Pay-to-Stay Fees***	**$5** medical co-pay x2 John sprains his ankle while exercising, and is charged for each visit to a clinic.	**$1500** /month John's room and board is billed to him at $50 per day.	−(9,010.00)

* The wage amount is an average calculated and published by the Prison Policy Initiative based on figures available in 2017 across 14 states; 30 hours per week is also the most common definition of full-time work in prisons according to their research (Sawyer, 2017). The total income calculated is thus the highest possible, but for many incarcerated individuals, their actual income will be far lower.

** According to a 2018 study published by the Prison Policy Initiative, an incarcerated person spends on average around $947 in commissary per year. This comes out to roughly $18 a week in commissary (Raher, 2018). The additional expenses are a conservative estimate based on several sources. The Urban Institute estimates that incarcerated individuals spend anywhere from $50–$100 per month on phone calls (Loonstyn & Galley, 2023). The Prison Policy Initiative further found that incarcerated individuals spend between 27¢–30¢ on a single e-message (Wessler, 2023). Assuming a phone call expense of $100, a message bill of $15 (50 messages), and factoring in other miscellaneous expenses, we arrive at $130/month.

*** $5 is the most common medical co-pay amount based on our data collection. Fifty dollars for room & board is the highest fee amount we have found that is codified in state statutes (Kentucky).

Upon completion of his sentence, **John owes:**

$9,768.40

Under such circumstances, even paying a medical co-pay to see a physician, which typically hovers around $3-5 per visit, can be an enormous burden.

Deprived of any sources of livable income, incarcerated individuals have to contend not only with pay-to-stay fees, but also with a host of other fines and fees during incarceration and throughout their interaction with the criminal legal system more broadly. These include fees for clothing, transportation, and digital and telephone communication, as well as commissary markups for basic items like soap, coffee, and toothpaste (Arriaga, 2023; Krauth, 2005). Other fees that system-involved individuals may be responsible for include booking fees, attorney fees, examination fees, parole fees and probation supervision fees, among many others.[4] In addition to the trauma experienced during incarceration, these fees levied by the U.S. carceral system continue to keep individuals in cycles of poverty and incarceration.

4 As of May 2022, over half the states charge monthly fees for parole and probation supervision, ranging anywhere between $10 and $208 per month. Moreover, five of these states are authorized to assess an additional "enrollment," "processing," or "intake" fees, which can range from $25 to $600 in additional costs (Fines and Fees Justice Center & The Reform Alliance, 2022). Prior to its elimination of juvenile justice fees in 2016, Alameda County charged its detained youths $28 for drug and substance abuse testing, $15 daily for electronic and GPS monitoring, $90 a month for probation supervision, $300 per case for public defender costs, and $250 as a one-time "investigation fee." On average, these fees were estimated to reach $3,000 per family over the course of a youth's probationary sentence (Chambers et al., 2021).

2 **Pay-to-stay fees serve as significant barriers** to accessing basic goods and services during incarceration, such as medical care.

According to a report by the ACLU,

Prisons deduct as much as

80%

from incarcerated people's paychecks

for court-imposed fines, taxes, family support, restitution, medical and room & board fees.

ACLU & The University of Chicago Global Human Rights Clinic, 2022

The extensive web of legal fines and fees, coupled with the national reality of low prison wages, make it near impossible for incarcerated individuals to afford basic amenities in correctional facilities. What amenities and services individuals do end up paying for, in turn, are often low-quality or inadequate but nonetheless carry inflated price tags (Blakinger, 2023). This barrier to access is particularly acute in the case of medical care.

Most states charge a *co-pay*—a set fee for each self-initiated health visit. These fees typically range from \$3 to \$5 per visit and can go as high as \$13.50 per visit—a significant portion of people's hourly prison wages, which are often less than \$1 an hour.[5] Take the story of Jobie Taylor. Taylor served 20 years in Illinois prisons from 1993 to 2013, making around \$28 per month working on the shower cleaning crew. "I was relatively healthy, but you had to pay a \$5 co-pay every time you saw a doctor," he told the news outlet Truthout.

"Most prisoners in Illinois get paid \$10, maybe \$15 a month so if you have any kind of illness or injury you have to choose between personal hygiene products or seeing a doctor" (Trounstine, 2018, para. 16).

As Taylor points out, incarcerated individuals have to make difficult decisions about how they spend their limited financial resources—whether on additional food items, calling their loved ones, or getting the treatments they need. Further, in some instances, individuals do not have the ability to make these decisions for themselves, as their nominal prison wages or funds (including contributions made by family and friends) are automatically deducted to pay outstanding fees.[6]

According to a report by the ACLU, prisons across the country deduct as much as 80 percent from incarcerated people's paychecks for court-imposed fines, taxes, family support,

5 Also see our full data findings on medical co-pays in the "Descriptive Analysis" section.
6 As an example of such deduction, Georgia's code states that "an amount determined to be the cost of the inmate's keep and confinement shall be deducted from the earnings of each inmate, and such amount shall be deposited in the treasury of the department" (GA Code § 42-5-59, 2022).

restitution, medical and room & board fees (ACLU & The University of Chicago Global Human Rights Clinic, 2022).

Moreover, while a 1976 U.S. Supreme Court decision affirmed the constitutional right for incarcerated people to receive medical care, correctional healthcare remains deeply inconsistent and inadequate (Wilper et al., 2009). Indeed, researchers and journalists have gathered numerous testimonies and examples of months-long delays, canceled appointments, denial of specialty care, lack of access to needed medications, and other serious shortcomings in correctional medical care—conditions that were only made worse during the COVID-19 pandemic (McCann, 2022; Law, 2022; Beer, 2022). With respect to mental health care, despite incarcerated individuals having exceptionally high rates of mental health issues, prisons nationwide fail to meet the necessary demands for care, with only 1 in 4 incarcerated individuals receiving professional help (Wang, 2022).

Given the inadequacies of medical care in correctional facilities, individuals are all the more likely to forgo getting the care they need to prioritize other necessities like food, toiletries, over-the-counter medicine, and additional clothes (Sawyer, 2017). This, in turn, has devastating consequences for health outcomes in prisons and jails more broadly. The Prison Policy Initiative spells out the disastrous consequences of medical co-pays thus: "First, when sick people avoid the doctor, disease is more likely to spread to others in the facility and into the community... Second, illnesses are likely to worsen as long as people avoid the doctor, which means more aggressive (and expensive) treatment when they can no longer go without it. Medical co-pays encourage a dangerous waiting game for incarcerated people, correctional agencies, and the public, with little payoff in terms of offsetting medical costs and reducing 'unnecessary' office visits" (Herring, 2022, para. 4).

In short, pay-to-stay fees—and specifically medical co-pays—heighten the precarity that individuals experience while incarcerated and prevent people from having even their most basic human needs met.

3 The financial burden of pay-to-stay fees **hinders successful reentry.**

According to a 2018 report by the nonprofit Alabama Appleseed,

38%

of people surveyed in Alabama committed a second crime to pay off their court debt.

Alabama Appleseed Center for Law and Justice et al., 2018

Pay-to-stay fees are not restricted to when individuals are incarcerated but can follow them even after they are released. Since most incarcerated individuals cannot pay the fees while they are incarcerated, these fees often accumulate as debt that they are still obligated to pay post-release.

There are instances where this debt can follow someone if they are incarcerated for a second time, as we heard from a formerly incarcerated person in North Carolina.[7] During these situations, individuals are held responsible for fees that they incurred during their previous sentence, even if serving time for a different offense. Courts are also often authorized to hold individuals in civil or criminal contempt for failure to pay the fees, which can lead to further financial penalties or incarceration (Bannon, 2010). In other instances, states and counties contract with private collection agencies to collect the fees owed or are otherwise authorized to garnish wages or seize individuals' inheritances, lawsuit settlements, or tax refunds for the purpose of recouping the fees (Friedman et al., 2022; Lussenhop, 2015; Eisen, 2015; Bastien, 2017).

The story of Melvin Moore in Illinois exemplifies the harms of predatory pay-to-stay policies and practices. Moore spent 20 years incarcerated by the Illinois Department of Corrections (IDOC). Long after his release, he received a $14,000 inheritance from his grandmother's estate. IDOC promptly filed a lawsuit against him for the costs incurred during his 20 year sentence, which totaled $338,650 (amounting to $72/day). Ultimately, IDOC managed to seize $9,485 of his inheritance, leaving him with just over $4,000. The money could have gone toward securing housing, supporting his family, and paying for basic needs such as clothing, food, and transportation. Instead, it was appropriated by the state, while Moore has had to continue living with his sister in South Chicago and seek welfare assistance after his incarceration (Mills & Lighty, 2015).[8]

7 See our human impact stories in the "Stories from Individuals Affected by Pay-to-Stay Fees" section.
8 It is important to note that Illinois subsequently ended adult room & board fees on January, 2020, pursuant to PA 101-0235.

FIGURE 3

Timeline of opportunities for possible imposition of pay-to-Stay fees

Pay-to-stay fees are not limited to the duration of incarceration. Individuals face an array of legal fines and fees throughout their experience in the criminal legal system.

Pre-incarceration

Individuals involved with the criminal legal system may incur a host of fines & fees during the pre-trial and trial processes, including:

- Booking & processing fee
- Daily jail fee
- Counsel fees
- Drug testing fee
- Court security & facility fees

During incarceration

Once convicted and incarcerated, individuals create prison accounts to hold their funds and receive their prison work wages.

These prison accounts are then automatically deducted or fees are directly taken out of the prison work wages—which often amount to no more than $1 an hour—to pay charges for:

- Room & board
- Medical co-pay
- Other fees or fines such as restitution

Post-release

Often, pay-to-stay fees accrue as outstanding debt that individuals are responsible for following their release, because they could not afford to pay these fees during their incarceration. Individuals set up payment plans to pay off these fees.

In some states, formerly incarcerated individuals are not even notified they have outstanding debt.

If they receive an inheritance or legal settlements, the state may intercept those funds.

Some states also bring lawsuits or employ collection agencies to enforce payment.

Moore is not alone in struggling to settle back into society and make ends meet with looming pay-to-stay fees. In 2018, the Prison Policy Initiative estimated that formerly incarcerated people in the U.S. are unemployed at a rate of over 27%—nearly eight times the national average unemployment rate of 3.8% in the same year (Couloute & Kopf, 2018). Another 2018 report, published by the nonprofit Alabama Appleseed, found that 38% of people they surveyed in Alabama committed a second crime to pay off their court debt. A 2020 report by the Brennan Center estimates that formerly incarcerated people earn around $6,700 annually, compared to $13,800 earned annually by people in similar demographic groups who have not been incarcerated (Craigie et al., 2020). These disheartening figures are unsurprising given the significant barriers—stigma, a tough job market, transitioning sectors, and a lack of social welfare programs—that formerly incarcerated individuals face when attempting to find stable, high-paying, and desirable jobs.

Pay-to-stay fees impact individuals' day-to-day financial security and can cause additional strains with families and loved ones, factors which are critical to a formerly incarcerated person's successful reentry. Indeed, when analyzing the impact of monetary sanctions (including restitution and other non pay-to-stay fees) on youths in particular, researchers have found that they lead to an increased likelihood of recidivism (Piquero & Jennings, 2017; Piquero et al., 2023; Hager, 2019).

Rather than helping formerly incarcerated youths and adults to successfully reenter their communities, pay-to-stay fees further hamper people and make their reintegration significantly more difficult.

4 Pay-to-stay fees are **ineffective fiscal policies** that fail to generate significant revenue or meaningfully impact states' budgets.

In the 2019 fiscal year, Connecticut collected **$6 million in incarceration fees out of the $57 million** owed on all liens. The $6 million in collected fees represents

<1% of the state's $632 million overall corrections budget.

Khan & Laing, 2020

Pay-to-stay fees were first implemented in 1985 in the county jail in Macomb County, Michigan, which was authorized to collect up to $60 daily from incarcerated individuals to offset rising operating costs (Wickersham, n.d.). In the ensuing years, pay-to-stay fees spread across more correctional jurisdictions as the country's incarcerated population saw explosive growth and more and more governments sought to manage the corresponding skyrocketing correctional costs (Eisen, 2014). Pay-to-stay fees have grown alongside a suite of additional fees that have been implemented in the criminal legal system more broadly in the courts and elsewhere (e.g., electronic monitoring, DNA testing, etc.) (Ibid.).

Yet even when it comes to offsetting costs, pay-to-stay fees are an abject policy failure. The amount that states have been able to collect—while devastating to individuals—have been minimal for state budgets.

For example, in the 2019 fiscal year, Connecticut collected $6 million of incarceration fees out of the $57 million of all liens owed. That $6 million represents less than 1% of the overall corrections budget of $632 million (Khan & Laing, 2020). In Michigan, per the Michigan Department of Attorney General, $611,655.45 was collected from 127 individuals for adult room & board fees in the 2021 fiscal year;[9] the annual operating budget for the Department of Corrections is over $2 billion (Risko, 2021). In Illinois, the State was only able to recover a fraction of the pay-to-stay fees owed despite "significant use of resources," which led lawmakers in the state to repeal pay-to-stay fees for adults and youths altogether (Friedman et al., 2024). At the local level, speaking to the BBC in 2015, the sheriff of Macomb County—coincidentally the site of the country's first pay-to-stay policies—stated that the revenues from their pay-to-stay program had been dropping off since 2009 such that "the cost of running it is almost equal to what they bring in" (Lussenhop, 2015).[10]

9 See additional fiscal information pertaining to pay-to-stay fees we were able to gather through our FOIA requests in Appendix D.

10 Something similar could be said of medical co-pays and whether they help to offset healthcare costs; Oregon's Department of Corrections, for instance, concluded in its cost-benefit analysis that "co-pay systems do not seem to lower overall health care costs" (Herring, 2022). The inefficacy of collection furthermore applies to other fines and fees more broadly (Menendez et al., 2019).

In short, pay-to-stay fees inflict lasting harm on incarcerated individuals, exacerbating their economic precarity while bringing limited to no financial returns to the governments that impose them. We demand the rest of the country repeal and ban these pay-to-stay fees and work towards dismantling the broader web of fines and fees that deepen the economic vulnerability of justice-involved individuals.

These 40+ year old policies are out of touch, with devastating impacts on individuals, their families and communities, and with very little impact to states' bottom line.

Examination of the Landscape and Impact of Pay-to-Stay Fees across the U.S.

Data Sources & Methodology

Pay-to-stay fees vary widely from state to state—both in the types of fees that are permitted per state statute, as well as in how they are implemented. The goal of our campaign research is to unpack the administrative fees for room & board and medical co-pay levied on incarcerated individuals in state prisons and youth facilities and to uncover the full impact of these fees during and after incarceration. These fees are an underexplored area of the U.S. carceral state, so we used a mixed methods approach to gain insight into how fees vary nationally and to understand the effects of their imposition on those who have been incarcerated.[12]

First, we reviewed state statutes and departmental policies related to pay-to-stay fees, conducted qualitative coding, and analyzed the statutes according to a set of policy considerations established in consultation with researchers and legal experts to aggregate and analyze current pay-to-stay policies across every state in the country. Our researcher codebook for the qualitative coding of the statutes can be found in **Appendix B**.

Next, we designed and administered a survey to state correctional agencies in each state to determine the extent to which the pay-to-stay practices outlined in the policies reviewed differed from how agencies and departments actually imposed, collected, and enforced fees (**Appendices G and H**). Due to a low response rate from state agencies, Campaign Zero staff deployed Freedom of Information Act (FOIA) requests (**Appendix D**) to obtain documents and records that addressed the questions asked in the survey. Finally, we interviewed formerly incarcerated individuals who were impacted by pay-to-stay fees. The aim of the interviews was to gain further insight into the harms and impact that pay-to-stay fees pose and discuss actionable solutions and recommendations (**Appendix I**). For the full description of our research methodology, please refer to **Appendix A**.

For the purposes of our research, we define these key terms in the following way:

Room & Board Fees	Medical Co-Pays	Incarcerated Adults	Incarcerated Youths[13]
Charges levied against incarcerated individuals/their families for the costs the facility incurs for providing meals and a place to sleep while in custody.	Charges levied against incarcerated individuals/their families for the costs the facility incurs for providing medical treatment and mental health services, payable by medical insurance or other assets, over the duration of their custody.	Individuals 18 years or older who are incarcerated in county jails, state prisons, or other correctional facilities.	Individuals under age 18 who are held in juvenile residential facilities post-adjudication (not including extended supervision, foster care, or any other form of non-correctional custody).

12 All research activities were conducted between June 2022 and December 2023; our data findings are current as of December 2023.

13 This report identifies people involved in the carceral system by their names or pseudonyms when possible and otherwise refers to them as "incarcerated" or "formerly incarcerated" individuals. However, there are sections in this report that directly quote pay-to-stay statutes that use terms like "inmate" and "prisoner. " Although these terms are commonplace in the carceral system, they are inextricably linked to physical places that evoke fear and disdain for many and perpetuate harmful stereotypes and attitudes toward some of the most vulnerable members of our communities.

Descriptive Analysis: Exploring State-Level Pay-to-Stay Statutes

What follows in this report is a summary of our data findings from the qualitative coding of state statutes across the U.S. and broader research findings. The full coding of policy variations across states is linked as **Appendix C**.

Important disclaimers worth noting regarding our data findings

State vs. County There are states without statute language authorizing or banning room & board or medical fees for adults or youths. In cases where there is no state statute language regarding these fees, counties may have laws that allow for the imposition of pay-to-stay fees. We found 15 states that specify pay-to-stay fees for certain categories only at the county level and chose to count these as evidence for the imposition of pay-to-stay fees in a given state.

Explicit Allowance vs. Allowance Throughout the descriptions of our findings, we say *explicitly allow* to indicate instances where we found statutory evidence to support a given policy. This includes instances where a fee or practice is required (i.e., policy language uses *shall*) and instances where a fee or practice is formally permitted (i.e., policy language uses *may*). We use the term *allow* to encompass additional instances where we could not find statutory language either authorizing or banning a given policy in order to highlight that anything short of an outright ban or repeal means the practice can be potentially implemented at any given time. For example, the state of Nebraska does not have state or county-level policy for adult room & board fees, but one of the adult correctional facilities in the state nonetheless charges $12 per day for room & board (Nebraska Department of Correctional Services, 2023).

Policy vs. Practice Some state statutes may authorize the imposition of pay-to-stay fees, but that does not necessarily mean the state actually bills and collects these fees. Our findings highlight the states that responded to our FOIA requests and clarified where their self-reported current pay-to-stay practices differ from what is outlined in their policies. It is further important to note that in cases where states reported not imposing or collecting pay-to-stay fees despite the existence of statutes authorizing such fees, we were not able to independently verify whether their self-reported claims are true.

State Repeal Even if we have indicated that a state disallows or has repealed pay-to-stay fees at the state-level (i.e., in prisons), county and local correctional facilities may still impose and collect pay-to-stay fees of their own. For example, while California has repealed room & board fees and medical co-pays for both adults and youths at the state level, costs of confinement can still be collected from individuals held in county jails.[14]

On the following pages, we structure the findings of our 50-state review in terms of these categories:

Overall Landscape
(all fee types)

Adult Room & Board Fees

Youth Room & Board Fees

Adult Medical Fees

Youth Medical Fees

Determination, Collection, & Enforcement of Fees

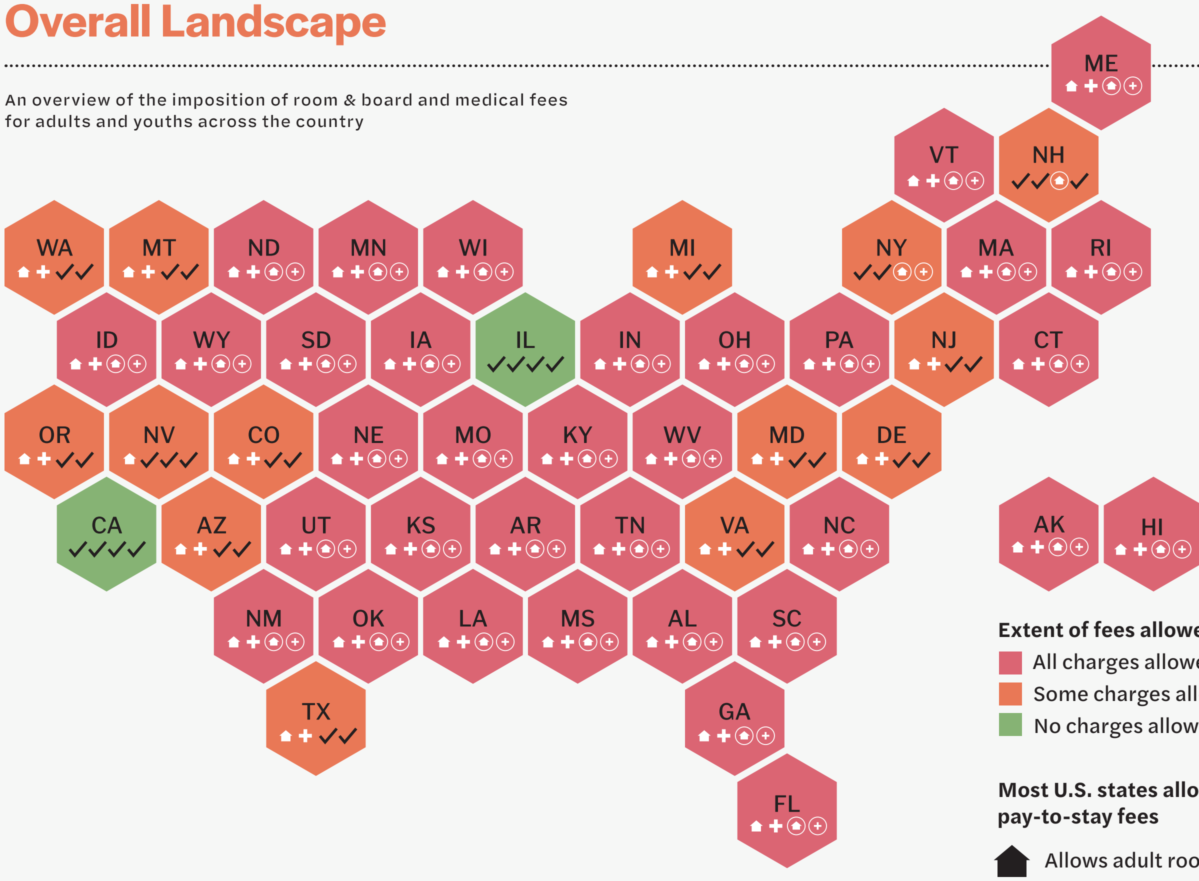
- Ability to pay determination
- Resource garnishments
- Collection & enforcement of pay-to-stay fees

14 See the State of California Penal Code Section 1209.

FIGURE 4

Overall Landscape

An overview of the imposition of room & board and medical fees for adults and youths across the country



Extent of fees allowed

- All charges allowed
- Some charges allowed
- No charges allowed

Most U.S. states allow pay-to-stay fees

- Allows adult room & board fees
- Allows adult medical fees
- Allows youth room & board fees
- Allows youth medical fees
- Indicates a repeal of fees

48 states allow for the imposition of **at least one category** of pay-to-stay fees.

Categories include adult room & board, adult medical, youth room & board, and youth medical

26 states *explicitly* allow for **both room & board and medical fees** for **both adults and youths** who are incarcerated.

Only the states of **California** and **Illinois** have repealed fees for all categories in state correctional facilities.

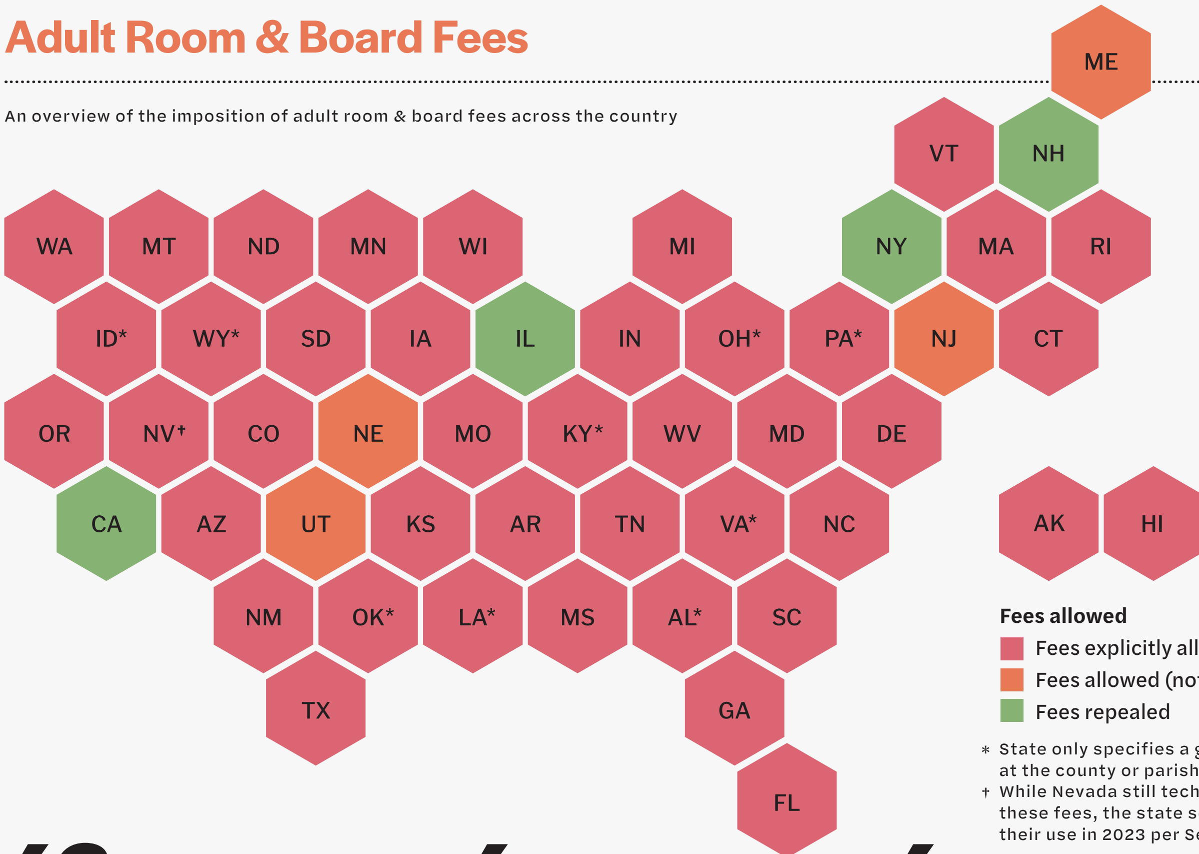
New Hampshire allows for the imposition of youth room & board fees only and has repealed the other three categories of fees.[15]

15 In the state of New Hampshire, adult medical and room & board fees were repealed in September 2019 pursuant to House Bill 518 and youth medical fees have been prohibited since 1996 per section 622:31-a of New Hampshire's Revised Statutes.

FIGURE 5

Adult Room & Board Fees

An overview of the imposition of adult room & board fees across the country



Fees allowed

- Fees explicitly allowed
- Fees allowed (not prohibited)
- Fees repealed

* State only specifies a given fee at the county or parish level

† While Nevada still technically allows these fees, the state severely curtailed their use in 2023 per Senate Bill 416

42 states and D.C. explicitly **allow for room & board fees** for incarcerated adults (identified in **red**).

This means that we were able to find statute language that clearly outlined the imposition of adult room & board fees in these states

4 states have **repealed room & board fees** for adults at the state level.

CA, IL, NH, NY

4 states have **per diem rates** for adult room & board fees that are publicly available.

AL, ID, KY, VA share their per diem rates—the amount a person can be charged per day for their incarceration—which range from $3 to $50 per day

8 states claim to not currently charge incarcerated adults room & board fees despite authorizing statutes.

AR, CO, HI, IA, KY, MT, OH, VT as per the responses from our FOIA requests filed between December 2022 and July 2023

4 states **do not have explicit statutory language** authorizing or prohibiting these fees.

ME, NE, NJ, UT are coded as allowing for adult room & board fees given the lack of explicitly prohibitive language

14 states and D.C. authorize these fees **specifically in the context** of employment/work release.

AL, AK, GA, HI, IN, MA, MD, MS, NM, NC, ND, SC, VT, WV, automatically deduct fees from incarcerated individuals' prison wages

Example language authorizing adult room & board fees

Arizona (AZ Revised Statutes § 31-238)

"A. The director of the state department of corrections shall establish an annual cost of incarceration for any person who is convicted in a state court and committed to the state department of corrections. B. This cost of incarceration shall reflect the amount of dollars this state spent in behalf of the prisoner and shall equal the average cost of one year's incarceration, and the director shall credit or debit a prorated portion of the cost of incarceration with respect to any such person incarcerated for three hundred thirty-four or fewer days in a given fiscal year. C. The calculation of the number of days of incarceration in a given fiscal year for the purpose of such a fee shall include time served before conviction. D. This state has the right to set off the cost of incarceration calculated under subsection A of this section at any time and without prior notice against any claim made by or monetary obligation owed to a person for whom a cost of incarceration can be calculated, except that twenty percent of any claim or monetary obligation is exempt from this section."

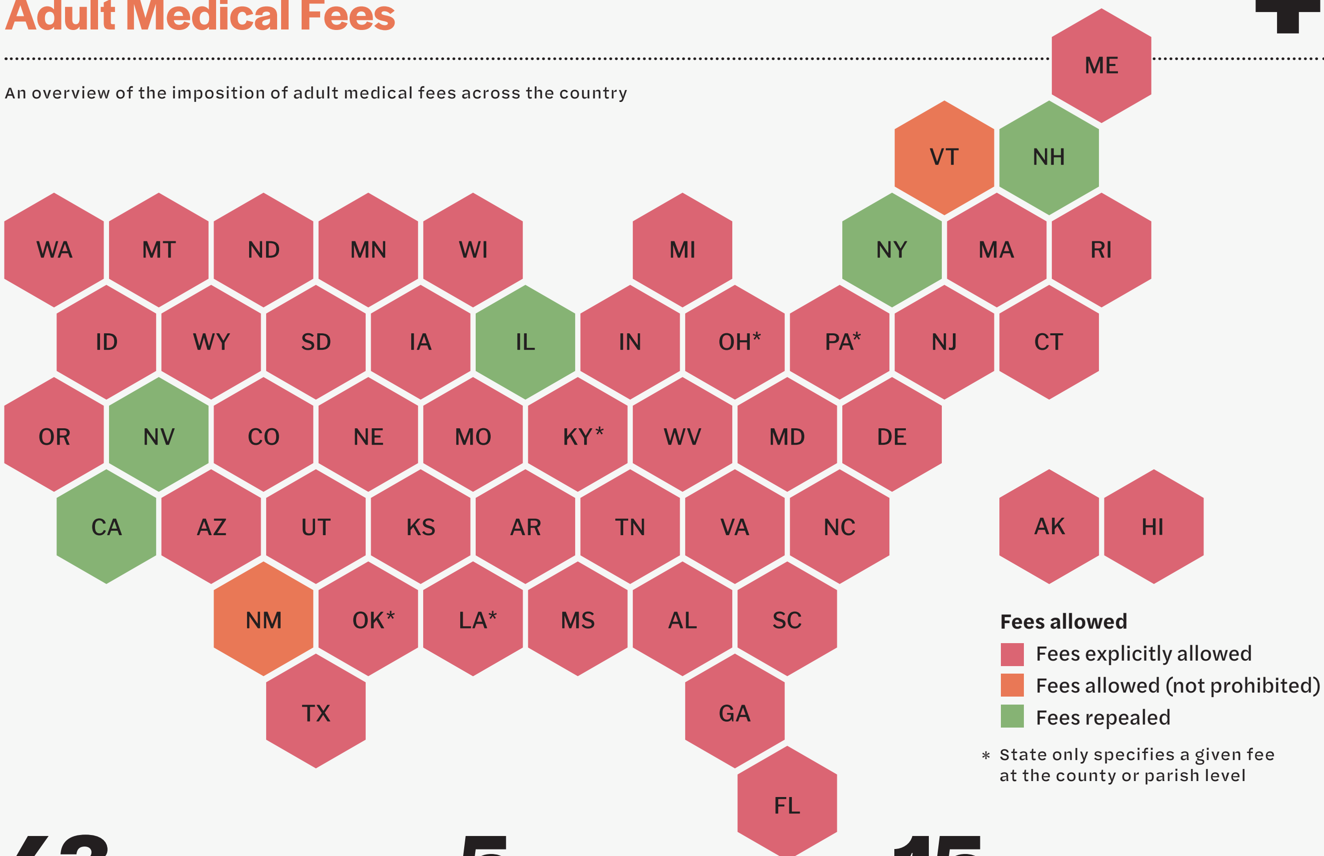
North Dakota (ND Century Code § 12-44.1-18.2)

"Any inmate who participates in a work release program shall pay the correctional facility for the room and board costs incurred by the inmate while confined in the correctional facility, residential halfway house, or similar alternative facility. The administrator shall determine the amount of meal and lodging costs to be paid by the inmate. The amount to be paid by the inmate while confined in a correctional facility may not exceed twenty dollars per day or the funds earned by the inmate, whichever is less."

FIGURE 6

Adult Medical Fees

An overview of the imposition of adult medical fees across the country



43 states explicitly **allow for medical fees** for incarcerated adults (identified in **red**).

This means that we were able to find statute language that clearly outlined the imposition of medical fees for adults in these states

5 states have **repealed adult medical fees** at the state level.

CA, IL, NV, NH, NY

15 states **prohibit the denial of medical service** for adults for lack of ability to pay.

AZ, CT, FL, IN, KS, KY, MA, MS, MT, NJ, OH, TX, UT, VA, WV

4 states **claim to not currently charge** incarcerated adults medical fees despite authorizing statutes.

AZ, CO, HI, MT as per the responses from our FOIA requests filed between December 2022 and July 2023

2 states **do not have explicit statutory language** regarding adult medical fees.

NM, VT are coded as allowing for adult medical fees given the lack of explicitly prohibitive language

Among states that allow medical co-pays, the fee ranges from **$0.50** to **$13.55** per visit.

The average medical co-pay amount is approximately **$4**, and the most frequently charged amount is **$5.**

(Among states with medical co-pays that specify the co-pay amount)

Example language authorizing adult medical fees

Florida (FL Statutes § 945.6037)

"(a) For each non-emergency visit by an inmate to a health care provider which is initiated by the inmate, the inmate must make a co-payment of $5. A co-payment may not be charged for the required initial medical history and physical examination of the inmate. (b) The co-payment for an inmate's health care must be deducted from any existing balance in the inmate's bank account. If the account balance is insufficient to cover the co-payment, 50 percent of each deposit to the account must be withheld until the total amount owed has been paid."

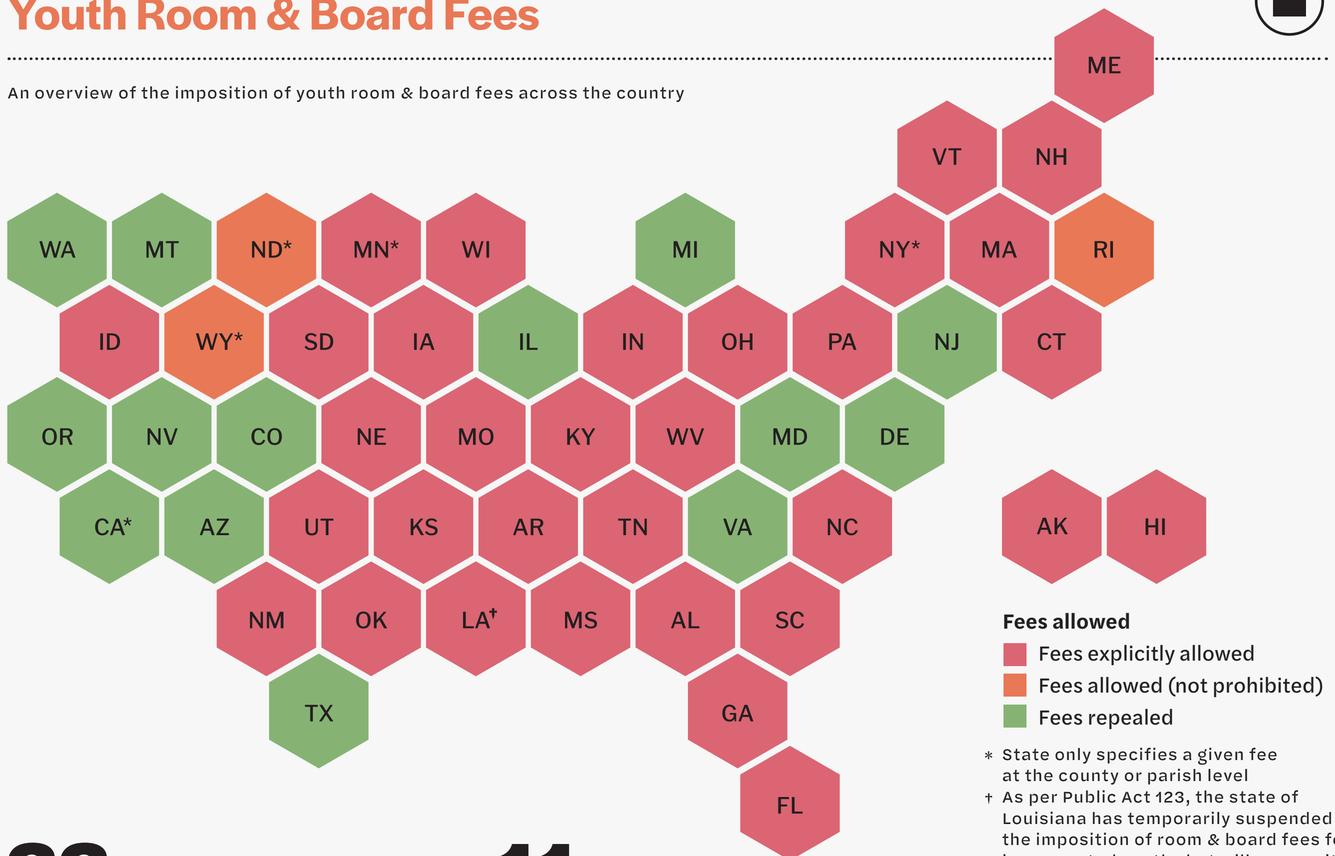
Minnesota (MN Statutes § 243.212)

"Any inmate of an adult correctional facility under the control of the commissioner of corrections shall incur co-payment obligations for health care services provided except for mental health services. The co-payment shall be at least $5 per visit to a health care provider. The co-payment will be paid from the inmate account of earnings and other funds, as provided in section 243.23, subdivision 3. The funds paid under this subdivision are appropriated to the commissioner of corrections for the delivery of health care services to inmates."

FIGURE 7

Youth Room & Board Fees

An overview of the imposition of youth room & board fees across the country



* State only specifies a given fee at the county or parish level

† As per Public Act 123, the state of Louisiana has temporarily suspended the imposition of room & board fees for incarcerated youths but will resume its practices on June 30, 2026

33 states and D.C. explicitly **allow for room & board fees** for incarcerated youths (identified in **red**).

This means that we were able to find statute language that clearly outlined the imposition of youth room & board fees in these states

11 states **claim to not currently charge** incarcerated youths room & board fees despite authorizing statutes.

AK, HI, ID, KY, MA, MS, NH, NM, NY, NC, TN as per the responses from our FOIA requests filed between December 2022 and July 2023

14 states have **repealed room & board fees** for youths at the state level.

AZ, CA, CO, DE, IL, MD, MI, MT, NV, NJ, OR, TX, VA, WA

3 states **do not have explicit statutory language** authorizing or prohibiting these fees.

ND, RI, WY are coded as allowing for youth room & board fees given the lack of explicitly prohibitive language

Example language authorizing youth room & board fees

New Mexico (NM Statutes § 32A-1-19)

"Whenever legal custody of an adjudicated child is vested in someone other than the child's parents, including an agency, institution or department of this state, if the court, after notice to the parents or other persons legally obligated to support the child and after a hearing, finds that the parents or other legally obligated persons are financially able to pay all or part of the costs and expenses of the support and treatment, the court may order the parents or other legally obligated persons to pay to the custodian in the manner the court directs a reasonable sum that will cover all or part of the expenses of the support and treatment of the child subsequent to the entry of the custody order."

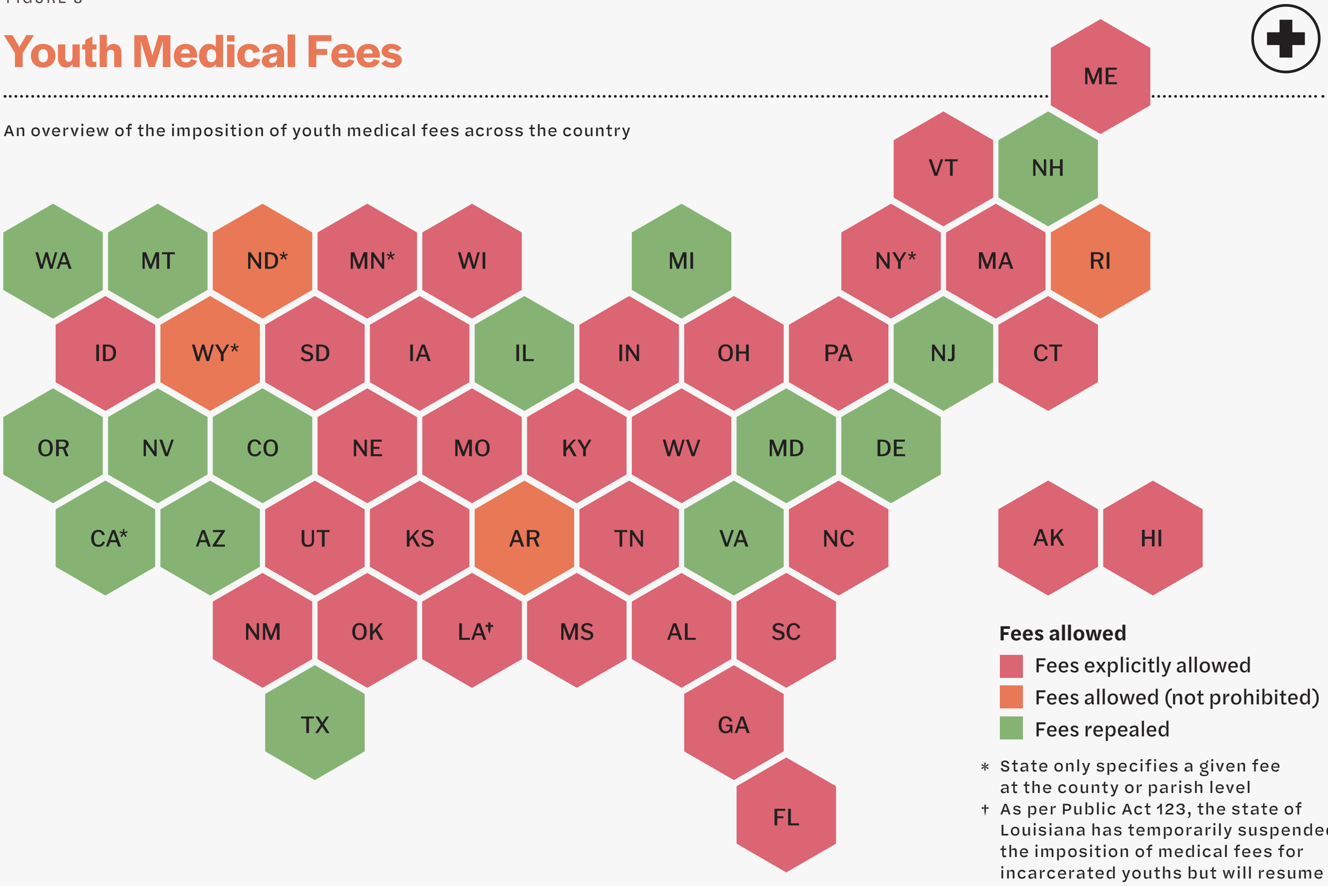
Ohio (OH Revised Code § 2152.20)

"All or part of the costs of confinement in a residential facility described in section 2152.19 of the Revised Code or in a department of youth services institution, including, but not limited to, a per diem fee for room and board, the costs of medical and dental treatment provided, and the costs of repairing property the delinquent child damaged while so confined. The amount of reimbursement ordered for a child under this division shall not exceed the total amount of reimbursement the child is able to pay as determined at a hearing and shall not exceed the actual cost of the confinement. The court may collect any reimbursement ordered under this division."

FIGURE 8

Youth Medical Fees

An overview of the imposition of youth medical fees across the country



* State only specifies a given fee at the county or parish level

† As per Public Act 123, the state of Louisiana has temporarily suspended the imposition of medical fees for incarcerated youths but will resume its practices on June 30, 2026

31 states and D.C. explicitly **allow for medical fees** for incarcerated youths (identified in **red**).

This means that we were able to find statute language that clearly outlined the imposition of medical fees for youths in these states

11 states **claim to not currently charge** incarcerated youths medical fees despite authorizing statues.

AK, HI, ID, KY, MA, MS, MT, NM, NY, NC, TN as per the responses from our FOIA requests filed between December 2022 and July 2023

5 states further **require parents or legal guardians to provide medical insurance** on behalf of their child who is incarcerated.

AL, AK, AR, ME, NC—in practice, this means parents need to pay/sign up for insurance if they don't already have insurance for their child

15 states have **repealed medical fees** for youths at the state level.

AZ, CA, CO, DE, IL, MD, MI, MT, NV, NH, NJ, OR, TX, VA, WA

4 states **do not have explicit statutory language** authorizing or prohibiting these fees.

AR, ND, RI, WY are coded as allowing for youth medical fees given the lack of explicitly prohibitive language

1 state **explicitly prohibits the denial of medical service** for youths for lack of ability to pay.

SC

Example language authorizing youth medical fees:

Maine (ME Revised Statutes Title 15, §3314)

"Whenever the court commits a juvenile to a Department of Corrections juvenile correctional facility or to the Department of Health and Human Services or for a period of detention or places a juvenile on a period of probation, it shall require the parent or legal guardian to provide medical insurance for or contract to pay the full cost of any medical treatment, mental health treatment, substance use disorder treatment and counseling that may be provided to the juvenile while the juvenile is committed, including while on aftercare status or on probation, unless it determines that such a requirement would create an excessive hardship on the parent or legal guardian, or other dependent of the parent or legal guardian, in which case it shall require the parent or legal guardian to pay a reasonable amount toward the cost, the amount to be determined by the court."

Mississippi (MS Code §43-21-615)

"Whenever a child is adjudicated delinquent and committed by the youth court to the custody of any person or agency other than the custody of a state training school, the youth court, after giving the responsible parent or guardian a reasonable opportunity to be heard, may order that the parent or guardian pay, upon such terms or conditions as the youth court may direct, such sum or sums as will cover, in whole or in part, the support of the child including any necessary medical treatment."

Determination, Collection, & Enforcement of Fees

In addition to state statutes that allow for the imposition of fees relating to incarceration (room & board and medical), some states provide specific regulations around the following:

- **Ability to Pay Determination:** The court reviews a person's financial resources, debts, and obligations in order to determine whether they have the means to pay pay-to-stay fees.
- **Resource Garnishment:** This refers to the practice of seizing an individual's wages, prison account, benefits and other sources of income in order to cover the costs of pay-to-stay fees.
- **Collection & Enforcement of Pay-to-Stay Fees:** This encompasses the use of private collections agencies, civil lawsuits, or criminal prosecution in order to enforce and collect the payment of outstanding pay-to-stay fees.

Ability to Pay Determination

Across the country, there are a few states that require what is called an "ability to pay determination" prior to the imposition of pay-to-stay fees. This is a process whereby an individual's or family's financial assets are assessed to determine whether they can and should pay the fees; in some cases this can result in a reduction or waiver of the fees (Fines and Fees Justice Center, 2020).

However, the standards and steps of this determination process vary across the few states that explicitly require it, and there is limited evidence on whether it actually helps to mitigate the financial burden on incarcerated individuals due to inconsistencies in its application. Critics have further argued that such a process perpetuates the underlying set of fees that have a racially disparate impact, given who is targeted by the criminal legal system to begin with, and continues to harm individuals who nonetheless are required to pay (Zhen, 2019). Furthermore, such a process can be yet another administrative hurdle that incarcerated individuals and their families have to negotiate their way through and an additional operational strain for the courts or other entities administering such assessments (Debt Free Justice California Coalition, 2020).

FIGURE 9

The imposition of the ability to pay determination process varies for each category of fees.	Adult Room & Board Fees	Adult Medical Co-pay	Youth Room & Board Fees	Youth Medical Co-pay
Ability to pay determination required	**5** states	**3** states	**11** states	**9** states
Ability to pay determination specified but not required	**13** states	**10** states	**17** states	**17** states

Resource Garnishment

When it comes to actually collecting pay-to-stay fees, a number of states explicitly allow for the direct garnishing (i.e., collection or deduction) of an individual's resources.

Garnishment may apply to wages, prison accounts, trust funds, and other benefits like Social Security and veterans benefits. The majority of the instances captured in the figure below correspond to automatic deduction from prison wages or accounts to pay off pay-to-stay fees, while others specify mechanisms to garnish from an individual's estate or assets after they are released, sometimes even after their death (Lind, 2015).

FIGURE 10

A number of states allow for the direct garnishing (i.e., collection or deduction) of an individual's resources.	Adult Room & Board Fees	Adult Medical Co-pay	Youth Room & Board Fees	Youth Medical Co-pay
Number of states that explicitly allow for resource garnishment	**23** states	**22** states	**5** states	**5** states

Collection & Enforcement of Pay-to-Stay Fees

In addition to direct garnishment of wages and accounts, states use other mechanisms to enforce and collect payments. Most notably, these include contracting with private collection agencies, filing civil action (civil contempt or civil judgment), and even pursuing criminal prosecution for not paying fees.

Although our research hasn't yielded specific instances of these practices being employed within the realm of pay-to-stay fees, it is important to acknowledge the tools many governments have at their disposal to extract payments from individuals and their families following their release from incarceration.

9 states explicitly **allow for contracting with private collection agencies to collect payment** for at least one fee category.

AZ, FL, IN, KS, KY, LA, OH, OK, VA

27 states explicitly **authorize the use of civil action to recoup unpaid fees** for at least one fee category.

AL, AZ, CT, FL, GA, HI, ID, IN, IA, KS, KY, ME, MI, MN, MS, NE, NH, NM, NC, OK, PA, SC, SD, TN, UT, WI, WY

12 states explicitly **authorize the use of criminal prosecution due to accrued or unpaid fees** for at least one fee category.

AL, CT, GA, KY, NY, NC, OK, SC, TN, UT, WI, WY

Stories from Individuals Affected by Pay-to-Stay Fees

The imposition of pay-to-stay fees across the country is commonplace, but first-hand stories of how they affect individuals during and after incarceration are rarely told.

To better understand the impact of pay-to-stay fees and how they operate in practice, we widely recruited individuals with lived experience through social media and outreach to organizations serving formerly incarcerated individuals. We were able to conduct interviews with three formerly incarcerated adults.

Below are excerpts gathered from interviews conducted by Campaign Zero. The accounts detailed below speak to how pay-to-stay fees impose unreasonable financial burdens on incarcerated individuals and their families, serve as significant barriers to accessing basic services, and hinder successful reentry.

The interview excerpts present near-verbatim accounts of the interviewees. The views, opinions, and experiences expressed therein belong solely to the individuals interviewed, while we acknowledge our editing for clarity and brevity.

"B" Male, 52
California

"I went in and out of incarceration multiple times, starting in 2005. By 2006, I was back in, and the cycle continued until 2017, when I turned my life around after a stint in Maryland. I returned to California and started a business, but then encountered more trouble when I got involved with the wrong person, leading to ongoing legal battles.

I'm currently facing trial for a crime I didn't commit. It's been a downward spiral. I lost my business, my credit, everything I built. My company was my pride, but now I'm struggling just to stay afloat and make it to court appearances.

When I was inside, my family sent money orders, and a significant chunk, 55%, was taken away for fees. Every time my people would send me money orders, they would take out 55% of whatever I was sent in; if my cousins sent me $100, they would give me $45 cash to eat in the canteen and keep $55.

Even now, I owe $4,000 in restitution, but I can't afford to pay it. It's like economic slavery, even outside of prison. The impact of these fees is immense. They don't consider your financial situation; they just take and take. Medical visits incurred additional charges, making it even harder to manage. There were no assessments of my ability to pay. They just threatened to garnish my wages, leaving me with few options to survive. It's a vicious cycle. The system almost forces you to turn back to crime to make ends meet.

If there's one thing I'd change, it's the imposition of restitution fees, especially after release. Penalize me while I'm inside if you must, but let me have a chance to rebuild my life when I'm out."

(Interview with participant B, December 16, 2022, Zoom)

"J" Male, 44 Texas

"I'm an entrepreneur. I like to stay busy. I work for myself and another company. I like cars, especially Corvettes and droptops. I love my kids. My children are number one. I love God—He's at the top of my list. I love God; He's really changed my life. I also love coffee—Starbucks, coffee shops, and techno music. I have a good girlfriend, my fiancée, by my side.

I got arrested in March 2018. It was in the first week of March. The circumstances that led to my incarceration were due to impulse thinking. I was involved with the wrong people, a diamond heist.

While I was locked up, I was charged $100 for medical check-ups, whether it was an annual physical or something minor like a cold.

They charged me for over-the-counter medication that I could have just bought myself. It bothered me a little bit mentally because I was neglecting myself. There was a time when I was kind of sick, and they wanted me to pay another $100 so I put my health off to avoid that fee. And I was thinking like, 'These hoes locked me up, but they want to charge me for medical.'

The fees were automatically deducted from my account. If I didn't have the money, my account would go negative, and I couldn't buy commissary items later on. They should let families bring in small medical and hygiene products, approved by medical staff, to help reduce the costs and improve access for inmates. That would save everyone a lot of money.

After my release, I was clear of all fees, but others I know had to deal with outstanding balances during probation."

(Interview with participant J, July 19, 2023, Zoom)

"T"
Female, 52
North Carolina

"I've been through three different state penitentiaries, and let me tell you, it's tough. People think it's easy, but it's not. Prison is expensive—medical costs, clothes, shoes, even food. The conditions are terrible. It's not right that we have to pay for our medication. Some folks in there don't have the money, so they don't get the help they need. We're still human, even if we're in prison. In North Carolina, the medical fees depended on the medication. You had to get accepted to go to medical. They might see you if you didn't have money, but they'd take the money once you had it. If you left with a bill, it followed you. Medical fees used to be different; they just started charging more.

Everything's expensive in there now. The fees hit you financially and emotionally. You order stuff, but when you get the receipt, you see they've taken it for housing, medical, clothes. It's a constant reminder you're paying to be somewhere you don't want to be.

I've seen people unable to get the medication they need, and it's real. I've always been fortunate enough to handle things myself while I was inside. Money was never a problem for me personally. But let me tell you, it was different for everyone. I was kind of like a loan shark in there, and people would come to me when they needed help, especially if they couldn't afford things like medication for their mental health, diabetes, or seizures. People may have had to trade something or wash some clothes; shouldn't have to wash anybody's underwear to get your medication. It shouldn't have to be like that. And let me tell you, the system isn't exactly compassionate. Unless they see it as an emergency, they'll turn a blind eye to your suffering. They say they'll take care of emergencies, but what qualifies as an emergency? Sometimes, it feels like they're playing judge and jury over your health. Even then, there's no guarantee you'll get the help you need.

They hit you with fees for everything, from housing to medical services. And those debts? Even if the person goes home tomorrow and comes back in three years, that same bill will be waiting for them. It's just like your inmate number; no matter what you do or what crime it is, you are the same number. It's the same thing with a medical bill. It follows you. Those fees go up every year just like everything else, and you only know when they give you the bill or take it out of your check. No matter what it is.

When you first enter, they lay it all out for you. The housing costs, medical fees, you name it. But it's only when you're in there that you realize just how much it adds up. And for someone like me, who's been in and out, it's become a familiar routine. People hustle to get by, selling whatever they can to pay for their basic needs. If I went back today, I would have a bill waiting for me."

(Interview with participant T, December 16, 2022, Zoom)

Call to Action: Repeal & Ban Pay-to-Stay Fees

Our data collection contributes to the body of work on monetary sanctions by providing an overview of what pay-to-stay practices for adult and youth room & board and medical co-pays look like across the U.S. The findings from our review of pay-to-stay policies and statutes further highlight the ubiquity of pay-to-stay fees throughout the country. Although we found that the imposition, collection, and enforcement mechanisms used for pay-to-stay fees differ from state to state, the fact that the vast majority of states allow for the imposition of fees suggests that the number of people impacted by pay-to-stay fees is substantial.

As our interviews and research clearly illustrate, pay-to-stay fees make a deep and lasting impact on individuals both during and after their incarceration. Incarcerated individuals, who already have limited financial resources, have to pay for fees while incarcerated, meaning they often cannot access other goods or services they need. Upon release, any pay-to-stay fee balance that is unpaid becomes a debt that can be garnished from wages or result in criminal or civil action, which makes it difficult for individuals to take care of themselves or their families once they are released. When considering that the majority of those who are incarcerated simply do not have the means to pay these fees, it becomes clear that pay-to-stay policies are yet another way our carceral system preys upon and levies additional taxes on marginalized, low-income communities.

Nationwide, the imposition of pay-to-stay fees in adult & youth correctional facilities must end.

As our statute review indicated, currently all but two states allow for the imposition of some type of pay-to-stay fee. Other states and advocates have experimented with more gradual changes while maintaining pay-to-stay fees, such as implementing ability to pay determinations or prohibiting private collection agencies. But these measures only perpetuate and further legitimize a set of policies that is fundamentally harmful and unjust at its core, while generating additional inequities and administrative hurdles of their own. While some states have repealed certain categories of pay-to-stay fees, no state has explicitly banned them in state statute. But without statutory prohibition, states that have either suspended their pay-to-stay policies, or begun considering policies of their own, remain at liberty to exploit the labor and resources of incarcerated individuals, as well as their families and communities.

Drawing inspiration from states like Illinois and California that have repealed pay-to-stay fees, as well as other jurisdictions that have rolled back different types of criminal legal fines and fees or relieved debt stemming from these fees:

We urge correctional systems and state & local governments across the country to explicitly ban pay-to-stay fees altogether and work towards dismantling the broader web of fines & fees in our criminal legal system that trap justice-involved individuals in cycles of incarceration and debt.

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Appendicies

Appendix A. Data & Methodology

This document presents all the research activities and instruments undertaken and utilized by the campaign. We have chosen to make this document public in order to allow researchers to recreate the data and promote accountability, rigor, and transparency in our work.

Appendix B. Researcher Codebook

This document delineates the steps for data entry, outlines the qualitative coding framework, and contains a table that outlines the variables collected, a description of the variable, specifications, tips, and whether the data is automated or manual. It is used to standardize our data collection efforts, onboard new people to the research process, and allow others to duplicate our work.

Appendix C. Policy Data Airtable

This Airtable houses all the state-specific pay-to-stay policy information we gathered and coded through our research.

Appendix D. FOIA Request Language

This document includes the template language we drafted to submit FOIA requests to each state pertaining to their pay-to-stay policies and records.

Appendix E. FOIA Request Tracker

This tracker captures the status of the FOIA requests we submitted as well as information we were able to gather from the responses.

Appendix F. Fiscal data memo

This document summarizes the fiscal information pertaining to pay-to-stay fees that we gathered through our FOIA requests.

Appendix G. State Survey (Adult)

This is the PDF version of the online survey form we shared with correctional administrators to provide and/or confirm information about the adult pay-to-stay practice in their state.

Appendix H. State Survey (Youth)

This is the PDF version of the online survey form we shared with correctional administrators to provide and/or confirm information about the youth pay-to-stay practice in their state.

Appendix I. Interview Guide

This document lists the questions we prepared for our semi-structured interviews with people directly impacted by pay-to-stay fees.

Appendix J. Interview Participants

This document lists the participants in our interviews. We use pseudonyms to ensure their privacy.