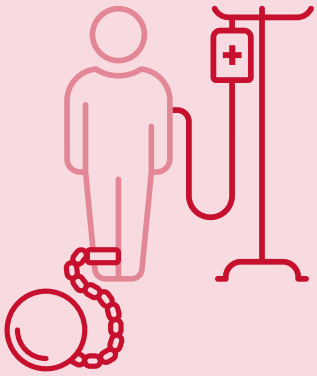
National Consumer Law Center
Fighting Together for Economic Justice

WHAT STATES CAN DO ABOUT

Medical Debt in Jails and Prisons

Overview

The population of individuals incarcerated in jails and prisons across the United States is getting older and sicker. Nearly half of all incarcerated people lacked health insurance before incarceration, making it likely that many enter prison with untreated health conditions. Additionally, nearly half of incarcerated people suffer from substance use disorder and many struggle with mental health issues. As a result, the incarcerated population has a variety of significant medical needs requiring professional care.



In 2021, **40%** of incarcerated people in state prisons and **33%** in federal prisons reported having a chronic health condition.

Incarcerated people are more than **twice as likely** to suffer from chronic health issues and disabilities as the general population.

While jails and prisons cannot legally deny medical care due to a person's inability to pay, many facilities charge various fees, such as medical co-pays, emergency fees, prescription co-pays, medical device fees, and fees for necessary hygiene items.

People generally can't obtain or use public or private health insurance while incarcerated, and incarcerated people are often paid only pennies per hour for their work, if they are paid at all. As a result, many incarcerated people do not have the funds to pay even modest medical fees. Sometimes family members of the incarcerated help pay medical fees, but they are disproportionately low income and financially burdened by such support.

Charging medical fees can lead to unaffordable medical debt and hinder successful reintegration upon release. Medical fees also deter many incarcerated people from seeking necessary care. Untreated illness can lead to worse health outcomes for those who are incarcerated as well as prison staff and their communities.

Eliminate Medical Fees and Provide Free Medical Care in Prisons and Jails

CONSUMER PROBLEMS	STATE SOLUTIONS
Prisons and jails charge for medical care, deterring people from seeking necessary care or leading to burdensome medical debt that can undermine successful reentry.	Eliminate medical fees for incarcerated people, including co-pays, emergency fees, prescription co-pays, medical device fees, and fees for necessary hygiene and medical items.
Prisons and jails release incarcerated individuals on medical bond to receive medical treatment at their own expense and then rearrest them after they get care.	Prohibit medical bond programs used to shift healthcare costs onto incarcerated individuals. Provide free medical care to anyone who is incarcerated.

Stop Collection of Carceral Medical Debt

CONSUMER PROBLEMS	STATE SOLUTIONS
To collect medical debts, prisons may garnish incarcerated individuals' trust accounts and commissary funds, threatening access to necessary hygiene products and over-the-counter medicine.	Cancel outstanding carceral medical debt. Stop involuntary seizure of funds from trust accounts and commissary funds.
Debt collectors add fees, report medical debt to credit bureaus, and harass people for payment, undermining successful reentry.	Cancel outstanding carceral medical debt. Ban credit reporting of such debt. At a minimum, pause collection for those who lack stable work and housing.
There is limited public data about the amount of carceral medical debt and how it is collected.	Require jails and prisons to track and publish data on medical fees charged, outstanding debts, amount collected, collection processes, and costs to collect those fees.

Prevent Private Contractors from Profiting off of Incarcerated People

CONSUMER PROBLEMS	STATE SOLUTIONS
For-profit corporations and private-equity-backed firms provide healthcare services in prisons and jails, raising concerns that the bottom line takes priority over health outcomes.	Stop hiring these companies to provide services. Appoint an independent healthcare ombuds to oversee the carceral healthcare system and resolve patient issues.
Private contractors significantly mark up medical, hygiene, and supplemental food sold to incarcerated people through the commissary.	Provide necessary hygiene items and over-the-counter medication for free. Prohibit commissary markups on essentials that are not provided for free.

Increase Access to Medicaid

CONSUMER PROBLEMS	STATE SOLUTIONS
The federal Medicaid Inmate Exclusion Policy prevents Medicaid reimbursement for most types of medical care provided to individuals while they are incarcerated.	Apply for a Section 1115 waiver to provide Medicaid coverage to eligible incarcerated individuals. Make it easier to restore medicaid enrollment after incarceration.

For more, see NCLC's report Medical Debt Behind Bars: The Punishing Impact of Copays, Fees, and Other Carceral Medical Debt and the Inquest article Medical Debt Behind Bars.

To speak to an expert on carceral medical debt reforms, contact: April Kuehnhoff (akuehnhoff@nclc.org)

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