

SENATE BILL REPORT

SB 5827

As of February 3, 2022

Title: An act relating to offender management network information and electronic health records systems at the department of corrections.

Brief Description: Concerning offender management network information and electronic health records systems at the department of corrections.

Sponsors: Senators Dozier, Gildon, Rivers, Wagoner, Wilson, C. and Wilson, L..

Brief History:

Committee Activity: Human Services, Reentry & Rehabilitation: 1/25/22, 1/28/22 [DPS-WM].

Ways & Means: 2/04/22.

Brief Summary of First Substitute Bill

- Requires the Department of Corrections (DOC) to use a competitive request for proposal process to replace the Offender Management Network Information system with a more efficient and technologically advanced system.
- Requires DOC to implement a comprehensive electronic health records system that can communicate with information and data systems used by managed care organizations, local jails, and the Department of Health for care coordination activities.
- Allows local jails to use the DOC electronic health records system in lieu of maintaining a jail electronic health record system.

SENATE COMMITTEE ON HUMAN SERVICES, REENTRY & REHABILITATION

Majority Report: That Substitute Senate Bill No. 5827 be substituted therefor, and the substitute bill do pass and be referred to Committee on Ways & Means.

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not part of the legislation nor does it constitute a statement of legislative intent.

Signed by Senators Wilson, C., Chair; Nguyen, Vice Chair; Gildon, Ranking Member; Dozier, Saldaña and Trudeau.

Staff: Kelsey-anne Fung (786-7479)

SENATE COMMITTEE ON WAYS & MEANS

Staff: Sarian Scott (786-7729)

Background: Offender Management Network Information System. The Offender Management Network Information (OMNI) system was custom developed for the state in 1998 through contracts with IBM and Sierra Systems. The first phase was put into production in March 2003 and the final phases went live in 2008. Five other systems, together with OMNI, support the full scope of the offender management functions at the Washington State Department of Corrections (DOC). There are 17 common functional areas for corrections management systems, which among others includes sentence calculation, classification, caseload management, security, discipline, health care, programs, release and discharge, and community supervision. DOC's OMNI system covers 13 of the 17 functional areas and uses additional systems that perform the other functions that interoperate with OMNI.

According to DOC, OMNI and the collection of non-OMNI systems performing offender management present business risks to the core mission of DOC, which must meet the highest bar of precision and reliability to protect public safety as well as the safety of DOC staff and incarcerated individuals. OMNI produces invalid results, particularly in sentence calculation, requiring a mitigation strategy that employs 48.4 full-time staff to hand calculate each change in sentence to prevent unintentional early release of or extended time for incarcerated individuals. The monolithic and aging offender management system is difficult to modify and therefore is slow to respond to new requirements and changes in legislation.

Early Release Due to System Error. In December 2015, the state and public learned that, due to a misinterpretation of the requirements in OMNI's sentence calculation functionality, nearly 3200 convicted felons had been released too early over the course of 13 years, and that at least two of these individuals had committed violent crimes while released resulting in the death of two citizens. The defect was traced back to incorrect requirements coded into the Offender Based Tracking System (OBTS), OMNI's predecessor, in 2003 after a Washington Supreme Court ruling required DOC to apply good time credits earned in county jail to state prison sentences. DOC changed its sentence computation coding to comply with the ruling, however, the programming fix contained an inaccurate sequencing that over-credited good time for those with sentencing enhancements. The calculation error was carried forward from OBTS into OMNI when the function was replicated in OMNI's software. The fix to OMNI was implemented in January 2016. One-hundred and sixteen of those released early were required to return to prison due to subsequent crimes or parole

violations committed after their release. At least 60 of the early-released incarcerated individuals were taken back by the state into custody.

DOC applies manual processes as remediation in which all sentences are hand-calculated by staff and verified against OMNI calculations. Per DOC, this manual remediation is expensive, but has been effective in ensuring release date calculations are confirmed.

Feasibility Study. DOC completed a feasibility study in July 2020 to evaluate and identify viable alternatives for potentially replacing OMNI and the collection of systems that together support offender management at DOC. The project conducted market research of available commercial off-the-shelf offender management systems, assessed DOC's existing systems, and developed a set of viable alternatives and high-level implementation plans. DOC also conducted a cost benefit analysis and compared three viable alternatives against a baseline of maintaining the current state of OMNI, which involves costs for maintenance, stabilization, and manual sentencing calculations. Any alternative system would require resources for procuring and implementing a new system.

As a result of the OMNI feasibility study, DOC focused on the sentence calculation function of OMNI, one of the critical areas identified for improvement in the OMNI feasibility study.

Sentence Calculation Function Feasibility Study. In 2021, DOC conducted a follow-up feasibility study to determine whether DOC should replace or modernize the sentence calculation function of OMNI. The sentence calculation function of OMNI is where DOC enters court commitments and calculates when the inmate will be eligible for release. The sentence calculation function also automatically recalculates release dates when an inmate's rate of earned time changes or after a gain or loss of good behavior credits. It determines eligibility for programs based on offense, sentence, and time to serve factors, and enforces court orders such as restitution payments and victim notification. A team of DOC staff conduct manual calculations to independently verify every sentence calculation result produced by OMNI.

The study surveyed the market for available commercial off-the-shelf solutions, reviewed the capabilities, costs, and benefits for each viable alternative, and developed a schedule for implementation. The study determined it was feasible for DOC to purchase a sentencing calculation module as the first phase of replacing OMNI. Based on this work, DOC plans to move forward with a commercial off-the-shelf sentencing calculation software solution.

Electronic Health Records. DOC currently uses a predominantly paper medical records system. Per DOC, the incarcerated population is highly mobile with individuals often being transferred between several facilities during their incarceration. Physical medical charts and files must be stored, transported between facilities, pulled and delivered daily for provider appointments. Despite the extensive movement, paper medical records must be managed to ensure the safe keeping of protected health information. Maintaining continuity of care

presents a challenge for DOC Health Services.

In 2013, DOC completed a feasibility study to outline system specification and business requirements needed to implement an electronic health record (EHR) system. DOC completed a request for information process and submitted a December 2020 report to the Governor and Legislature outlining basic system specifications and recommended next steps necessary for implementation of an EHR. According to this report, an EHR would improve health care delivery, improve accessibility to medical records, provide health care data analytics and informatics, enhance security, produce cost savings and efficiencies, and improve community health and continuity of care for reentry. The proposed next steps were to update business requirements, create a request for proposal, and identify a successful vendor to develop an accurate cost estimate.

Local Jails. A county department of corrections or chief law enforcement officer responsible for the operation of a jail is required to make reasonable efforts to collaborate with managed care organizations for care coordination activities and improving health care delivery and release planning for persons confined in the jail.

Summary of Bill (First Substitute): DOC must update business and technical requirements and use a competitive request for proposal process to replace the OMNI system with a more efficient and technologically advanced system. DOC must conduct a feasibility study on replacing or modernizing OMNI, and identify the sequence of steps and schedule for replacing or modernizing the system, including replacing or modernizing a particular module or function of OMNI as an initial step to replacing or modernizing the entire OMNI system. DOC must leverage existing resources, development plans, and funding to continue to advance any progress already made in replacing or modernizing OMNI.

DOC must update business and technical requirements and use a competitive request for proposal process to implement a comprehensive EHR system that can communicate with information and data systems used by managed care organizations, local jails, and the Department of Health for care coordination activities. DOC's EHR must be available for local jails to use in lieu of a jail EHR if a local jail chooses to use DOC's EHR. Local jails are authorized to use the DOC EHR in lieu of maintaining their own jail EHR. DOC must leverage existing resources, development plans, and funding to continue to advance any progress already made in implementing an EHR system.

DOC must submit an annual report by December 1st to the Governor and appropriate committees of the Legislature with progress updates on replacing OMNI and implementing EHR.

EFFECT OF CHANGES MADE BY HUMAN SERVICES, REENTRY & REHABILITATION COMMITTEE (First Substitute):

- Codifies the progress DOC has already made towards replacing or modernizing OMNI and implementing EHR.
- Clarifies DOC must leverage existing resources, development plans, and funding to continue to advance any progress already made to replace or modernize OMNI and implement EHR.
- Requires DOC's EHR to be able to communicate with information and data systems used by the Department of Health and local jails, in addition to managed care organizations.
- Requires DOC's EHR to be available to local jails and authorizes local jails to use DOC's EHR in lieu of maintaining their own jail EHR.
- Directs DOC to submit an annual report with progress updates on OMNI and EHR.

Appropriation: The bill contains a null and void clause requiring specific funding be provided in an omnibus appropriation act.

Fiscal Note: Available.

Creates Committee/Commission/Task Force that includes Legislative members: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony on Original Bill (Human Services, Reentry & Rehabilitation): *The committee recommended a different version of the bill than what was heard.* PRO: By upgrading and replacing OMNI, this bill will help DOC better interface with other health systems and implement legislation. A better information technology system will provide accountability. The state has faced problems with OMNI in the past, and this is a great use of taxpayer dollars that will result in positive public safety outcomes. This will bridge the communication gap in the current data system and improve agency performance and legislative oversight.

DOC uses a paper health records system and often incarcerated persons with complex health issues have many banker boxes in their cells filled with their medical files.

In addition to managed care organizations, the electronic health records system should communicate with jails and the Department of Health. The electronic health records system should also be available to be used by jails who want to participate if they do not have their own health records system. This will help communication between jails and prisons where a lot of movement back and forth occurs.

Persons Testifying (Human Services, Reentry & Rehabilitation): PRO: Senator Perry Dozier, Prime Sponsor; Jessica Hostetler, Justice Action Network; Marc Stern.

Persons Signed In To Testify But Not Testifying (Human Services, Reentry & Rehabilitation): No one.