



Board of Trustees Meeting

May 22, 2024



Presented for Review and Approval

August 21, 2024

TABLE OF CONTENTS

12. Reconvene Meeting of the Board of Trustees.....	2
13. Stakeholder Connection: A Panel Discussion with ERS State Agency Member Employers.....	2
14. Consideration of Recommendation to Award a Contract for Administration of a Well-being Program - (Action).....	3
15. Consideration of Proposed Fiscal Year 2025 Rates for HealthSelect and Consumer Directed HealthSelect Plans – (Action).....	5
16. Consideration of Proposed Fiscal Year 2025 Rates for the Group Benefits Program Optional Coverages – (Action).....	6
17. Consideration of Retirement Insurance Systems Enhancement (RISE) Project Update.....	8
18. Agency Update.....	9
• 2024 Summer Enrollment Communications	
• Strategic Planning	
• Trustee Self-Evaluation	
• Legislative Appropriations Request for FY 2026-2027	
• 2024 Get Fit Texas State Agency Challenge Results	
• Leasing Update Regarding 1836 San Jacinto Boulevard	
19. Reminder Regarding Future Meetings of the Board of Trustees, Investment Advisory Committee, and Audit Committee	10
20. Adjournment of the Board of Trustees Meeting.....	10

BOARD OF TRUSTEES MEETING
EMPLOYEES RETIREMENT SYSTEM OF TEXAS
May 22, 2024

TRUSTEES PRESENT

Brian Barth, Board Chair
I. Craig Hester, Vice Chair - *Virtually*
Neika Clark, Member
Dr. Stuart Greenfield, Member
Dr. Jim Kee, Member
John R. Rutherford, Member

ERS DIRECTORS PRESENT

Porter Wilson, Executive Director
Cathy Terrell, Deputy Executive Director
Anne Allensworth, Special Advisor
Jennifer Chambers, Director of Government Relations & Special Projects
Tony Chavez, Director of Internal Audit
Blaise Duran, Director of Group Benefits
Bernie Hajovsky, Director of Enterprise Planning
Cynthia Hamilton, General Counsel
Robin Hardaway, Director of Customer Benefits
Shack Nail, Special Projects & Policy Advisor
Machelle Pharr, Chief Financial Officer
Gabrielle Schreiber, Director of Procurement and Contract Oversight
DeeDee Sterns, Director of Human Resources
Kathryn Tesar, Director of Benefits Communications
Chuck Turner, Director of Information Systems
David Veal, Chief Investment Officer

ERS STAFF PRESENT

Georgina Bouton, Group Benefits
Lisa Caffarate, Group Benefits
Amy Chamberlain, Executive Office
Anthony Curtiss, Investments
Kelley Davenport, Executive Office
Kathleen Emory, Office of Procurement and Contract Oversight
Tiffani Jenkins, Benefits Communications
Andrew Keese, Executive Office
David Lacy, Office of General Counsel
Deborah Legg, Group Benefits
Nancy Lippa, Office of General Counsel
Averi Mullins, Group Benefits
Evelin Ramos, Investments
Samantha Ramirez, Investments
Chris Roland, Information Systems
Michele Sowell, Office of Procurement and Contract Oversight
Gabe Torres, Executive Office
Lacy Wolff, Executive Office

ALSO PRESENT

Lee Anderson, CBRE
Ann Bishop, Texas Public Employees Association
Nate Cavender, WebMD
Ilesa Daniels Ross, Retiree
Stephanie DeWitt, Texas Public Employees Association

Philip Dial, Rudd & Wisdom, Inc.
Luther Elmore, AFSCME Retiree
Jim Engler, Express Scripts Inc.
David Gezana, Texas State Employees Union
Rachel Grossman, Virgin Pulse
Kellie Hand, WebMD
Jeff Hardt, United Healthcare
Diana Head, Blue Cross and Blue Shield of Texas
Brian Hendrickson, Express Scripts, Inc.
Ray Hymel, Texas Public Employees Association
ViCharlotte Juarez, Virgin Pulse
Tom Martin, Aksia
Jason Moore, Express Scripts Inc.
Tara Morales, Blue Cross and Blue Shield of Texas
John Posey, Legislative Budget Board
Tyler Sheldon, Texas State Employees Union
Susan Thompson, Virgin Pulse

Meeting of the ERS Board of Trustees

12. Reconvene the Meeting of the Board of Trustees

Board Chair Brian Barth announced the Board of Trustees has reconvened at 1:17 p.m. on Wednesday, May 22, 2024 to take up the remaining items listed on the agenda.

13. Stakeholder Connection: A Panel Discussion with State Employee Associations

Jennifer Chambers, Director of Government Relations and Special Projects, introduced the panelists and served as moderator. Panelists included Stephanie DeWitt, a member and former president of the Texas Public Employees Association. Ms. DeWitt has been a state employee since 1993 and works for the Texas Department of Transportation in San Angelo, Texas. David Gezana is a member of the Texas State Employees Union and is a 24-year state employee. He currently works for the Health and Human Services Commission (HHSC) as a Training and Development Specialist at the Austin State Hospital.

The focus of their comments related to how state benefit offerings are perceived and valued by active state employees. Specifically, both Mr. Gezana and Ms. DeWitt stated both the health and retirement benefits are the key reasons they and other state employees work in the state public sector. Mr. Gezana expressed concerns that the Group 4 cash balance benefit is not well understood, which led to a conversation about the unique challenges that exist at HHSC. As human resource functions are not staffed internally at HHSC but outsourced, ERS may have an opportunity to differently communicate with HHSC employees about benefits. Ms. Clark shared examples of how her HHSC team utilizes ERS to communicate to their employees about the state benefits.

Ms. DeWitt spoke about her personal experience with the HealthSelect plan with the coverage and cost being a critical benefit at an important time. She shared stories of new employees' positive impression of the various health plans and the lifetime annuity retirement benefit. Ms. DeWitt shared that she does hear negative complaints about the network for the dental HMO plan, with too few of the preferred dentists participating. Additionally, she suggested that ERS review the benefit design of the health plan to reflect the aging population of the Texas workforce.

In closing, Ms. DeWitt shared that recent legislative salary increases have improved retention efforts at many state agencies and that she is seeing a trend of employees coming to state employment later in life specifically for the state benefits.

There was no further discussion or questions on this item, and no action was taken.

14. Consideration of Recommendation to Award a Contract for Administration of a Well-being Program – (Action)

Gabrielle Schreiber, Director of Procurement and Contract Oversight, Lacy Wolff, Coordinator for Statewide Well-being Initiatives, and Blaise Duran, Director of Group Benefits, presented the recommendation to award a contract to administer a well-being program and online platform.

Ms. Wolff reported that the well-being program started two years ago with market research and a focus on enhancing the current well-being offerings. The new well-being program is intended to make it easier for employees and their family members to improve their health and overall wellness, including financial wellness. Using a new interactive platform (available via desktop and mobile application), employees, retirees, and their dependents who are enrolled in the HealthSelect of Texas® and Consumer Directed HealthSelectSM (HealthSelect) plans will be able to connect with their benefits and participate in additional wellness services.

The program will provide an interactive platform that personalizes content and recommendations for the five pillars of well-being (physical, emotional, mental, social, and financial); facilitates engagement with well-being through recommended content, individual and team challenges, incentives, targeted communications, and social feed; and includes an administrative dashboard with reporting and data analytics and capability for employers to customize.

Some of the current programs that are available through the TPA include a wellness team that is providing health education virtually and on-site for our health plan participants, and a wellness consultant that does on-site culture and wellness assessments, which is an amazing benefit for our state agencies.

Ms. Schreiber reported that ERS received eight proposals. For the preliminary review phase, ERS evaluated the proposals for minimum requirements, compliance with the RFP, responsiveness, and certain vendor performance checks required by the Texas Comptroller of Public Accounts. ERS passed seven entities through to the proposal review phase:

- ActiveHealth;
- Navigate;
- Sharecare;
- TELUS Health;
- Virgin Pulse;
- Vitality Group; and
- WebMD Health Services.

During the proposal review phase, 20 subject matter experts from 10 ERS divisions reviewed the proposals. They looked at qualifications and services, which accounted for 70% of the total, and 30% of the score was price. Certain items are reviewed on a pass/fail basis during the proposal review phase or finally evaluated in the finalists review phase; these included contractibility, legal requirements, SOC-2 audit reports and financial stability.


Based on the evaluation of pass/fail items, qualifications and services, and price proposals during the proposal review phase, ERS selected three entities as finalists:

- Sharecare;
- Virgin Pulse; and,
- WebMD Health Services.

During the finalists review phase, staff looked at any new and clarified information that might have an effect on the score. This phase used the same breakdown of 70% for qualifications and services, and 30% was allocated to the best and final offer and any negotiations on price. During this phase, staff conducted site visits, which included data center security operations centers, and interviews.

Ms. Schreiber then reported that the total top score in the finalists review phase went to WebMD Health Services. Sharecare was second, and Virgin Pulse came in third.

Well-being Program
Finalists Review Phase – Scoring




	Total 100%	Price 30%	Qualifications and Services 70%
	Total		
WebMD Health Services	86.14	22.29	63.85
Sharecare	82.30	30.00	52.30
Virgin Pulse	67.37	19.76	47.61

Agenda item 14 - Board of Trustees Meeting, May 22, 2024 157

Mr. Duran spoke to the pricing for the term of the contract and stated that in the proposal ERS asked for everyone to propose an administrative fee for the four-year term of the contract. Staff projected the expected enrollment over that four-year term. Based on that, ERS projected prices that ranged from \$7 to \$10 million over the four-year period.

Well-being Program
Finalists Review Phase: Price



Projected Total Cost FY24-FY28

Respondent	Sharecare	WebMD	Virgin Pulse
Projected Total Cost	\$6.6 million	\$8.9 million	\$10.1 million

Agenda item 14 - Board of Trustees Meeting, May 22, 2024 158

Ms. Wolff reviewed the firm’s qualifications and services. Board members were interested in the metrics that will be used to evaluate the program’s effectiveness. Ms. Schreiber said that a key piece of this evaluation was effectiveness and that was a significant portion of the 70% of the score. Ms. Wolff said that staff will look at many factors including engagement – are people actually engaging with the platform? Engagement should lead to impacting risk factors over time and connection to the other benefits, so there will be a health claims component. Ms. Wolff mentioned that we have established metrics that we will use to measure effectiveness including participation in Health Assessments,

Preventive Exams and Weight Management programs as part of the pre-established AMP (Assess, Measure, Prevent) program, which has annual reports to the Board.

Ms. Wolff also said that discussions with the reference checks included questions about efficacy.

Ms. Schreiber thanked all of the vendors that allowed ERS to evaluate their product. Staff recommends that the Board award the contract to the highest scoring vendor, WebMD Health.

There was no further discussion or questions on this item and Mr. Barth asked for a motion to be read.

Move that the Board authorize the executive director to negotiate and execute a contract with WebMD Health Services Group Incorporated with terms that are fully acceptable to ERS. In the event that ERS is not able to negotiate a satisfactory contract with WebMD Health Services Group Incorporated or if they are not capable of providing the required services to ERS's satisfaction during the contract term, then the board authorizes the executive director to resume any necessary due diligence processes and contract negotiations with the other respondents that pass to the finalist phase and to negotiate and execute a contract with terms that are fully acceptable to ERS.

Motion by Craig Hester, second by Neika Clark

Final Result: Motion carries

Aye: Brian Barth, Neika Clark, Stuart Greenfield, James Kee, Craig Hester, John Rutherford

15. Consideration of Proposed Fiscal Year 2025 Rates for HealthSelect and Consumer Directed HealthSelect Plans – (Action)

Blaise Duran, Direction of Group Benefits, and Phil Dial, ERS' consulting actuary with Rudd and Wisdom, presented this agenda item.

Mr. Duran discussed rates for the various group benefit programs for fiscal year 2025 starting with Consumer-directed HealthSelect. HealthSelect is a self-funded plan. Legislative appropriations sets the level of state contribution. Currently, the state pays 100% of the contribution rate for eligible full-time employees and up to 100% of the contribution rate for retirees based on benefits eligible years of service upon retirement, and 50% of the contribution rate for eligible dependents enrolled in HealthSelect. The state contributions are the same for HealthSelect Texas, Consumer Directed HealthSelect and HealthSelect Medicare Advantage.

He then began to speak to the Plan Year 2025 contribution rate analysis, stating that the actuarial and reporting services unit and consulting actuary analyzed the critical factors such as revenue requirements, state funding as determined each biennium in the state budget, historical enrollment, claims experience, projected GBP contingency fund balance, cost containment practices, and funding for basic life and accidental death and dismemberment coverages.

Mr. Duran then covered the history over the last several years of the member-only contribution rates. As far as the projected trends for plan years 2024 and 2025, staff is projecting a 7.9% trend in total for this year which is 6.5 % medical trend and 10.9% pharmacy trend. For Plan Year 2025 projections are for a 7.4% trend with 5.6% medical trend and 11.3% pharmacy trend.

GLP-1s continue to increase prescription drug costs and are expected to exceed \$300 million in total spend in Plan Year 2024. As of April 5, 2024, ERS started covering Wegovy for individuals in HealthSelect Medicare Rx who are overweight and at high risk for a Major Adverse Cardiovascular Event.

Mr. Duran noted that plan design changes recommended for September 1 include compliance with a new legislative requirement for plans to cover up to a three-month supply of contraceptives for first-time fills of a medication, and then cover a 12-month prescription thereafter. Previously, the GBP has not covered a 12-month supply of contraceptives.

He then began to discuss the chronic conditions and cost per participant of chronic conditions. Chronic conditions have a significant impact on the plan: 16% of members have hypertension, 20% have mental health or substance abuse, and 19% have back and joint pain.

Mr. Greenfield asked what the average annual cost is. Mr. Duran responded that the average annual cost for any participant, regardless of condition, is \$6,844.

Beginning with the new HealthSelect administration contract with Blue Cross and Blue Shield on September 1, a number of new Health Management programs will be offered. These enhancements include Hello Heart which is an app-based digital cardiac support program to help manage and prevent high blood pressure, high cholesterol and heart disease. It is a personalized health coach with the ability to connect tracking devices to monitor progress. The program includes a free FDA-approved blood pressure monitor.

The next health management enhancement is the Learn to Live – Mental Health Self-Service Platform. This is a digital program for participants aged 13 and older, which includes a confidential mental health assessment to manage stress, depression, social and generalized anxiety, insomnia, substance use, and panic disorders. It provides 24/7 access to Masters-level clinician coaches available via text, email or phone and live, on-demand webinars for a self-paced experience.

Next is Hinge Health – Digital Musculoskeletal (MSK) support. This is a digital 12-week coach-led program to assist employees in managing MSK disorders like chronic joint and back pain. Comes with a personal health coach, app-delivered exercise therapy and a progress tracking with wearable sensors.

And lastly, ProgenyHealth – Maternal and Infant Health Management. Included as part of BCBSTX Women's and Family Health offerings, ProgenyHealth has a Neonatal Intensive Care Unit (NICU) utilization and care management program and supports discharge, maternal postpartum depression screening and infant clinical support from birth to one year of age.

When setting rates for Consumer Directed HealthSelect, by statute, ERS is required to rate the plan in a manner that is revenue-neutral. Assumptions were developed for the plan design to meet this requirement. Original pricing assumptions were based on a projected 3% enrollment. Currently, Consumer Directed HealthSelect accounts for 1.4% of enrollment. Therefore, to develop rates, ERS continued its original pricing assumptions. Mr. Dial said that this will be the sixth year of level rates, which is unprecedented.

There was no further discussion or questions on this item and Mr. Barth asked for a motion to be read.

Move that the Board approve the proposed Plan Year 2025 rates for the HealthSelect of Texas plans, including Consumer Directed HealthSelect, as set forth in the materials presented with this agenda item.

Motion by John Rutherford, second by Stuart Greenfield

Final Result: Motion carries

Aye: Brian Barth, Neika Clark, Stuart Greenfield, James Kee, Craig Hester, John Rutherford

16. Consideration of Proposed Plan Year 2025 Rates for the Group Benefits Program Optional Coverages – (Action)

Blaise Duran, Director of Group Benefits and Phil Dial, ERS' consulting actuary with Rudd and Wisdom, presented this agenda item.

State of Texas Dental Choice Plan and Dental Health Maintenance Organization Plan

Staff is recommending no contribution increase for Plan Year 2025 for either the State of Texas Dental Choice Plan or the DHMO. The State of Texas Dental Choice Plan continues to be very popular plan among member with over 10,000 new members in March 2024 versus Plan Year 2023.

The Texas Employees Group Benefits Program (GBP) assumes risk for claims and administrative expenses of this self-funded plan. A member-funded coverage, the member contributions must be sufficient to support anticipated costs for the upcoming year. Mr. Duran reported that member contribution rates are based on several points such as claims experience through March 31, 2024; estimated trends in per capita benefit costs; projected provider reimbursement; historical enrollment patterns; contractually guaranteed administrative fees; and notable benefit changes.

Mr. Duran said that the projected experience at the current rate level through Plan Year 2025. Plan years 2023 and 2024 experience was positive and resulted in a gain. That gain will go away as trend increases and a loss is expected for Plan Year 2025. To offset that loss would require a very small rate change, which is not typically recommended. There are sufficient accumulated funds from prior years to cover the initial loss. Staff is recommending no rate increase at this time.

Enrollment continues to decrease in the Dental Health Maintenance Organization, as participants join the State of Texas Dental Choice Plan. The decrease has slowed with 700 members leaving the plan this year. The DHMO is a much lower cost plan with a much smaller network that offers no out of network benefits. This is a fully insured product with member contribution rates set at the premium level that is paid to the insurer.

State of Texas Vision Plan

Mr. Duran noted that staff is not recommending a contribution increase for the Texas Vision Plan for Plan Year 2025. While expenses are expected to continue to exceed contributions there are enough funds accrued from prior years to cover any losses. There was a 17,000 member increase from Plan Year 2023 to Plan Year 2024.

State of Texas Vision is a self-funded plan where the rates have to be set at a level necessary to support claims and administrative expenses. Contributions have to be able to support those costs. Member contribution rates are based on claims experience through March 31, 2024, estimated trends in benefit costs, projected provider reimbursement rates, guaranteed administrative fees, and any plan changes.

Basic and Optional Term Life and Accidental Death and Dismemberment Plans

Staff recommends no contribution change for Plan Year 2025 in connection with Life and Accidental Death and Dismemberment (AD&D) plans.

Life insurance is funded through a fully-insured, minimum-premium arrangement with Minnesota Life, an affiliate of Securian Financial Group, Inc. On a weekly basis, ERS reimburses the insurer in an amount equal to actual life insurance claims paid by the insurer. On a monthly basis, ERS pays the insurer the contractual administrative fees. The minimum-premium arrangement includes maximum premium rates for each coverage type, which are guaranteed for the term of the contract.

Life member rates are based on the last 10 years' experience and anticipated claim-payment patterns, investment income earned on funds held by ERS, and maximum claims rates and administrative fees included in the Minnesota Life contract.

The pandemic caused a significant claims increase, with claims peaking in Plan Year 2021, but have decreased in plan years 2022 – 2024.

Texas Income Protection Plan

Staff recommends no contribution change in Plan Year 2025 for the Texas Income Protection Plan (TIPP). For short-term disability, claims were significantly reduced in plan years 2022, 2023 and 2024. ERS staff is recommending enhancing benefits, rather than a rate decrease. Long-term disability rates were increased in Plan Year 2022 and are expected to be adequate in Plan Year 2025.

Short-term disability benefits currently last approximately five months after a one-month waiting/elimination period. For long-term disability, benefits can last for many years and the maximum benefit period ranges from 12 months to Social Security Retirement Age. There's a six-month waiting/elimination period, which aligns with the duration of the short term disability benefit. This is a self-funded plan, and member contributions fund the benefits.

TIPP member contributions are based on reasonable expectations of future claims, anticipated claim-payment patterns, expected investment income on funds held by ERS, and administrative fees associated with the TIPP benefit administration.

Short-term disability has short-term liabilities and long-term disability claims are longer in duration with experience evaluated over several years.

Due to the reduced incidence of claims in short-term disability, staff recommended a reduction of the waiting period from 30 days to 14 days and a corresponding increase in the benefit period from 150 to 166 days. The waiting period combined with the benefit period still amount to 180 days, in order to align with the waiting period for the long-term disability plan.

There was no further discussion or questions on this item and Mr. Barth asked for a motion to be read.

Move that the Board approve

Motion by James Kee, second by Craig Hester

Final Result: Motion carries

Aye: Brian Barth, Neika Clark, Stuart Greenfield, James Kee, Craig Hester, John Rutherford

17. Consideration of Retirement Insurance System Enhancement (RISE) Project Update

Robin Hardaway, Director of Customer Benefits, Cathy Terrell, Deputy Executive Director, and Chuck Turner, Chief Information Officer, presented this agenda item.

Ms. Terrell stated that in February 2023, ERS selected TELUS Health to partner with and recently completed the first year of the project. This system will run all the benefits at ERS, such as keeping track of retirement contributions, annuity, payroll, insurance, and beneficiary designations. The RISE project will complete in 2030 and will replace the member and retiree portal, internal administration software used by ERS staff, and serve as an employer/vendor interface.

Ms. Hardaway reported that the RISE project will enhance customer service and operations by improving and expanding online functionality to members and agencies, improving the integration of pension and benefit services, creating a 360-degree view of activity allowing ERS staff to better support incoming phone calls and requests, and automating more processes and tasks.

Ms. Hardaway said that two of five project phases are now complete. Phase 1 was the initial project kickoff and planning. Phase 2 was validating ERS requirements. Phase 3 is happening simultaneously with Phase 1 and 2, which is preparing environments for project activities and production. Phase 4 is RISE solution delivery, and Phase 5 is implementation.

Ms. Hardaway explained the Fit Gap breakdown that occurred in Phase 2. In this process the project team clarified all the project requirements to determine if the new system fulfills ERS' requirements.

Mr. Turner explained that the third phase is Environment Provisioning where TELUS Health will set up the necessary software and environments to support development, testing, and training. Phase 4 (RISE Solution Delivery) will start configuring the accessibility and accounts within the environments which includes training, change management, and readiness activities for all users of the system. Phase 5 (Production Implementation) is the actual implementation phase.

Internal users are fully engaged and staff are preparing to work with state agencies and higher education institutions on how they provide data and reporting. Mr. Turner stated there will be a stabilization period following project go-live to address any issues. Once the product is implemented, staff will work with TELUS on a stabilization period during that implementation and cut over.

Ms. Terrell said that currently ERS staff maintains the benefits operation system, while TELSU Health will have that responsibility once the project is live. For instance, TELUS Health would configure changes due to legislation.

Ms. Terrell reported that RISE activities are guided by ERS leadership and supported by staff and consulting resources in addition to the TELUS project staff. There is a project manager on the TELUS Health side and also a project manager at ERS, who work hand-in-hand to make sure there is one project plan, but each has their own responsibilities. Gartner was selected to perform Independent Verification and Validation to provide independent oversight and help ensure the project's successful completion.

There are 65 staff from Customer Benefits, Finance, and Information Systems involved in the RISE Project. Resources are required for working on the project and maintaining current system operations and there may be a need to adjust resources throughout the project to meet required needs.

Ms. Terrell said that the system brings AI capabilities, and staff are still learning about it. This is a seven-year project and staff will continue to update the system moving forward. In a response to a question about health systems integrations by Dr. Greenfield, Mr. Turner stated that our current integrations are mostly file exchanges and there is not a lot of direct system-to-system connectivity. The new system gives more capabilities to do that with partners if they are interested.

Staff answered questions posed by Trustees. There were no further discussion or questions on this item and no action was taken.

18. Agency Update

Executive Director Porter Wilson provided his Agency Update to the Board of Trustees on the following items:

2024 Summer Enrollment Communications –

Kathryn Tesar, Director of Benefits Communications, provided an update on Summer Enrollment. Agency-wide effort and planning usually begins in January or February. It's an opportunity to reach every person who is eligible for insurance benefits when they're more likely to be paying attention to those benefits, because they have the opportunity to make a choice. This includes employees, retirees, and smaller populations of people who are enrolled through COBRA as well as survivors. Information given includes plan overviews, upcoming changes, tips for best use and the value of benefits.

There are some challenges with communications, such as lack of engagement except when there's a problem, the information is complex, and also limited direct access to members. ERS likes to meet them where they are such as online on websites, webinars and e-newsletters, at home or at the office with HR departments and enrollment fairs.

ERS has a very comprehensive website leading up to summer enrollment, with pages that are dedicated specifically to summer enrollment. There were about 11,000 visits in 2023 on the ERS enrollment pages. There are 18 scheduled webinars for this year's summer enrollment, and electronic newsletters sent out to employees (monthly) and retirees (quarterly) with relevant articles leading up to enrollment.

There are 28 scheduled summer enrollment fairs, including ones in the Austin, Fort Worth and Houston areas. Dr. Greenfield asked Ms. Tesar if the ERS website search function could be enhanced. Ms. Tesar responded that enhancing the search function is currently in process, as part of revamping the entire website.

Strategic Planning –

ERS is currently undertaking the biennial strategic planning process. ERS collects input from external stakeholders on ways to achieve goals and better serve the employees and retirees of the State of Texas. There will be a stakeholder connection series and meetings with advisory committees, association groups and leadership at various state agencies.

Trustee Self-Evaluation –

The Board self-evaluation survey happens every two years and the previous survey was conducted in 2022. The survey will launch in late June of this year, and results will be presented at the August 21, 2024 Board meeting. This evaluation allows Trustees to anonymously evaluate the Board's performance individually and as a board collectively.

Legislative Appropriations Request for Fiscal Years 2026 – 2027 –

The Legislative Budget Board and Governor's Office determine what is included as the base level of each legislative session. ERS would expect to request additional funding to address the health care costs as an exceptional item to account for the depletion of the fund balance.

2024 Get Fit Texas State Agency Challenge Results –

There were more than 40,000 statewide participants in the Get Fit Challenge. This challenge asks participants to be active 30 minutes a day, five days a week over a 10-week period. There were more than 100 participating organizations. This year, ERS came in second place in our size category, with the Texas Higher Education Coordinating Board taking first place. ERS increased participation higher than ever before within the agency.

Leasing Update Regarding 1836 San Jacinto Boulevard –

ERS finalized the lease contract with Capitol Café. Capitol Café will occupy the southeast corner of the 1836 San Jacinto building. Final construction design and bidding and procurement activities will start in the coming weeks.

ERS has signed a Letter of Intent and is in lease negotiations with another full service food and beverage operator for the first floor north end of the 1836 San Jacinto building.

There was no further discussion or questions on this item and no action was taken.

19. Reminder Regarding Future Meetings of the Board of Trustees, Investment Advisory Committee, and Audit Committee

The next meeting of the Board of Trustees, Investment Advisory Committee, and Audit Committee will be held on August 21, 2024.

Fiscal Year 2024 Meeting Dates

2-day Workshop:
Tuesday, December 5, 2023
Wednesday, December 6, 2023

Wednesday, March 20, 2024
Wednesday, May 22, 2024
Wednesday, August 21, 2024

20. Adjournment of the Board of Trustees Meeting

The Board of Trustees adjourned at 3:48 p.m. on Wednesday, May 22, 2024.