



BOARD OF DIRECTORS'
MEETING AGENDA
OCTOBER 13, 2026



State Office of Risk Management

300 W. 15TH, AUSTIN, TEXAS 78701 / P.O. BOX 13777, AUSTIN, TEXAS 78711-3777
(512) 475-1440, FAX (512) 370-9025 / WWW.SORM.TEXAS.GOV

Public Meeting

Board of Directors (Hybrid)

October 13, 2026, 9:30 a.m.

Barbara Jordan State Office Building

1601 N. Congress, Room 2.029

Austin, Texas and Via Zoom

https://www.zoomgov.com/webinar/register/WN_TN3N5zABQSGP3I5H4jWMjw

1. Call to order, roll call, and recognition of a quorum
2. Consideration and possible action to excuse Board member absences
3. Approval of the minutes from July 21, 2026, meeting
4. Presentation and discussion by the Executive Director of selected highlights from the Agency Operations Report concerning administrative, fiscal, compliance, human resources, claims operations, enterprise risk, legal management, and technology, with agency staff available to respond to Board questions
5. New business
 - 5.1 Presentation, discussion, and action on the FY2026 Annual Internal Audit Report Draft, FY2027 Proposed Internal Audit Plan and Internal Audit Charter
 - 5.2 Discussion of Claims Process and Payments Audit and Follow-up on Open Audit Findings

Individuals who may require auxiliary aids or services for this meeting should contact Jacqueline Guzman at (512) 936-1564 or jacqueline.guzman@sorm.texas.gov at least two days prior to the meeting so that appropriate arrangements can be made.

*All public comments must be emailed to Ms. Guzman by noon the day prior to the meeting. In the subject line of your email, please include the meeting date and topic of your comment. All comments received by this deadline will be read or summarized at the meeting and included in full to the official record of the meeting.



300 W. 15TH, AUSTIN, TEXAS 78701 / P.O. BOX 13777, AUSTIN, TEXAS 78711-3777
(512) 475-1440, FAX (512) 370-9025 / WWW.SORM.TEXAS.GOV

6. Executive Session (closed session):

Recess pursuant to Section 551.074, Government Code, to discuss the evaluation of a public officer or employee

Pursuant to Section 551.071, Government Code, consultation with legal counsel to receive legal advice on items posted on this agenda; or consultation on a matter where SORM seeks the advice of its attorney as privileged communications under the Texas Disciplinary Rules of Professional Conduct of the State Bar of Texas

7. Reconvene in Open Session for possible action on matters considered in Executive Session, such as, but not limited to:

- 7.1 Discussion of the Executive Director Performance Appraisal, including consideration of revisions to the Executive Director Performance Appraisal and possible adoption of the document (closed in accordance with Section 551.074, Government Code)
- 7.2 Discussion regarding delegation of authority to the Executive Director to negotiate and execute an addendum to the audit contract with existing vendor (closed in accordance with Section 551.074, Government Code)

8. Recognition and Appreciation of Former Board Chair Gerald Ladner for His Distinguished Service and Leadership to the State Office of Risk Management Board

9. Public comment*

10. Discussion and possible action on future meeting dates

11. Adjournment

Individuals who may require auxiliary aids or services for this meeting should contact Jacqueline Guzman at (512) 936-1564 or jacqueline.guzman@sorm.texas.gov at least two days prior to the meeting so that appropriate arrangements can be made.

*All public comments must be emailed to Ms. Guzman by noon the day prior to the meeting. In the subject line of your email, please include the meeting date and topic of your comment. All comments received by this deadline will be read or summarized at the meeting and included in full to the official record of the meeting.



State Office of Risk Management

300 W. 15TH, AUSTIN, TEXAS 78701 / P.O. BOX 13777, AUSTIN, TEXAS 78711-3777
(512) 475-1440, FAX (512) 370-9025 / WWW.SORM.TEXAS.GOV

BOARD MEMBERS	DATES OF TERM	HOMETOWN
Elizabeth "Lisa" Maciejewski-West, Chair	02/01/2029	Horseshoe Bay
Jason Hartgraves	02/01/2027	Dallas
Jason Boatright	02/01/2031	Dallas
Jeffrey "Jeff" Houston	02/01/2031	Dripping Springs

1. Call to order, roll call and recognition of a quorum.

Information

The Chair:

1. Calls the meeting to order;
2. Identifies the board members present.

Action Required

The Chair recognizes a quorum.



State Office of Risk Management

300 W. 15TH, AUSTIN, TEXAS 78701 / P.O. BOX 13777, AUSTIN, TEXAS 78711-3777
(512) 475-1440, FAX (512) 370-9025 / WWW.SORM.TEXAS.GOV

2. Consideration and possible action to excuse board member absences.

Information

Board member absences may be excused for good cause as determined by the Board.

Action Required

The Chair may entertain a motion for consideration and possible action to excuse previous absences, if any.



State Office of Risk Management

300 W. 15TH, AUSTIN, TEXAS 78701 / P.O. BOX 13777, AUSTIN, TEXAS 78711-3777
(512) 475-1440, FAX (512) 370-9025 / WWW.SORM.TEXAS.GOV

3. Approval of the minutes from the July 21, 2026, meeting.

Information

Attached are the minutes from the July 21, 2026, meeting.

Action Required

The Chair may entertain a motion for approval of the minutes, with any amendments.



**Minutes of the Public Meeting
on
July 21, 2026**

The following Board of Directors meeting was held in-person and virtually, with the option for members of the public to view the meeting via Zoom.

Board Members present in-person were Gerald Ladner (Chair), Elizabeth “Lisa” Maciejewski-West (Vice Chair), Jason Hartgraves, and Jeffrey “Jeff” Houston (Internal Audit Liaison). Board Member attending virtually was Jason Boatright.

- Item 1. Board Chair Ladner called the public meeting to order at 9:30 a.m. on July 21, 2026. Board Chair Ladner recognized Members present. A quorum was established.
- Item 2. Consideration and possible action to excuse previous Board Member absences.
Board Chair Ladner noted that Board Member Jason Boatright was absent from the April 14, 2026, Board meeting due to a conflict.

A motion was made and seconded to excuse Board Member Boatright’s absence. The motion carried unanimously.
- Item 3. Consideration and possible action on the minutes from April 14, 2026 and May 26, 2026 Board meetings.

A motion was made and seconded to approve April 14, 2026 and May 26, 2026 meeting minutes. The motion carried unanimously.
- Item 4. Presentation and discussion of the Agency Operations Report (AOR) concerning administrative, fiscal, compliance, human resources, claims operations, enterprise risk, legal management, and technology.

Executive Director Sara Hays provided an executive update and reported that preliminary information from the Division of Workers’ Compensation (DWC) indicated that SORM was likely to achieve top-tier status under performance-based oversight. Executive Director Hays explained the agency

was within the rebuttal period, and official results were expected to be announced by the Division of Workers' Compensation in October.

Executive Director Hays reported the Strategic Plan had been completed and submitted, and staff had begun preparing the agency's Legislative Appropriations Request. She explained that agency leadership was reviewing program areas, operational needs, and salary competitiveness to ensure the request accurately reflected resources needed to support the agency's mission.

Executive Director Hays also provided an update on the new leave request system developed collaboratively by Human Resources and Information Technology. She reported the system has been functioning successfully since its April 2026 implementation, and it has improved tracking, reporting, efficiency, and accountability.

Executive Director Hays discussed the results of the Survey of Employee Engagement. She noted SORM continued to maintain positive employee engagement results, while identifying areas for improvement, including compensation, professional development, and internal communication.

Executive Director Hays recognized Kate Sidora, the agency's new Government Relations and Communications Director, and discussed her role in coordinating legislative, media, stakeholder, executive, and Board communications. Executive Director Hays recognized new Claims employees, internal promotions, and the agency's new Training Consultant Team Lead. She also discussed recent employee retirements and the agency's focus on succession planning and knowledge transfer.

Tony Bennett, Director of Financial Management, presented the FY2026 third-quarter consolidated budget. Director Bennett reported agency expenditures remained below the percentage of the fiscal year completed and noted the agency continued to operate conservatively.

Board Chair Ladner asked whether the agency was considering future strategic investments to improve efficiency, including the potential use of artificial intelligence.

Director Bennett explained that several projects were being considered as part of the agency's Biennial Operating Plan and Legislative Appropriations Request.

Vice Chair Maciejewski-West asked about remaining capital expenditure funds and whether those funds were anticipated to be spent during the final quarter. Director Bennett explained the agency's authority to carry certain funds forward through riders and discussed how SORM's interagency funding structure differs from agencies funded directly through General Revenue.

Vice Chair Maciejewski-West also asked how current spending levels could impact future funding requests. Director Bennett explained that SORM's funding model provides flexibility to adjust collections from client agencies based on actual claims activity and administrative expenses.

Director Houston asked whether the statewide three-percent budget reduction requirement would apply to SORM.

Executive Director Hays explained the agency was seeking additional guidance because SORM is not directly funded through General Revenue. She stated the Board would be updated once clarification was received.

Board Chair Ladner asked what options would be available if a budget reduction negatively affected agency staffing or operations. Executive Director Hays explained that although there is not a formal appeal process, the agency could work with the Legislature, Legislative Budget Board, and Governor's Office; and/or the agency could consider exceptional items or other legislative options, if necessary.

Andrew Velasquez, Director of Human Resources, presented recruitment, turnover, retirement eligibility, training, and workforce information.

Board Chair Ladner asked about university outreach and recruitment efforts. Director Velasquez explained the agency was expanding recruitment efforts through universities, the Texas Workforce Commission, veteran programs, and other workforce partnerships.

Director Hartgraves asked which positions experienced the greatest turnover. Director Velasquez reported that Claims Adjusters represented the largest percentage of separations and discussed compensation, workload, career-path clarity, and private-sector competition as contributing factors.

Board Chair Ladner asked whether the agency was communicating the total value of the State benefits package when recruiting employees. Director Velasquez explained Human Resources is revising job postings and employment information to better communicate retirement, leave, and other benefits available through state employment.

Vice Chair Maciejewski-West asked about the average tenure of Claims Adjusters leaving the agency. Director Velasquez reported that a recent benchmark study showed Claims Adjusters generally leave after approximately two to four years of employment, often for private-sector opportunities.

Tawn Ihnen, Director of Information Technology, presented the Information Technology Report and discussed infrastructure and application support, service desk activity, cybersecurity, multifactor authentication, internal application improvements, and technology projects.

Director Ihnen reported the agency continues to evaluate artificial intelligence functionality within Origami and other potential AI solutions. She discussed ongoing user acceptance testing and plans to work with the Department of Information Resources Innovation Team to identify potential use cases.

Director Houston asked about opportunities and anticipated timelines for adopting AI technology. Director Ihnen explained the agency is continuing to evaluate use cases, including optical character recognition and other tools that could reduce paper-based processes and improve employee workflows.

Executive Director Hays presented the Contract Administration Update and discussed expenditure reviews, payment approvals, invoice quality assurance, vendor performance monitoring, and implementation of the agency's internal audit contract. She reported the scheduled audit of claims processing and payments was underway.

Mitchell Griffin, Director of Claims Operations, presented third-quarter claims activity and reported that the agency received 1,831 claims during the quarter and ended the quarter with 1,951 open claims.

Board Chair Ladner asked about catastrophic claims and lifetime income benefits and whether additional information could be included in future Agency Operations Reports.

Director Griffin explained lifetime income benefits were currently included within overall expenses, but they could be separately reported. He also discussed the agency's ability to track higher-cost and catastrophic claims.

Board Chair Ladner requested additional claims information be incorporated into future reports.

Director Griffin discussed leading causes of claims and reported that aggression continued to be the leading cause, followed by slips and falls and miscellaneous causes.

Vice Chair Maciejewski-West asked about the use of external cause codes and opportunities to obtain additional details regarding injuries. Director Griffin explained that medical documentation includes information regarding how an injury occurred, but the agency was not currently correlating the information through external cause codes. He stated that this could be evaluated as an opportunity to obtain additional claims data.

Board Chair Ladner asked whether aggression-related claims were increasing over time. Director Griffin reported the agency had experienced an upward trend and discussed the impact of increasing employee populations in agencies, such as correctional facilities, state hospitals, and state-supported living centers.

Board Chair Ladner asked whether the agency tracks late reporting of claims by client agencies. Director Griffin confirmed the information could be tracked by comparing the date of injury to the date reported to SORM.

Board Chair Ladner recommended including late reporting information because it could identify opportunities for additional training with client agencies.

Director Hartgraves requested that future Claims Reports include comparisons to the same quarter from the prior year to better demonstrate trends. Director Griffin agreed and noted that the fourth-quarter report could also provide comparisons across fiscal years.

Director Houston discussed the potential use of artificial intelligence to analyze claims information, identify trends, improve operations, and identify potential cost savings.

Director Griffin agreed that claims analytics could benefit from AI but emphasized that claims data contains personally identifiable information and would require an appropriately secure environment.

Director Griffin also presented Regulatory Compliance information and reported strong compliance rates related to timely payment of temporary income benefits and impairment income benefits.

Todd Holt, Deputy Executive Director, presented the Medical Management Report following the retirement of the agency's Medical Management Director. Deputy Executive Director Holt discussed medical bill auditing, fee schedule requirements, provider networks, preauthorization, prescription costs, and medical cost savings.

Vice Chair Maciejewski-West asked how medical savings were calculated and whether the reported amount included the difference between provider billed charges and amounts allowable under the applicable fee schedule.

Deputy Executive Director Holt explained the reported savings reflected the difference between billed charges and the amount paid after application of the Texas workers' compensation fee guidelines and audit process.

Vice Chair Maciejewski-West also asked about denied preauthorization and whether the agency could distinguish between denials based on medical necessity and those resulting from a provider failing to obtain required authorization.

Deputy Executive Director Holt and Director Griffin explained that both circumstances occur and discussed circumstances in which preauthorization requirements may be waived due to emergency or other unique circumstances.

Lydia Scranton, Chief of Internal Operations and Chief Financial Officer, provided an update regarding the transition within Medical Management following recent retirements. Chief Scranton explained that Amber Winsboro, Intake Management Director, had temporarily assumed responsibility for the area to maintain continuity, staff stability, training, and knowledge transfer.

Vice Chair Maciejewski-West asked whether the assignment was permanent. Chief Scranton explained that the arrangement was temporary while Executive Leadership evaluated the necessary long-term organizational structure.

Ron Johnson, Director of Legal Management, presented information regarding benefit dispute resolution, contested case hearings, special investigations, fraud referrals, and recovery services.

Board Chair Ladner asked whether Origami included tools that could assist with identifying potentially fraudulent claims. Director Johnson explained the current process remained largely dependent on adjuster identification and investigation, but AI could potentially provide additional capabilities in the future.

Board Chair Ladner recommended the agency consider learning from Texas Mutual regarding its use of artificial intelligence.

Vice Chair Maciejewski-West asked whether Origami could perform provider-level data mining to identify potential overutilization, overprescribing, or other unusual provider trends.

Director Johnson stated that the current process was largely manual and agreed that additional data-mining capabilities could be beneficial. Information Technology advised that additional Origami capabilities and options could be evaluated.

Director Johnson also reported that recovery services had exceeded the agency's annual projection and that additional recoveries were anticipated before the end of the fiscal year.

Mark Chadwick, Director of Enterprise Risk, presented updates regarding Risk Management consultation visits, Risk Management Program Reviews, the Statewide Insurance Program, and the Statewide Continuity Program. Director Chadwick reported the agency was projected to meet or exceed statutory consultation requirements and required Risk Management Program Reviews had been scheduled for completion.

Board Chair Ladner asked how the agency tracks implementation of risk management recommendations by client agencies. Director Chadwick explained Origami provides improved visibility into recommendations issued to client agencies and allows the agency to identify areas where additional assistance may be needed.

Board Chair Ladner also asked whether SORM should consider providing risk management guidance to other state agencies as they evaluate and implement artificial intelligence. Director Chadwick agreed that emerging AI risks were an area the agency should continue exploring.

Chief Scranton presented the agency's Legislative Budget Board (LBB) performance measures and explained the measures had recently been reviewed by the LBB with no additional changes recommended.

Director Houston asked for clarification regarding performance-measure targets and whether particular measures were intended to be met, exceeded, or remain below the established target.

Chief Scranton explained that some measures are considered high measures and others are low measures, and she agreed to provide the Board with additional information identifying how each measure should be interpreted.

Board Chair Ladner asked about potential areas of interest in preparation for the 2027 Legislative Session.

Chief Scranton explained that several potential initiatives, including technology and cybersecurity matters, would be discussed further during the appropriate Board workshop or executive session because certain security-related information should not be discussed publicly.

Item 5. Presentation, discussion, and possible action on the FY2027 Workers' Compensation and Administrative Budgets.

Chief Scranton presented the recommended FY2027 budget amounts and explained the figures were based on amounts established within the agency's General Appropriations Act bill pattern.

A motion was made and seconded to approve the recommended FY2027 Workers' Compensation Budget in the amount of \$45,670,000. The motion carried unanimously.

A motion was made and seconded to approve the recommended FY2027 Administrative Budget in the amount of \$12,562,873. The motion carried unanimously.

Item 6. No public comment.

Item 7. Discussion and possible action regarding future Board meeting dates.

Vice Chair Maciejewski-West advised she would not be available for the previously proposed October 20, 2026, meeting date and requested consideration of October 13, 2026.

Board Members discussed availability and agreed to schedule the next Board meeting for October 13, 2026.

Board Members also discussed potential FY2027 meeting dates. The Board identified January 14, 2027, as the preferred January meeting date and discussed potential dates in April and July 2027, with preference expressed for the earlier proposed dates.

Item 8. Board of Directors and staff discussion regarding matters considered for a Board workshop. Discussion occurred regarding items that had been intended for consideration during a Board workshop. Because the workshop had not occurred as originally intended, a motion was made to table the remaining workshop-related items until a future workshop could be scheduled.

The Board agreed to table the items.

Item 9. Executive Session.

Board Chair Ladner announced that the Board would enter Executive Session at approximately 11:16 a.m. following a brief recess.

Following Executive Session, Board Chair Ladner reconvened the public meeting at 11:42 a.m. and reported that no action was taken during Executive Session. Chair Ladner stated that the Board discussed agency performance objectives, which would be finalized at a future Board meeting.

Board Chair Ladner announced that July 21, 2026, would be his final Board meeting and that his resignation would be effective August 31, 2026. Chair Ladner discussed his service to the agency, recognized the agency's growth and response to significant challenges during his tenure, and thanked Board Members and agency staff for their service.

Chair Ladner advised that Vice Chair Maciejewski-West would continue in Board leadership pending action by the Governor's Appointments Office regarding the selection of a new presiding officer.

Item 10. Board Chair Ladner called the meeting adjourned at 11:44 a.m.



State Office of Risk Management

300 W. 15TH, AUSTIN, TEXAS 78701 / P.O. BOX 13777, AUSTIN, TEXAS 78711-3777
(512) 475-1440, FAX (512) 370-9025 / WWW.SORM.TEXAS.GOV

4. Presentation and discussion of Agency Operations Report

Presentation of division reports

Information

Executive Director will be available to summarize agency and division activities and provide additional information requested by the Board. Agency staff will be available to respond to Board questions.

Board identification of key metrics or other components for inclusion or removal in subsequent reports.

Action Required

No official action required.



AGENCY OPERATIONS REPORT FY26Q4

TO THE

SORM BOARD OF DIRECTORS

October 13, 2026

EXECUTIVE SUMMARY	3
AGENCY OPERATIONS	4
AGENCY BUDGET AS OF AUGUST 31, 2026.....	4
HUMAN RESOURCES	5
TRAINING AND OUTREACH.....	6
INFORMATION TECHNOLOGY.....	7
CONTRACT ADMINISTRATION	9
STATUTORY MISSIONS	10
CLAIMS OPERATIONS	10
REGULATORY COMPLIANCE	17
MEDICAL MANAGEMENT	19
LEGAL MANAGEMENT	23
GOVERNMENT RELATIONS	25
ENTERPRISE RISK	27
PERFORMANCE MEASURES	30
SORM PERFORMANCE MEASURES	30
REPORTED PERFORMANCE MEASURE DATA	30

EXECUTIVE SUMMARY

I. FISCAL YEAR 2026 OVERVIEW

SORM closed the fiscal year with sound fiscal management, strong statewide risk-management delivery, and substantial medical-cost controls. Key attention areas for FY27 are rising claims volume, continued payment timeliness for income benefits, workforce succession, continuity-plan compliance, and secure technology modernization.

II. LEGISLATIVE REPORTING

The Agency has submitted its Legislative Appropriations Request (LAR) and Biennial Operating Report as required. We have met with the Governor's Budget & Policy Office, the Senate Finance Committee, and the House Appropriations Committee to review our LAR and exceptional items requests.

III. PERFORMANCE BASED OVERSIGHT

The Division of Workers' Compensation has released the official findings for the biennial Performance-Based Oversight (PBO) review period which concluded on June 30, 2026. As expected, we were notified in September that SORM achieved Top Tier status.

IV. RISK MANAGEMENT PERFORMANCE MEASURES

SORM exceeded its annual consultation goal with 267 visits and completed all 25 required risk-management program reviews.

V. EMPLOYEE ENGAGEMENT

We continue to prioritize employee engagement. We have conducted three staff meetings to gather feedback from employees on the Survey of Employee Engagement. We have sent eight directors to the LBJ School Management Development training, and Lydia Scranton was accepted into the Governor's Executive Management Training. We continue to explore ways to offer additional training and growth opportunities to all staff.

VI. PERSONNEL UPDATES

- A. We are pleased to welcome Kelly Verootis as our Chief of Claims Operations. She oversees Intake Management, Medical Cost Containment, and the Claims Management divisions within the agency. Kelly joined the agency on September 1 and has already become a valuable member of our team. She was previously with the Division of Workers' Compensation and brings a wealth of extensive experience with her including, but not limited to, training, customer service management, and deep knowledge of workers' compensation laws and rules.
- B. We have also filled an additional six positions within the agency and are excited to have these new hires on board and look forward to the contributions they will make to our mission.

VII. RETIREMENTS

Although we had three retirements in Q4 of FY 2026, we have had no retirees since our last Board meeting. We do have 11 employees that are eligible to retire during FY27.

AGENCY OPERATIONS

AGENCY BUDGET AS OF AUGUST 31, 2026

Objects of Expense	Initial Budget	Adjustments Transfers (= In, - Out)	Revised Budget:	Expenditures	Encumbrances	Remaining Budget	Unpaid Expenses Incurred	Percent of Budget Expended/Incurred	Percent of Fiscal Year Elapsed
Salaries & Wages	8,348,974	-400,000	7,948,974	6,721,845	0	1,227,129	0	84.6%	100.0%
Other Personnel Costs	200,000	500,000	700,000	647,329	0	52,671	0	92.5%	100.0%
Professional Services	1,800,000	-100,000	1,700,000	1,403,075	0	296,925	0	82.5%	100.0%
Consumable Supplies	35,000	0	35,000	15,680	0	19,320	3,910	56.0%	100.0%
Utilities	10,000	100,000	110,000	91,713	0	18,287	0	83.4%	100.0%
Travel	120,000	-40,000	80,000	36,926	0	43,075	0	46.2%	100.0%
Rental of Space	720	0	720	720	0	0	0	100.0%	100.0%
Rental of Equipment	24,000	10,000	34,000	20,806	0	13,194	0	61.2%	100.0%
Operating Costs	2,024,179	-70,000	1,954,179	1,677,147	0	277,032	24,321	87.1%	100.0%
Capital Expenditures	0	685,272	685,272	197,903	0	487,369	0	28.9%	100.0%
Risk Management Information System (Authorized by HB500)	1,194,904	0	1,194,904	597,452	0	597,453	0	50.0%	100.0%
TOTAL	13,757,777	685,272	14,443,049	11,410,596	0	3,032,453	28,231	79.2%	100.0%
Objects of Expense	Initial Budget	Adjustments Transfers (= In, - Out)	Revised Budget:	Expenditures	Encumbrances	Remaining Budget	Unpaid Expenses Incurred	Percent of Budget Expended/Incurred	Percent of Fiscal Year Elapsed
Indemnity	20,439,628	0	20,439,628	18,716,616	0	1,723,012	0	91.6%	100.0%
Medical	25,798,122	(2,670,000)	23,128,122	21,905,499	0	1,222,623	0	94.7%	100.0%
Total Exps.	46,237,750	0	43,567,750	40,622,115	0	2,945,635	0	93.2%	100.0%
Subrogation and Restitution	(567,750)	0	(567,750)	(987,698)		419,948		174.0%	100.0%
NET TOTAL	45,670,000	0	43,000,000	39,634,417	0	3,365,583	0	92.2%	100.0%

HUMAN RESOURCES

New Hires	Posted Vacancies
Myesha Milo – Claims Adjuster	Deputy General Counsel
Constance Conerly – Contract Manager	Training and Development Specialist
Kelly Verootis – Chief of Claims Operations	Risk Manager III
Brandon Pascall – Business Analyst	Accountant III
James Alvarez – Claims Supervisor	Systems Administrator IV
Caroline Cotner – Receptionist	Systems Analyst IV
Katherine Norman – Receptionist	

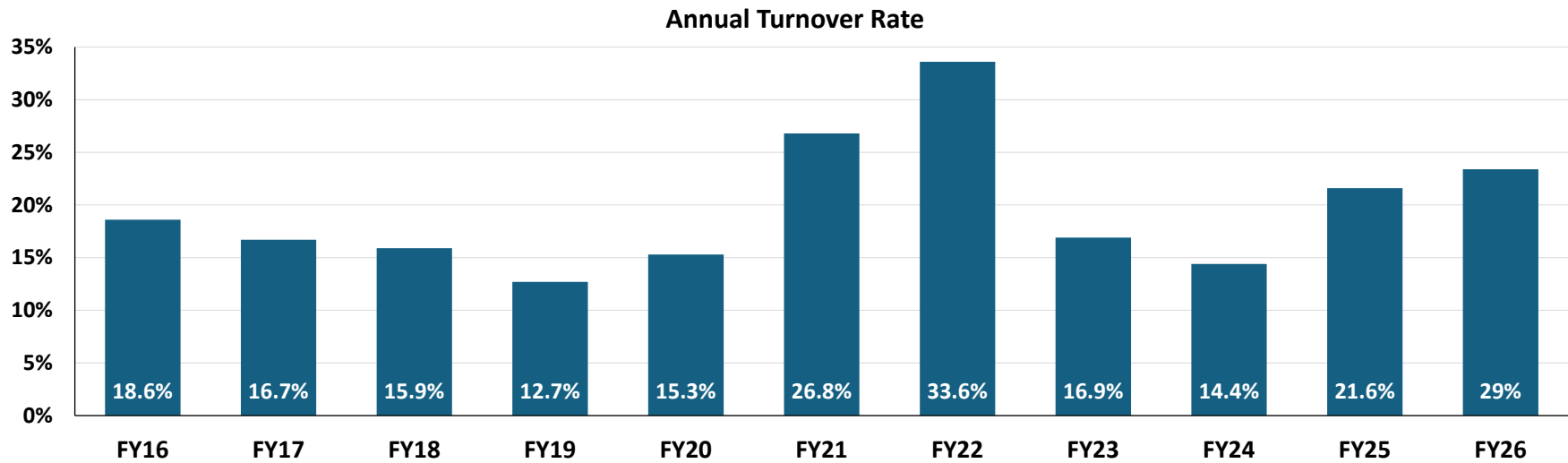
Recruitment Efforts FY26Q4

Recruitment Methods	Recruitment Count
CAPPS	214
Handshake	5
LinkedIn	2
State Employee	14
WIT	2
Agency Website	5
Various Job Boards	4
TOTAL	246

Employment Separations FY26Q4

Retirements		Voluntary Separations Not Including Retirements		Involuntary Separations	
Number of Separations	Turnover Rate	Number of Separations	Turnover Rate	Number of Separations	Turnover Rate
3	3.3%	1	1.1%	1	1.1%

TOTAL: 5.5%



Number of Employees Eligible to Retire FY27 - FY29*

FY27	FY28	FY29
11	1	3

*As of July 7, 2026

TRAINING & OUTREACH

Instructor Led Agency Training for FY26Q4

Course Name	Classes	Students
Additional Duty Safety Officer (ADSO)	1	15
TOTAL	1	15

Self-Paced LMS Training FY26Q4

Virtual Course Name	Students
Drivers Safety	3,825
15 Passenger Van Safety	158
Heat Safety & Prevention	69
RMIS – How To	27
Claims Coordinator	7
TOTAL	4,086

INFORMATION TECHNOLOGY

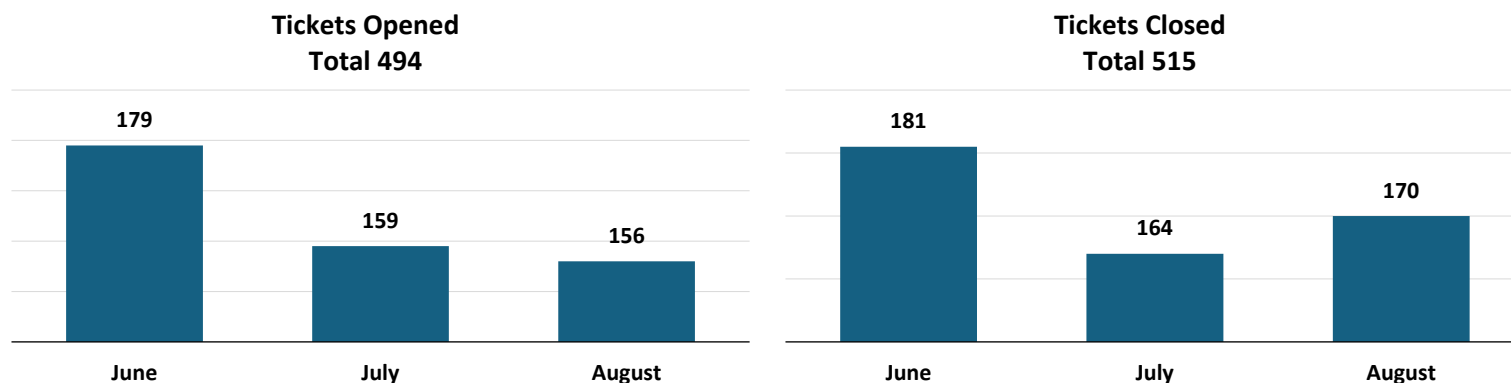
I. ONGOING AGENCY SUPPORT

Information Technology (IT) continues to support agency operations through infrastructure support, processing, and reporting. Significant areas of activity in FY26Q4 include:

Area	Task
Equipment	- Managed and supported servers and PC infrastructure. - Continuous troubleshooting of reported user issues with SORM equipment.
Application Support	- Continued software changes and process improvements for SORM internal applications, automating and supporting business process changes. - RMIS Production Support.
State Agency Support Services	- Reporting: - Provide weekly, monthly, and year-to-date workers' compensation financial reports to our state agencies. - Ad Hoc reporting as requested. - State agency user support: - New user creation as requested. - User login assistance and password resets. - Referrals to STAR LMS for training.
Cybersecurity	- Continuous monitoring for vulnerabilities within SORM computers and servers - Installing updates on computers and servers to address vulnerabilities and comply with cybersecurity standards. - Three modules mandated by DIR for FY26 cybersecurity requirements were completed during the fiscal year. The third module was completed successfully in the fourth quarter. - Four phishing simulations were completed during the fiscal year with the fourth simulation completed successfully in the fourth quarter.

II. SORM SERVICE DESK ACTIVITY

FY26Q4 Service Desk Metrics



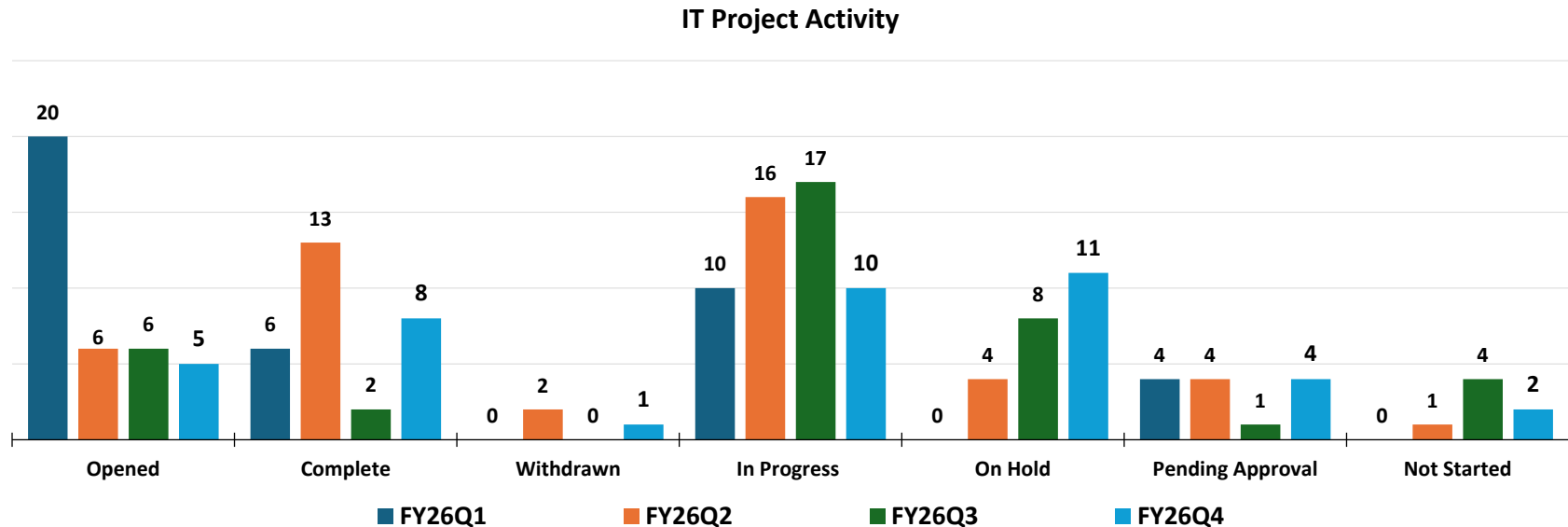
III. IT PROJECT MANAGEMENT ACTIVITY

A. Project Execution

Eight projects were completed this quarter.

B. Project Monitor and Control

The Project Monitor and Control process is in place to actively manage scope and timelines in a consistent and measurable framework. SORM's IT project activity is presented below.



IV. ANTICIPATED FY27Q1 ACTIVITY

In addition to routine support functions congruent with operations for the Office, we anticipate the following activities during FY27Q1 and beyond:

- A. Continue to expand the knowledge assets of our existing IT staff through cross-training, conferences, and other available opportunities.
- B. Support SORM business units in providing IT solutions to support their goals and objectives.
- C. Continued testing of AI functionality within SORM's staging instance of RMIS.
- D. Continued testing of Copilot and agent creation.

CONTRACT ADMINISTRATION

Area	Task
Contract Oversight & Monitoring	• Expenditure Request Tracking • Invoice Quality Assurance Review • Payment Approval Assistance
Vendor Performance Monitoring	• Contact Verification • Certificates of Insurance • Cybersecurity Training • Business Owner Feedback
Vendor Performance Reporting	• Annually • Renewal • Expiration

STATUTORY MISSIONS

CLAIMS OPERATIONS

I. WORKERS' COMPENSATION CLAIMS HANDLING

Workers' compensation claims are opened and entered in SORM's claims management system as reports of injuries are filed by covered state entities. These reported claims are investigated and either accepted or denied. If SORM determines a state employee has sustained a compensable injury, the claim is accepted. If SORM determines the injury is not compensable, the Workers' Compensation Act requires the Office to file a denial within 60 days. Filing a denial does not automatically close a claim because an injured worker has the right to dispute the determination.

The Office inactivates a claim when an injured worker is released from care, no further treatment is anticipated, reaches Maximum Medical Improvement, or is not pursuing a denied claim.

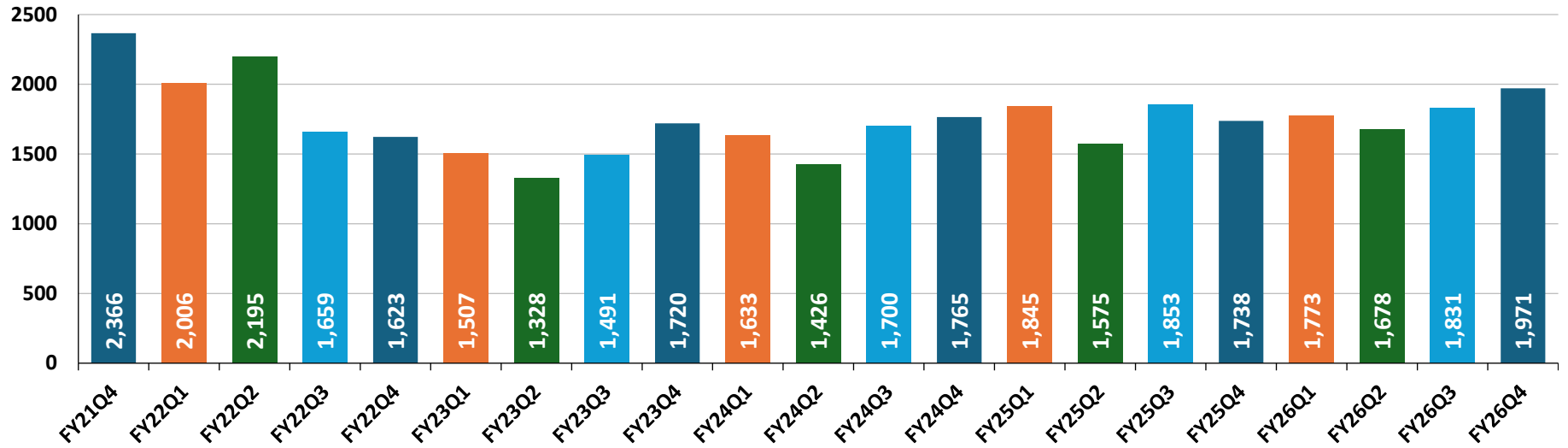
Since workers' compensation claims are based on a compensable injury, it is possible an injured worker may have future medical needs and/or lost time from work due to the compensable injury. If medical and/or indemnity benefits start again, SORM will reopen the claim to ensure the claim is being actively monitored by an adjuster.

II. CLAIMS OPERATIONS ACTIVE WORKLOAD FY26

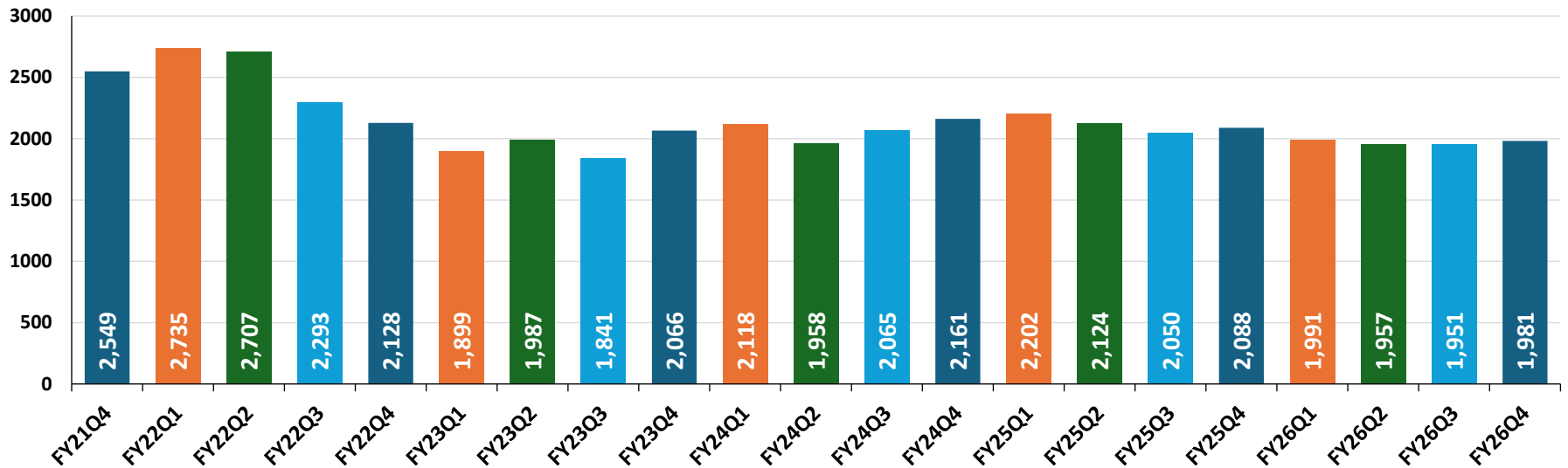
The following charts show claims activity in the state employees' workers' compensation program:

	FY26Q1	FY26Q2	FY26Q3	FY26Q4
Received	1773	1678	1831	1971
Accepted	1522	1422	1589	1737
Duplicates	63	54	61	66
Denied	208	169	214	189
Inactivated	1924	1636	1851	1909
Reopened	31	26	36	49

Claims Received per Quarter

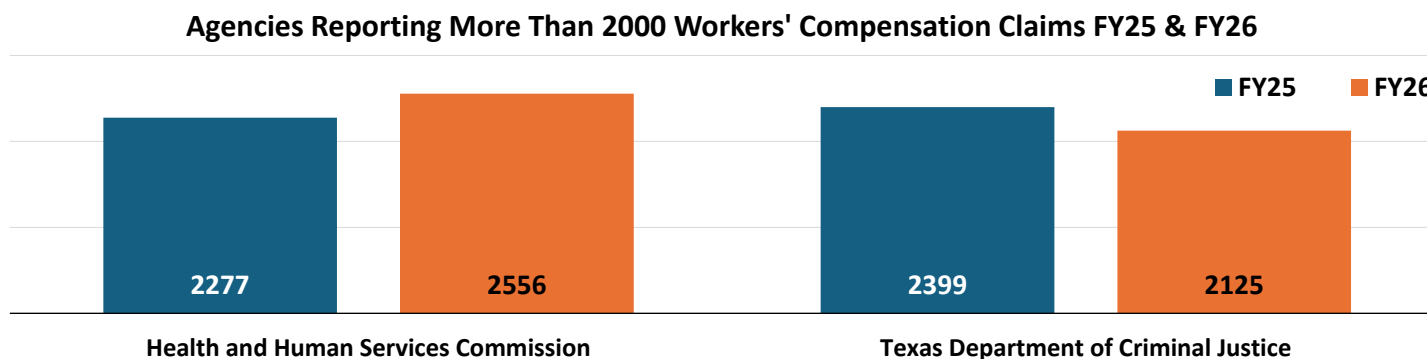


Claims Open per Quarter



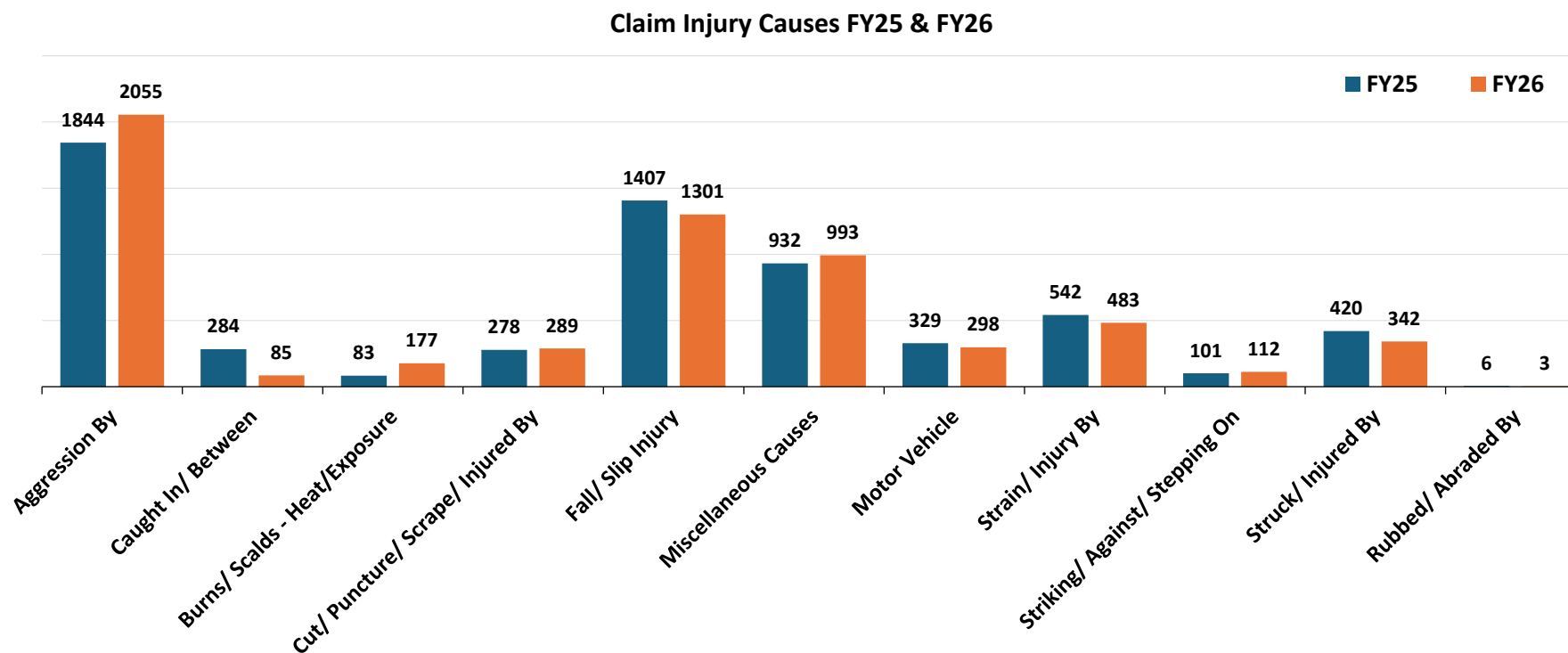
III. WORKERS' COMPENSATION CLAIMS DATA ANALYSIS

The following chart shows the state entities with more than 2000 reported workers' compensation claims in FY25 and FY26.



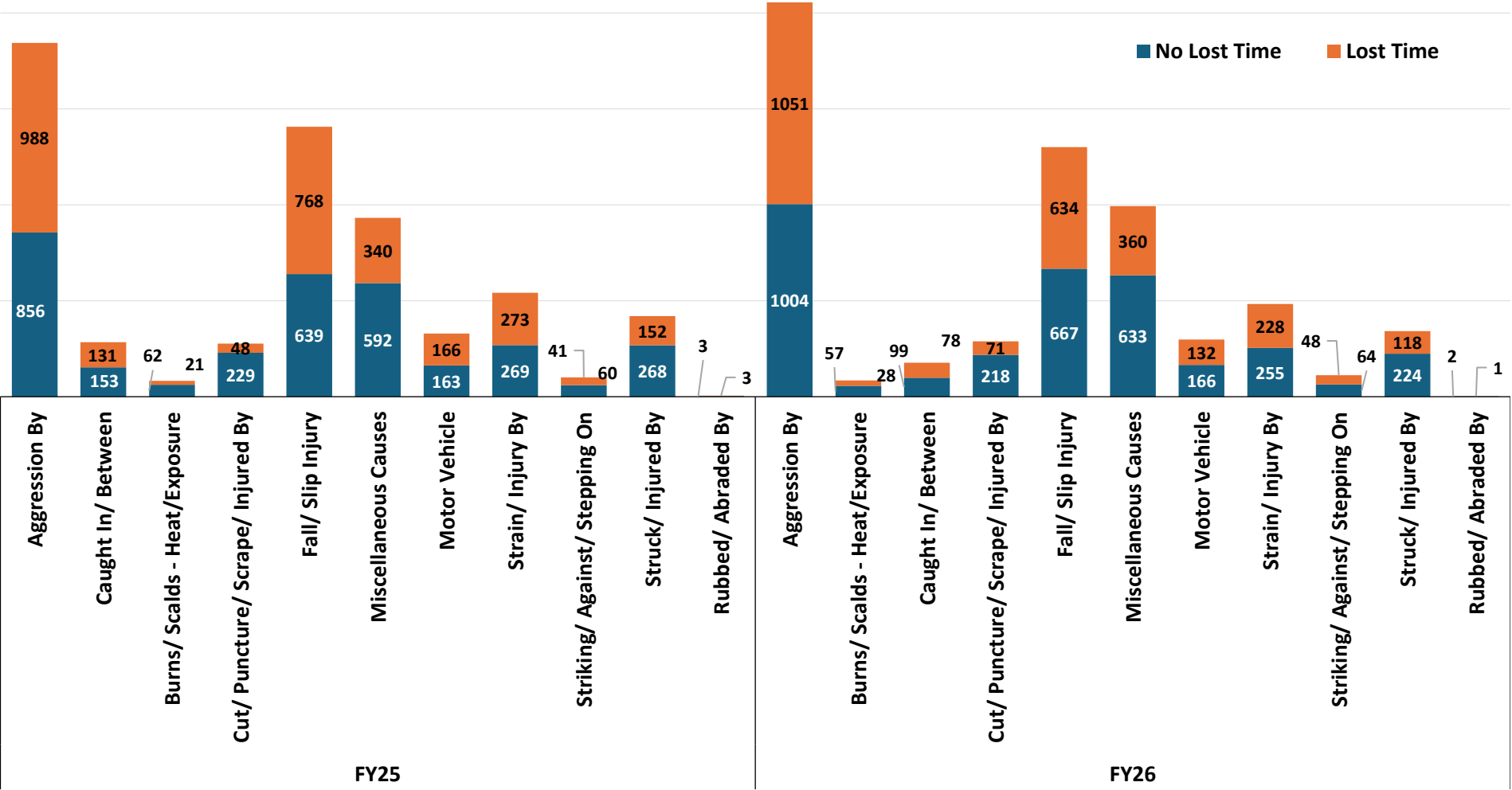
Standardized codes are used in workers' compensation claims to describe the cause of injury. Cause codes can be used to analyze trends. Identifying perils, risk exposures, and hazards is the first step in addressing workplace health and safety.

The following chart shows the conditions or situations that were identified as the cause of the compensable injuries that were reported to the Office in FY25/26.



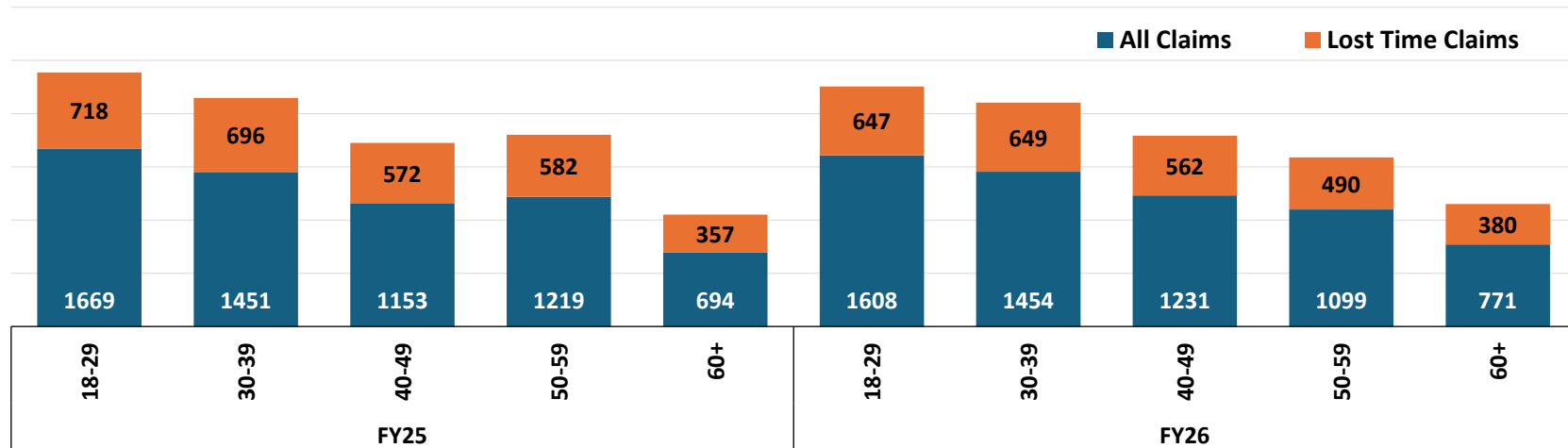
Lost time is an indicator of the severity of a claim. The following chart shows FY25 and FY26 lost time data on accepted claims within each injury cause:

Injury Cause by Lost Time and No Lost Time FY25 & FY26



The following chart shows the age of injured employees and the lost time by age for accepted injuries in FY25 and FY26:

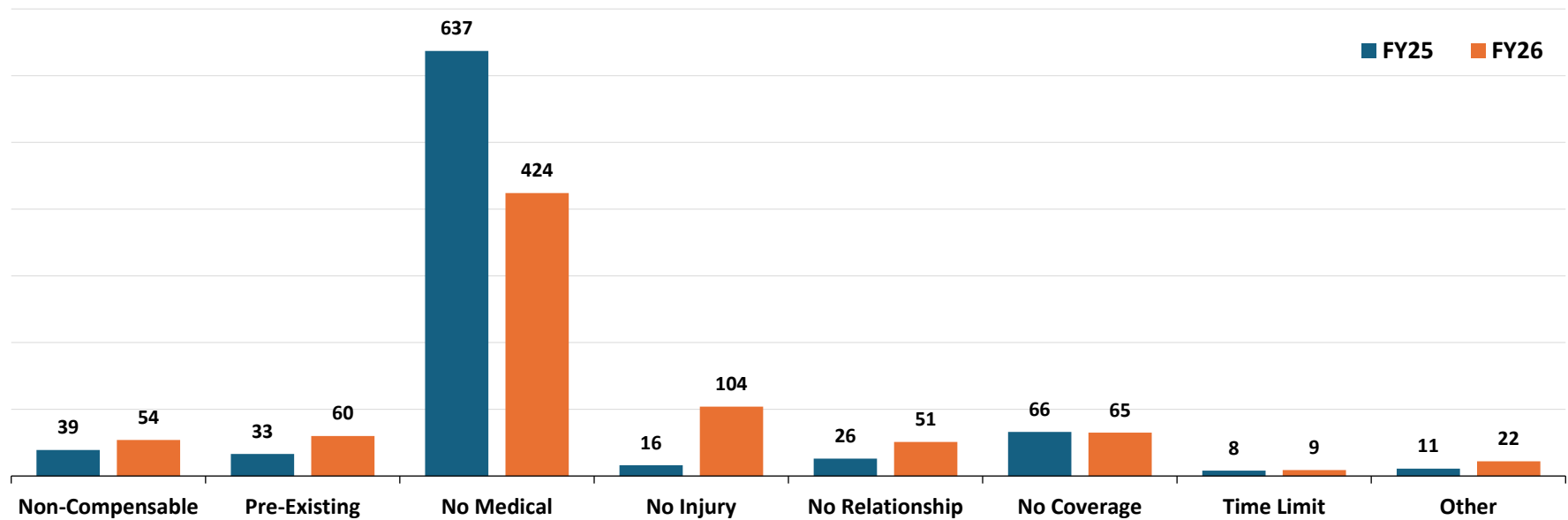
Claims by Age FY25 & FY26



IV. WORKERS' COMPENSATION DENIALS

The common reasons for workers' compensation claim denials in FY25 and FY26 are shown in the chart below:

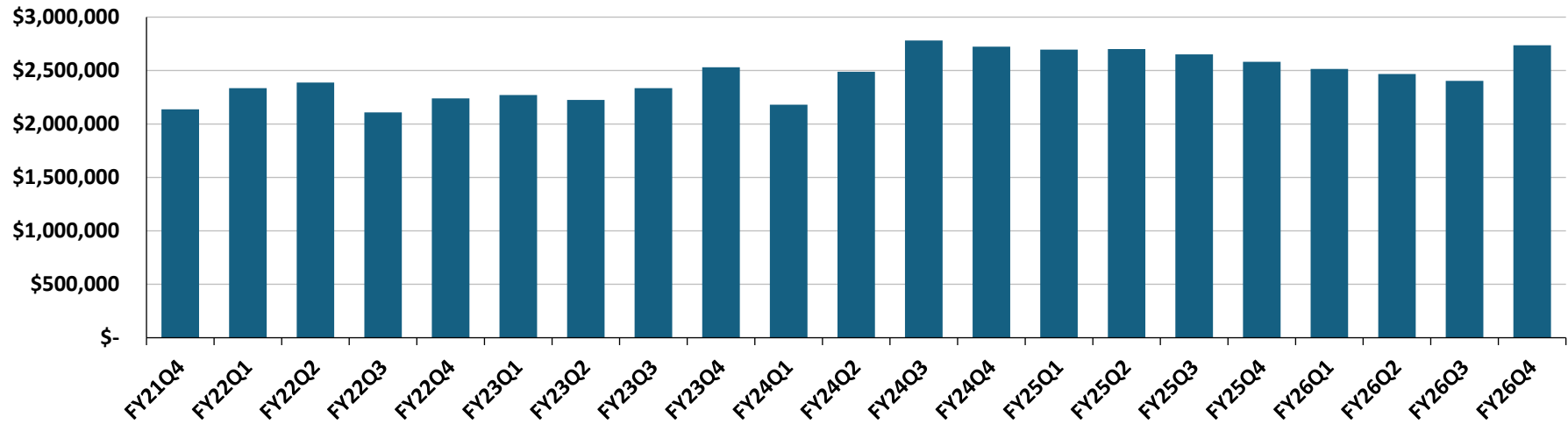
Denial Reasons FY25 & FY26



V. ANALYSIS OF INCOME BENEFITS EXPENSES FOR FY26Q4

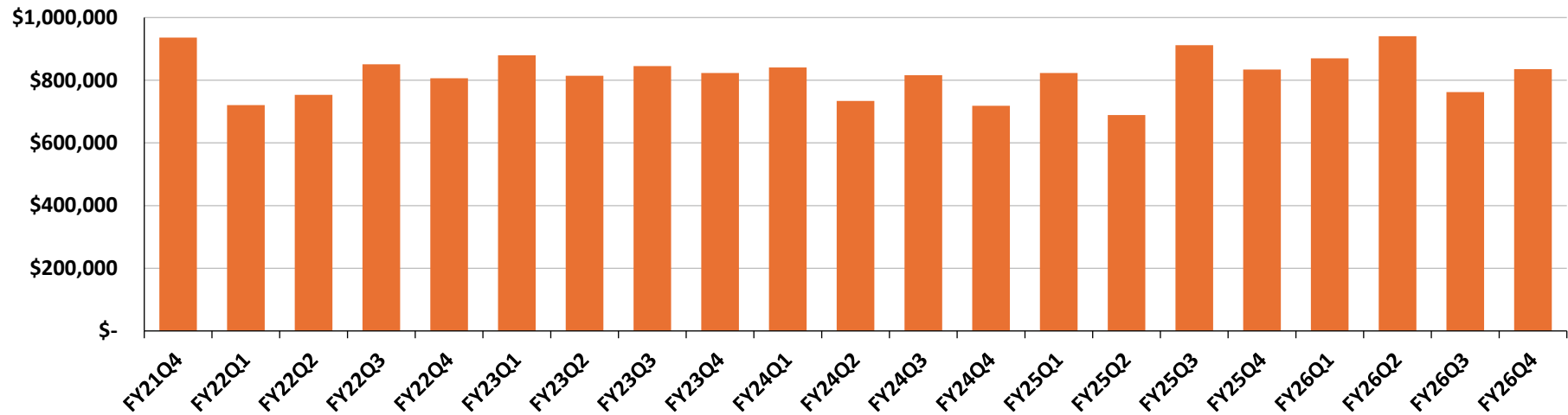
Temporary Income Benefits (TIBs) expenditures for FY26Q4 totaled \$2,736,187 on 578 claims.

TIBs Expense per Quarter



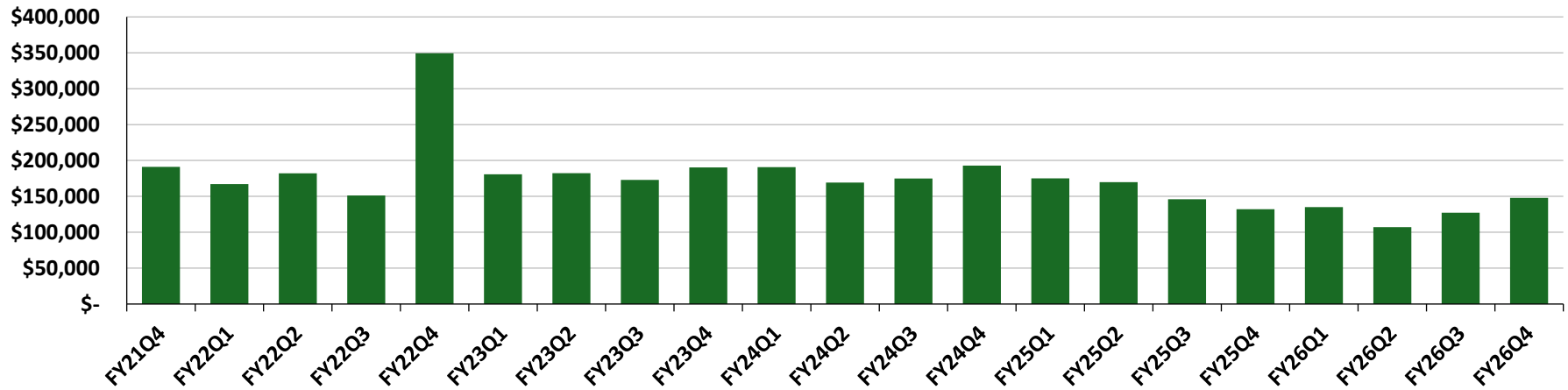
Impairment Income Benefits (IIBs) expenditures for FY26Q4 totaled \$835,668 on 126 claims.

IIBs Expense per Quarter



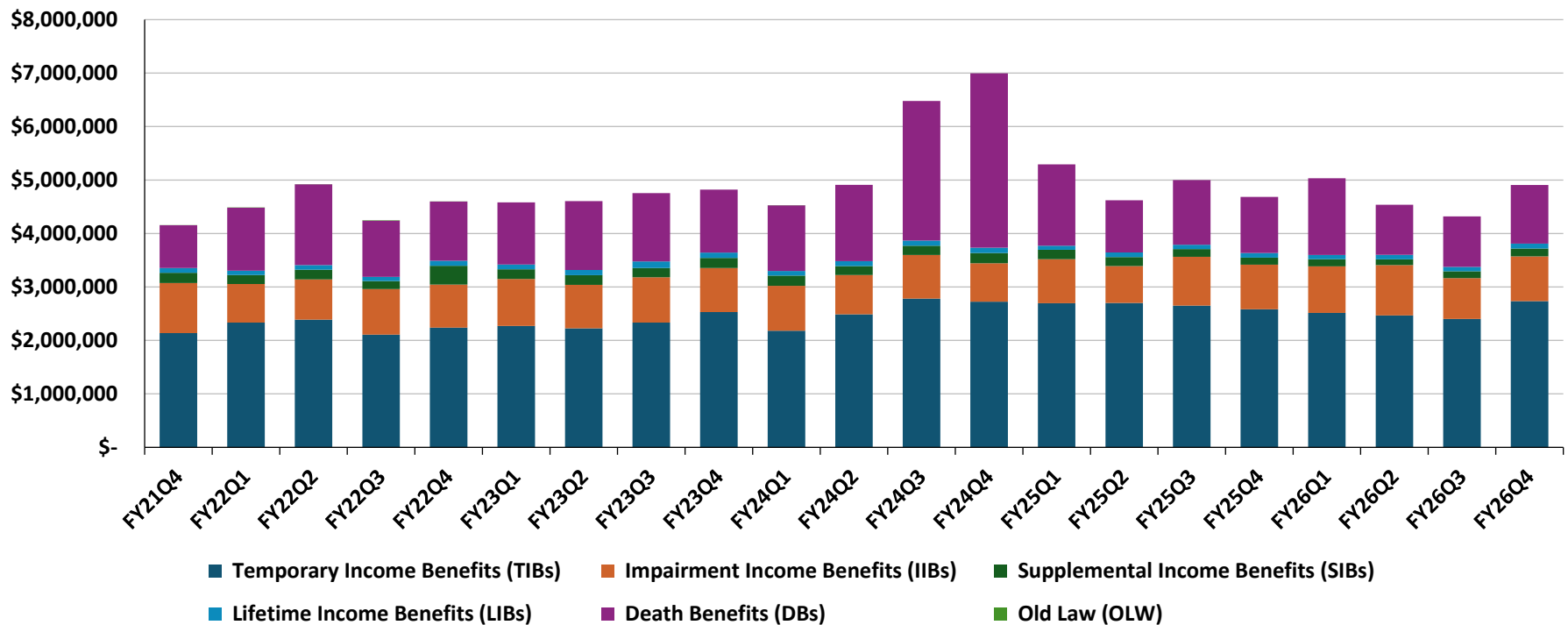
Supplemental Income Benefits (SIBs) expenditures for FY26Q4 totaled \$147,970 on 19 claims.

SIBs Expense per Quarter



Combined indemnity expenditures for FY26Q4 totaled \$4,896,064 on 831 claims.

Combined Indemnity Expense per Quarter

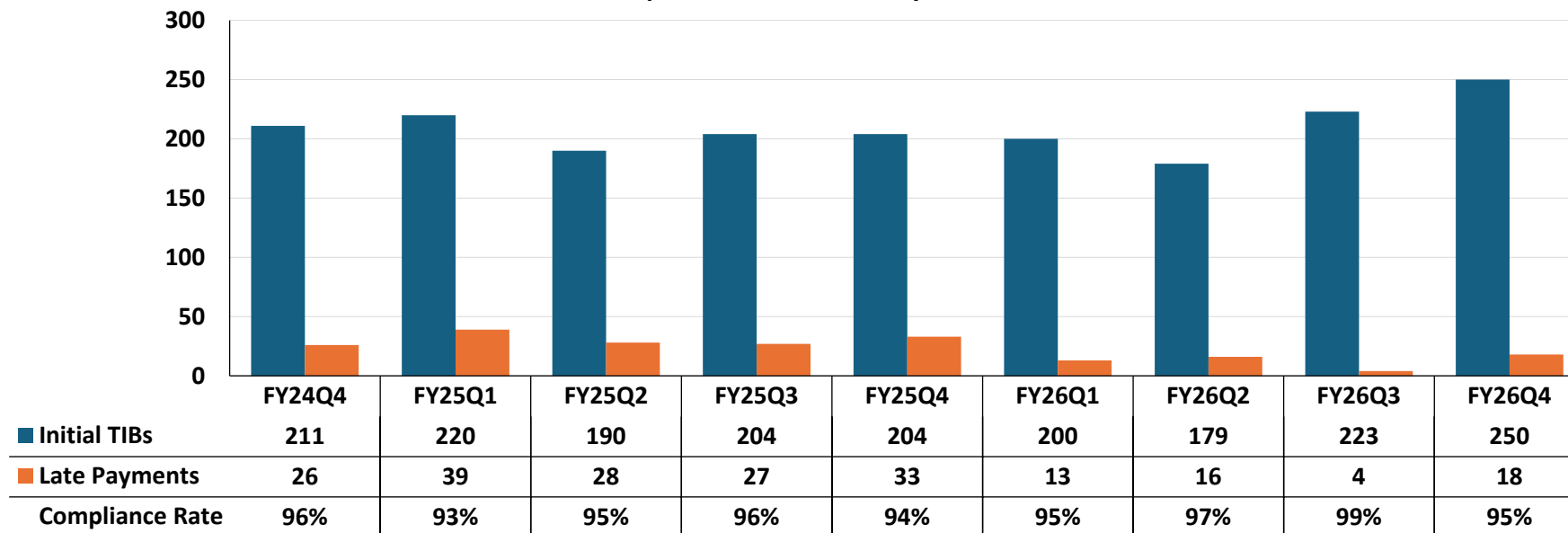


REGULATORY COMPLIANCE

I. TEMPORARY INCOME BENEFIT AUDITS

SORM must initiate temporary income benefits by the 7th day after the accrual date (8th day of disability) or the 15th day after notice of injury.

Initial TIBs Compliance Rate & Late Payments

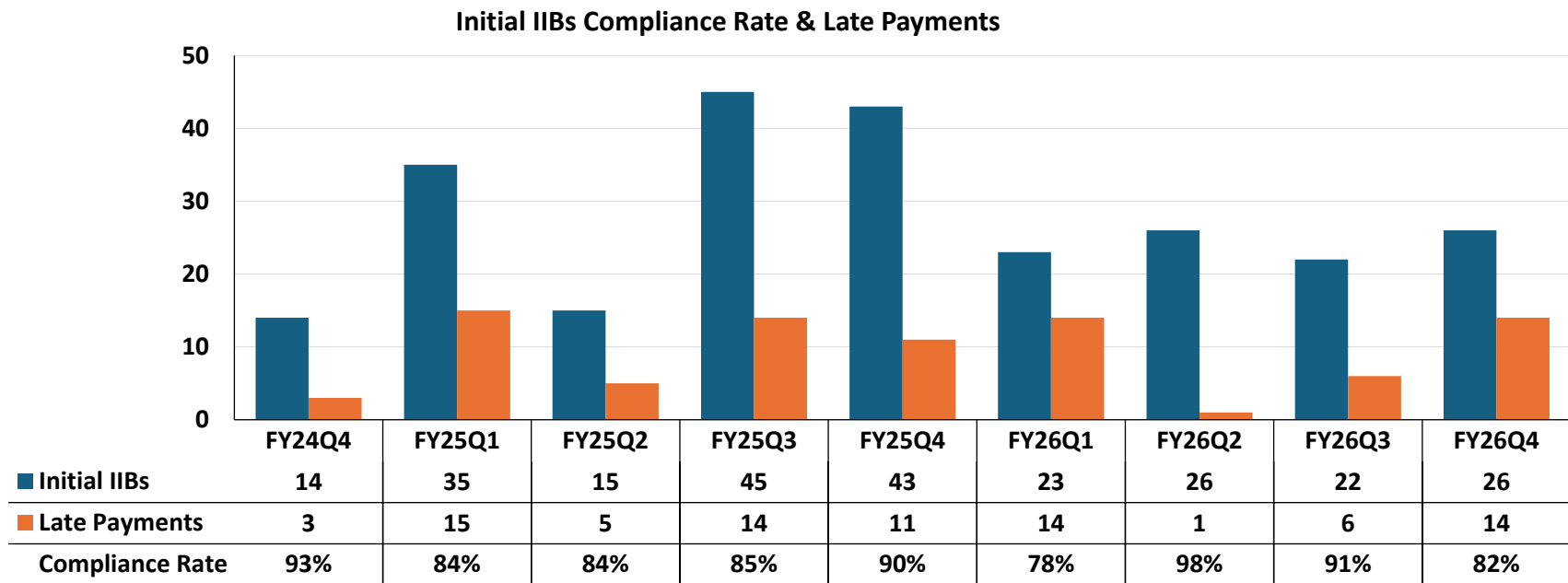


TIB Late Payments FY26Q4

Carrier	15
Employer	0
Physician	0
No Fault/Misc.	0
System	3

II. IMPAIRMENT INCOME BENEFIT AUDITS

SORM must initiate impairment income benefits by the 5th day after receiving a notice of medical evaluation indicating the injured employee has reached maximum medical improvement (MMI).



IIB Late Payments FY26Q4

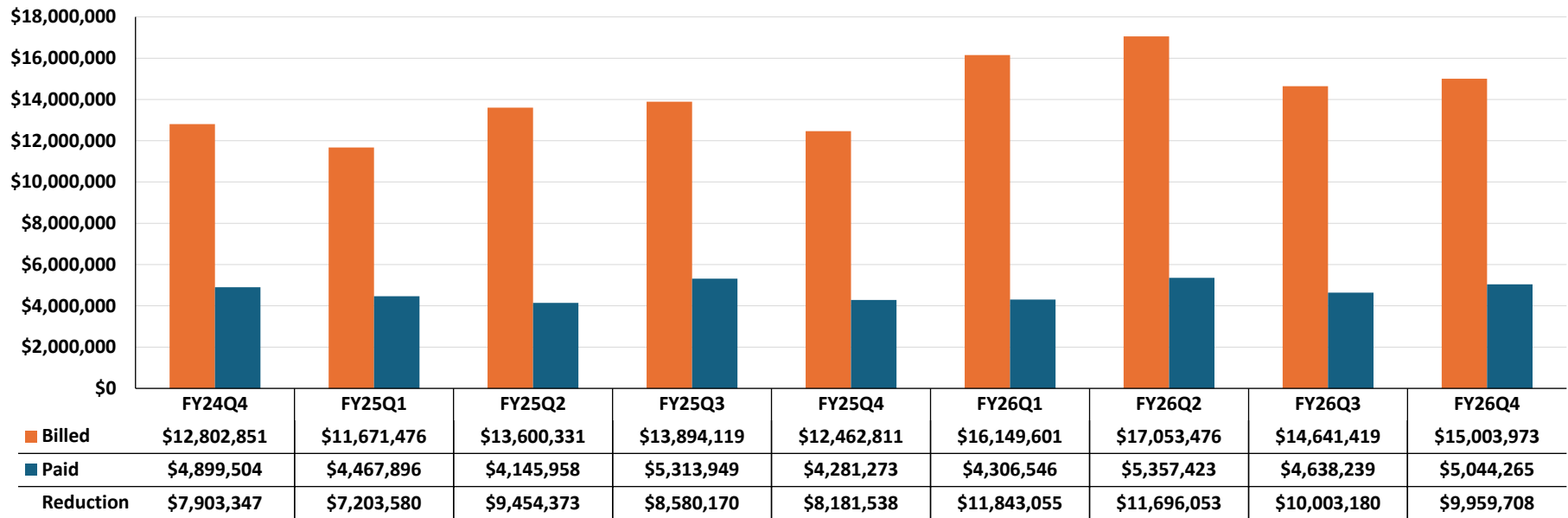
Carrier	13
System	1
No Fault / Misc.	0

MEDICAL MANAGEMENT

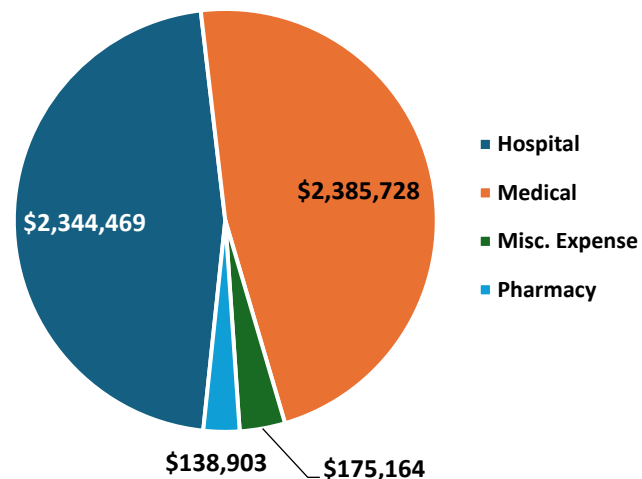
I. MEDICAL COSTS

Workers' compensation benefits include medically necessary treatment related to the compensable injury.

Medical Cost Reduction FY24Q4 - FY26Q4



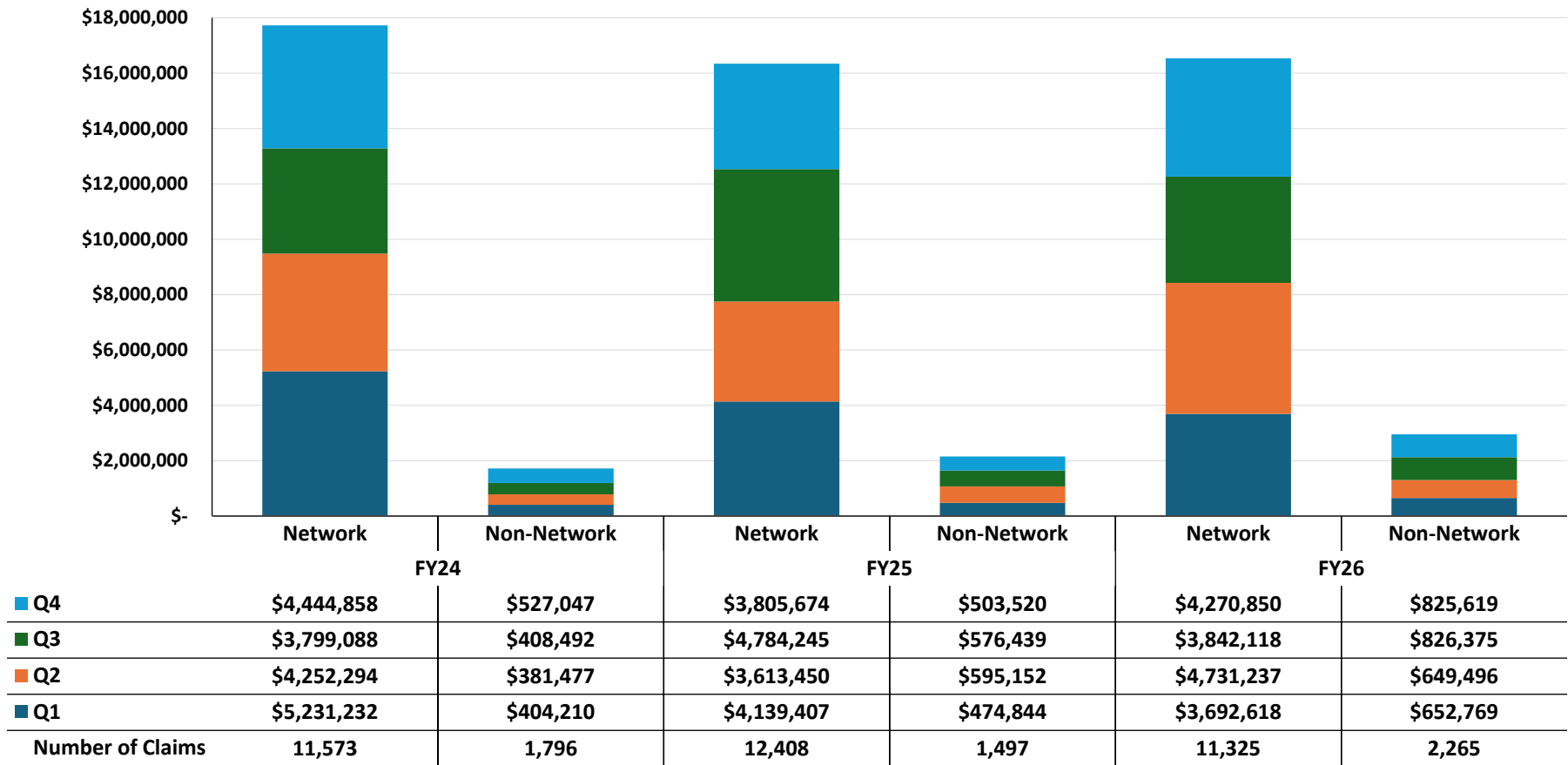
Medical Payments FY26Q4



II. NETWORK AND NON-NETWORK DATA

The following chart shows the amount paid in medical on network and non-network claims.

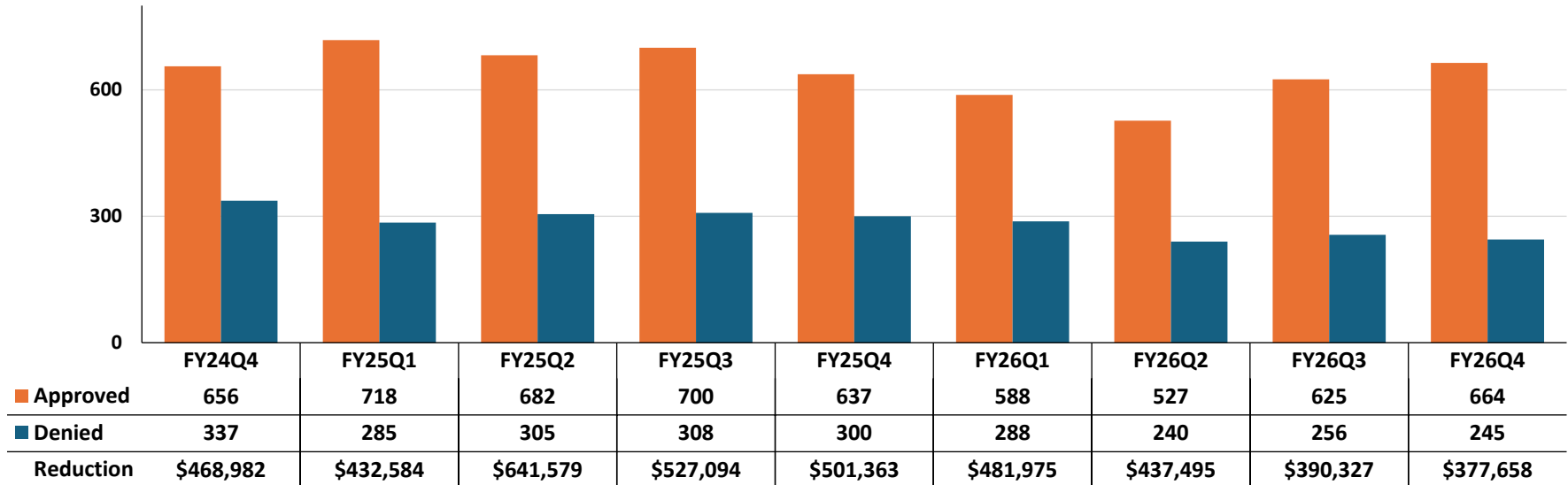
Network & Non-Network FY24 - FY26



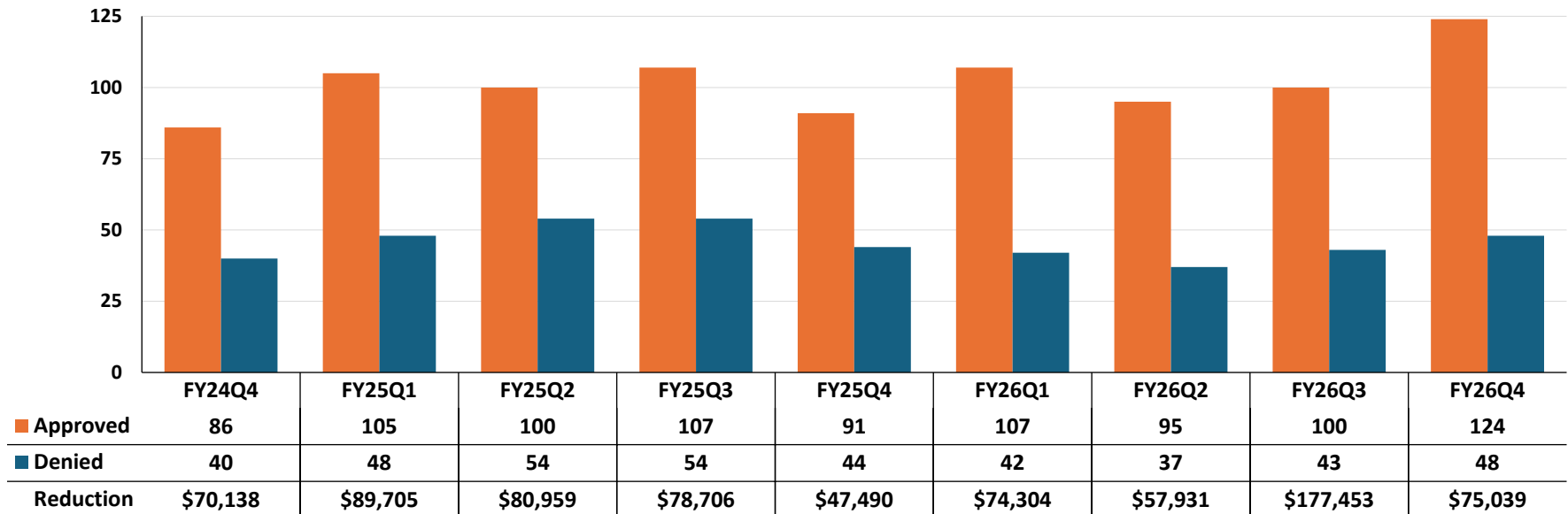
III. PREAUTHORIZATION

Certain types of health care services must be prospectively reviewed and preauthorized as medically necessary before the service is provided to an injured employee.

Network Utilization Review FY24Q4 - FY26Q4



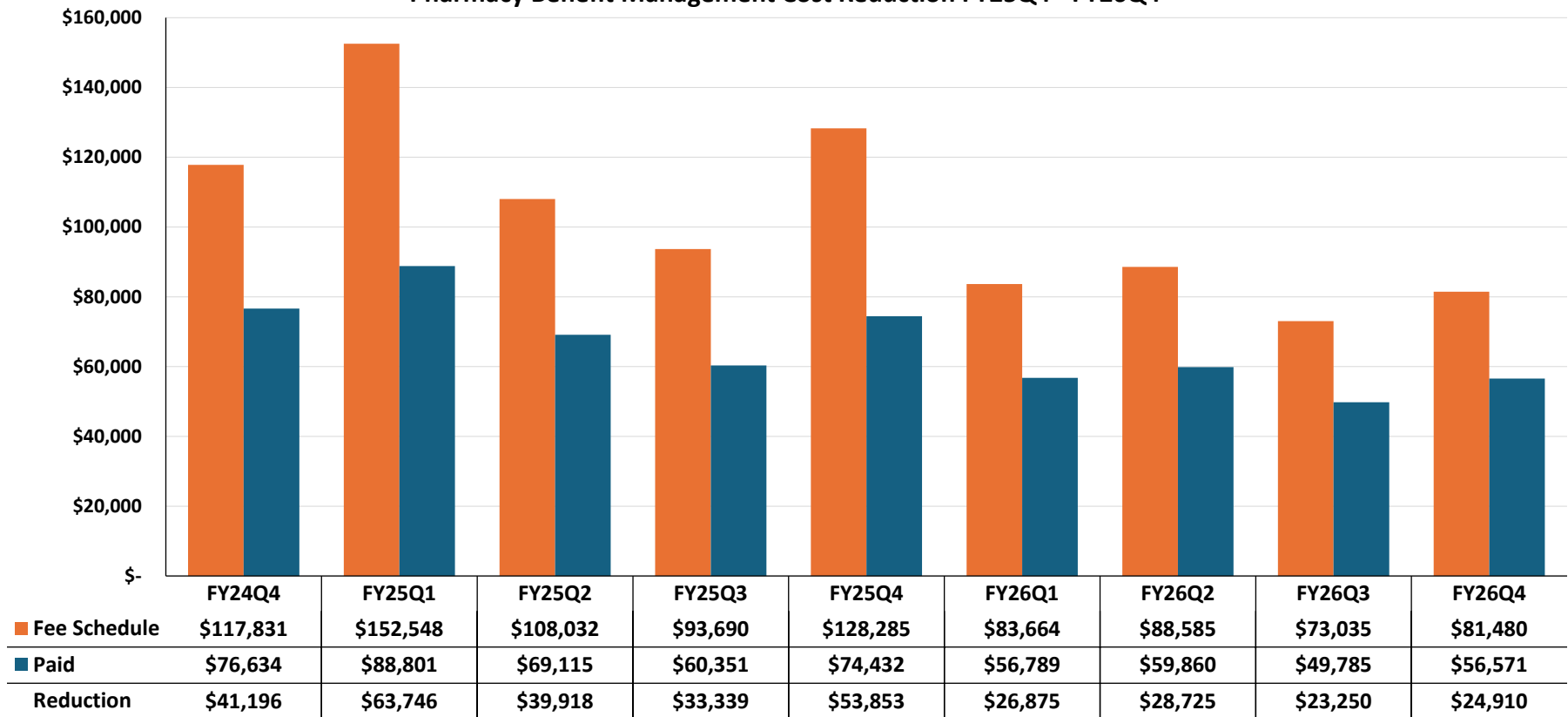
Non-Network Utilization Review FY24Q4 - FY26Q4



IV. PHARMACY BENEFIT MANAGEMENT

Workers' compensation benefits include medically necessary prescription drugs and over-the-counter medication.

Pharmacy Benefit Management Cost Reduction FY25Q4 - FY26Q4



LEGAL MANAGEMENT

I. DIVISION OF WORKERS' COMPENSATION (DWC) MEDICAL DISPUTE RESOLUTION FY26Q4

Medical dispute resolution is used to resolve non-network disputes when an insurer reduces or denies payment of a medical bill or to determine the medical necessity of treatment for a compensable injury.

Medical Fee Disputes	17 Non-Network
Medical Necessity CCH	1
Medical Necessity Disputes	0 Non-Network

II. BENEFIT DISPUTE RESOLUTION FY26Q4

Disputes regarding compensability or eligibility for benefits can occur throughout the life of a workers' compensation claim.

A. Sixty-seven dispute proceedings were scheduled this quarter.

BRC Held	BRC Resolved by Agreement	3 Most Common BRC Issues
39 (11 Canceled)	10	Impairment Rating, Maximum Medical Improvement, Extent of Injury
CCH Held	CCH Resolved by Agreement	3 Most Common CCH Issues
8 (9 Reset)	0	Impairment Rating, Maximum Medical Improvement, Extent of Injury

III. SPECIAL INVESTIGATIONS

SORM investigates and reports workers' compensation fraud committed by system participants.

	FY26Q1	FY26Q2	FY26Q3	FY26Q4
Reports Received	254	204	237	218
Cases Opened for Investigation	0	1	1	1
Pending Cases	12	12	9	8
Cases Closed	5	2	3	2
Criminal/Administrative Referrals	0	1	0	0

IV. RECOVERY SERVICES

When an injured worker's injuries are caused by a third party, SORM can request reimbursement for benefits that have been paid by the State for the compensable injury. If a TDI-DWC interlocutory order or decision is reversed or modified in SORM's favor, the agency can request reimbursement from the Subsequent Injury Fund (SIF) for the overpayment of benefits.

	FY26Q1	FY26Q2	FY26Q3	FY26Q4	YTD
SUBROGATION LIEN RECOVERY	\$412,816	\$128,474	\$75,547	\$370,860.28	\$987,697.68
• Claims with a Lien Recovery	16	21	33	22	70
• Lien Recovery \$5,000 or Less	10	14	30	11	54
• Lien Recovery \$5,001 to \$30,000	3	6	3	7	12
• Lien Recovery \$30,001 to \$100,000	1	0	0	4	1
• Lien Recovery \$100,001 and Above	2	0	0	0	2
SIF REIMBURSEMENT	\$0	\$0	\$0	0	\$0
• Claims with a SIF Reimbursement	0	0	0	0	0
TOTAL	\$412,816	\$128,474	\$75,547	\$370,860.28	\$987,697.68

GOVERNMENT RELATIONS

I. REGULATORY RULES

A. DWC Proposed Revisions to 28 Texas Administrative Code §137.10

Provided comments supporting changes to the adopted return-to-work guidelines under the ODG guidelines. This will save money on additional licenses needed to support Claims Operations functions. This rule was recently adopted and effective as of September 29, 2026.

B. DWC Informal Draft Changes to 28 TAC §130.1

Provided informal input generally supporting DWC's potential change from the 4th edition of the AMA Impairment Guides and updating to the 6th edition AMA Impairment Guides. This change will incorporate more current medical guidelines for assessing and assigning an injured employee's impairment rating.

C. DWC Informal Draft Changes to 28 Texas Administrative Code §§152.1 – 152.5

Did not provide input at this informal stage. Generally support eliminating paper copies of attorney fee applications to only electronic submissions. The agency is neutral on potential changes to increase maximum hourly rates for attorneys to \$300.00 and legal assistants to \$85.00.

II. LEGISLATIVE SESSION PREPARATION

Agency submitted the Legislative Appropriations Request for FY28-29.

A. Exceptional Item Requests

- **Priority 1: Replace Outdated Technology and Workstation Equipment**

\$220,000 to replace agency workstations and laptops as they near the end of their five-year warranty lifecycle. Modern equipment is critical for claims processing, cybersecurity, and compliance with statewide technology standards. This is a necessary maintenance investment to support mission-critical functions.

- **Priority 2: Funding for medical services contracts for workers' compensation program**

SORM must secure medical services for the workers' compensation program, including medical bill review, utilization review, preauthorization, and required state reporting. Our current contract will expire in FY 2028, and costs in the next biennium are unknown. We are not requesting a specific appropriation amount; instead, we are seeking flexible authority for procurement, with final costs to be reported to the Legislature and the LBB once executed.

B. Recent Actions

- Met with Governor's Budget and Policy Office, Legislative Budget Board, and Senate Finance Committee
- Meeting pending with House Appropriations Committee
- Joint Budget Hearing: September 10, 2026

C. 89th Interim Charges

Insurance affordability and risk management strategies have been a focus this interim and are likely to continue as we move into legislative session.

- **Property and Casualty:** Strengthening cybersecurity defenses, broadening alternative risk financing options, and guiding policy solutions to improve infrastructure resiliency.
- **Health, Workers' Compensation, and Employer Benefits:** Identifying root causes of rising healthcare costs. Expect discussions about innovative plan designs, cost-sharing structures, and revised payment policies aimed at driving down delivery costs without compromising patient access to quality care.
- **First Responder Workers' Compensation Presumptions:** Possible expansion of first responder presumptions may broaden eligibility requirements for claims related to cancer, post-traumatic stress, and mental health/trauma.
- **Disaster Preparedness, Response, and Recovery:** Following recent regional crises, the legislature is likely to assess ways to streamline multi-jurisdictional emergency response through training, communication protocols, and strengthening state and local coordination, particularly for mass fatality operations.

D. 90th Legislative Session

- **Important Dates**
 - November 9, 2026: Bill filing begins
 - January 12, 2027: First day of regular session
 - March 12, 2027: 60-day bill filing deadline
 - May 31, 2027: Sine Die – last day of regular session
- SORM's role during legislative session
- Committees of jurisdiction

III. COMMUNICATIONS

- A. Support and promote updated agency training
- B. Agency partner outreach

ENTERPRISE RISK

I. STATEWIDE RISK MANAGEMENT PROGRAM

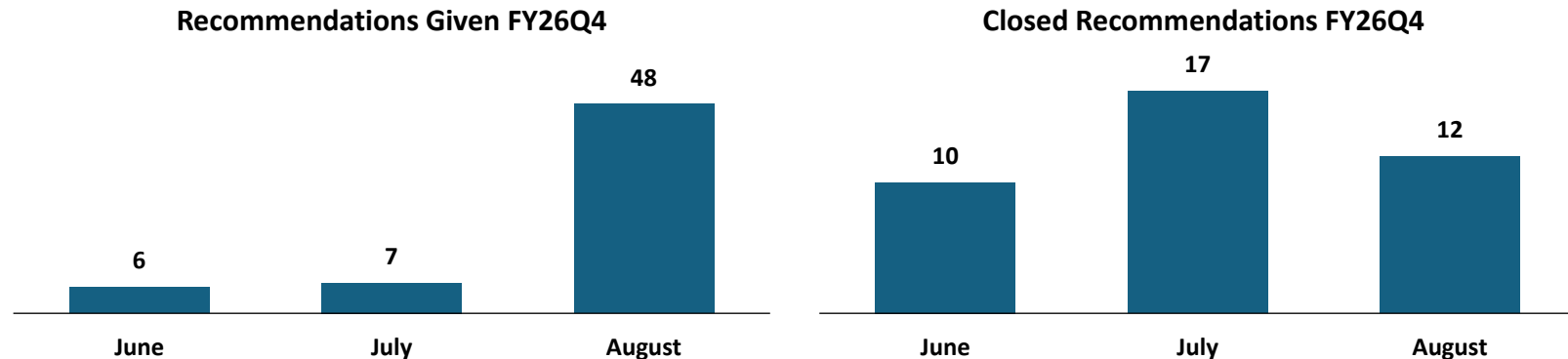
Risk Management continues to work to close the reporting gap since the implementation of RMIS.

A. The Risk Management team provided the following consultative services during FY26Q1 - FY26Q4.

Consultation Visits (CVs) & Risk Management Program Reviews (RMPRs)

CVs	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Percent Complete
Visits	23	24	17	20	21	20	36	19	17	24	28	18	267	117% of a goal of 229
Reports	1	10	16	8	18	28	17	6	26	23	63	29	245	107% of a goal of 229
RMPRs	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Percent Complete
Reviews	0	1	1	2	4	2	1	2	3	3	5	1	25	100% of a goal of 25
Reports	0	0	2	0	1	6	0	1	3	1	4	7	25	100% of a goal of 25

B. The recommendations below were provided to agencies during CVs and RMPRs in FY26Q4.



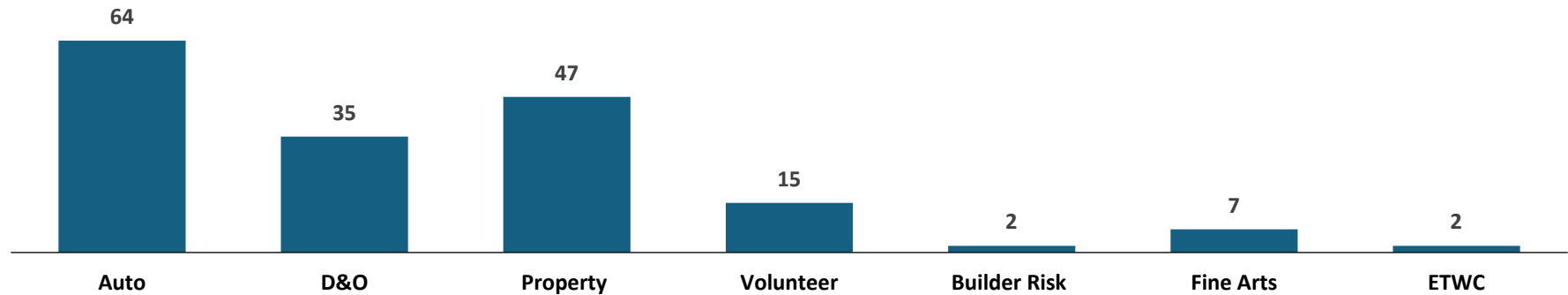
C. Below is the breakdown of the recommendations given during FY26Q4.

Category of Recommendations FY26Q4

Continuity	2
Insurance	7
Policy	7
Risk Management	6
Safety	37
Training	1

II. STATEWIDE INSURANCE PROGRAM

A. Participants in statewide insurance lines FY26Q4.



B. Insurance Purchase Reviews for FY26Q4.

Line	Number of Policies	Approved	Comments	Premium
General Liability	3	Yes	General Liability (GL) insurance protects an organization against liability claims for bodily injury or property damage for which they may be legally responsible. This policy is commonly a requirement of a building lease agreement.	\$7,969
Blanket Accident / Volunteer Liability	1	Yes	This insurance covers accidents and/or injuries related to individuals participating in volunteer activities on behalf of the agency.	\$5,417
General Liability (students)	2	Yes	A general liability policy to cover the insured's students while participating in off-campus work activities that are a part of the student's curriculum.	\$2,350
Marine P&I	2	Yes	Marine Hull insurance protects vessels against damage and destruction of hull, machinery, fittings and freight. The range of risks such as fire or explosion, sinking, capsizing, derailment, burglary, jettisoning, piracy, earthquake, or lightning is covered by this type of policy.	\$20,329
Extra-Territorial Worker's Compensation	1	Yes	This coverage provides workers compensation insurance for employees who work on behalf of the State of Texas but operate or live outside of Texas	\$5,332
Inland Marine	1	Yes	Inland Marine property coverage for specialized material, products, machinery, or equipment	\$2,822
Crime	2	Yes	This insurance protects the interest of the entity, in the event of a financial loss sustained due to employee theft, misappropriation of funds, embezzlement, defalcation, and computer fraud.	\$4,577
Cyber Liability	2	Yes	The policy transfers some of the risk related to covering expenses, such as notification and forensics, if there is a privacy event, security incident, or breach.	\$134,542
Property Parametric	1	Yes	Parametric property insurance pays a fixed, pre-agreed amount automatically when a measurable event (like a specific hurricane wind speed or earthquake magnitude) occurs.	\$142,012
TOTAL	15			\$325,350

III. STATEWIDE CONTINUITY PROGRAM

The team's primary focus continues to be state agencies that have not previously submitted a Continuity of Operations Plan.

A. The Continuity team provided the following services during FY26Q4.

FY26 Continuity Activity

	FY26Q1	FY26Q2	FY26Q3	FY26Q4
Plans Evaluated	17	13	15	14
Exercises Evaluated	10	9	8	5
Individual Consult	15	14	13	3
Internal SORM Meetings	1	0	0	0

B. The table below shows the level of compliance with Continuity Plan submissions.

Continuity Plan Submission Summary

Plan Last Submitted	No Submission	Pre-FY20	FY20	FY21	FY22	FY23	FY24	FY25	FY26
Number of Plans	15	13	2	2	0	6	6	19	59

PERFORMANCE MEASURES

SORM PERFORMANCE MEASURES

Performance measures provide information to the Legislative Budget Board, Governor, and Legislature on SORM's key processes and activities. The General Appropriations Act establishes performance targets for key performance measures. SORM must report performance data for key and non-key performance measures.

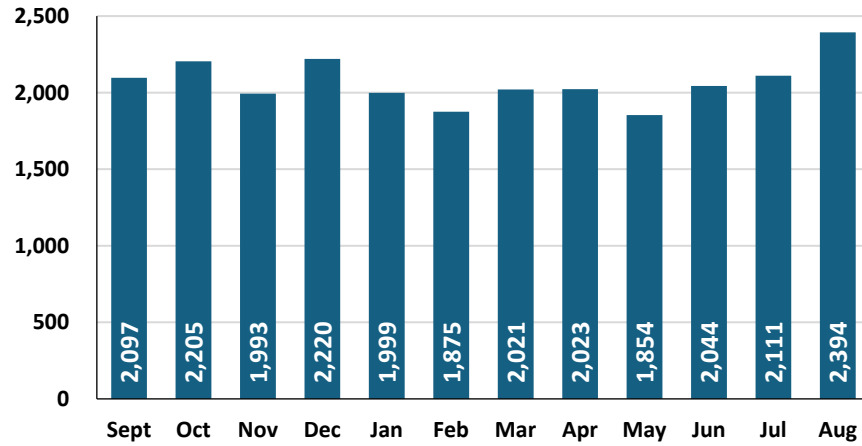
Performance Measures	Key Measure	Reporting Frequency	FY26 Target
Incident Rate of Injuries & Illnesses Per 100 Covered Full-Time Employees	Yes	Annual	3.55%
Cost of Workers' Compensation Per Covered State Employee	Yes	Annual	\$240
Cost of Workers' Compensation Per \$100 State Payroll	Yes	Annual	\$0.60
Average Cost to Administer Claim	Yes	Annual	\$725
Number of Written Risk Management Program Reviews Conducted	Yes	Quarterly	25
Number of Entity Consultations Conducted	Yes	Quarterly	229
Number of Medical Bills Processed	Yes	Quarterly	90,000
Number of Indemnity Payments	Yes	Quarterly	27,000
Percentage of Total Assessments Collected Used for Claims Payments	Yes	Actual	98%
Cost Per Hour of Direct Risk Management Service Provided	No	Actual	NA
Number of Employees Served in Risk Management Training Sessions	No	Actual	NA
Number of Initial Eligibility Determinations Made	No	Actual	NA

REPORTED PERFORMANCE MEASURE DATA

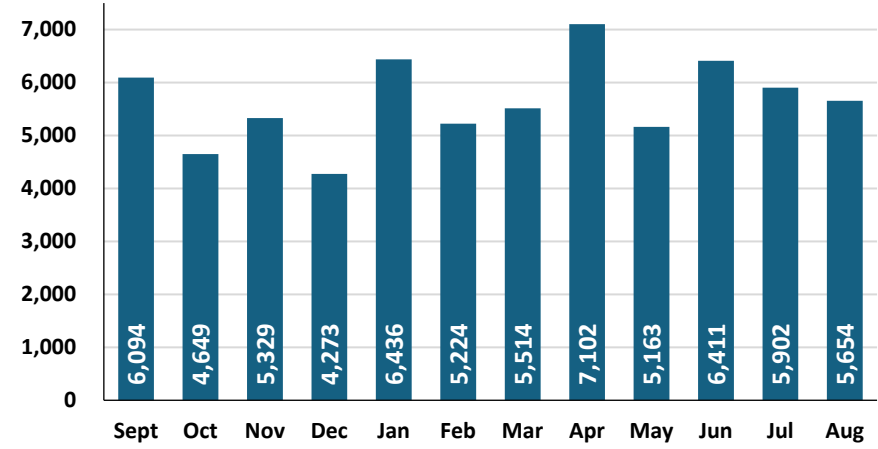
	FY26Q1	FY26Q2	FY26Q3	FY26Q4
Consultation Visits	27	54	49	115
Risk Management Program Reviews	2	7	4	12

Historical Key Performance Measures	FY24 Actual	FY25 Actual	FY26 Actual
Incident Rate of Injuries & Illnesses Per 100 Covered Full-Time Employees	3.12%	3.08%	3.15%
Cost of Workers' Compensation Per Covered State Employee	\$297.79	\$268.18	\$262.53
Cost of Workers' Compensation Per \$100 State Payroll	\$0.52	\$0.46	\$0.39
Average Cost to Administer Claim	\$491.86	\$749.12	\$826.41
Number Written Risk Management Program Reviews Conducted	25	25	25
Number of Entity Consultations Conducted	240	236	245
Number of Medical Bills Processed	72,769	74,487	67,751
Number of Indemnity Payments	26,934	26,491	24,836
Percentage of Total Assessments Collected Used for Claims Payments	104.70%	99.61%	101.22%

Indemnity Bills Processed FY26
Total 24,836



Medical Bills Processed FY26
Total 67,751





State Office of Risk Management

300 W. 15TH, AUSTIN, TEXAS 78701 / P.O. BOX 13777, AUSTIN, TEXAS 78711-3777
(512) 475-1440, FAX (512) 370-9025 / WWW.SORM.TEXAS.GOV

5. New business

5.1 Presentation, discussion, and action on the FY2026 Annual Internal Audit Report Draft, FY2027 Proposed Internal Audit Plan and Internal Audit Charter.

Information

- A) Representatives of the agency's internal audit contractor will present the FY2026 Internal Audit Report Draft ;
and
- B) Representatives of the agency's internal audit contractor will present the FY2027 Proposed Internal Audit Plan and Internal Audit Charter.

Action Required

The Chair may entertain motions for consideration and acceptance of the Reports presented.



State Office of Risk Management

Internal Audit Services

FY 2026 Annual Internal Audit Report

Prepared by:



McConnell Jones
Diverse Thinking | Unique Perspectives

DRAFT

Table of Contents

Section	Page Number
I. COMPLIANCE WITH POSTING REQUIREMENTS	4
II. INTERNAL AUDIT PLAN STATUS FOR FISCAL YEAR 2026.....	4
III. CONSULTING SERVICES AND NON-AUDIT SERVICES COMPLETED	5
IV. CLAIMS PROCESSES AND PAYMENTS AUDIT REPORT SUMMARY	Error! Bookmark not defined.
V. FOLLOW-UP ON PRIOR AUDIT FINDINGS.....	Error! Bookmark not defined.
VI. EXTERNAL QUALITY ASSURANCE REVIEW (PEER REVIEW)	5
VII. INTERNAL AUDIT PLAN FISCAL YEAR 2027.....	7
VIII. EXTERNAL AUDIT SERVICES PROCURED IN FISCAL YEAR 2026	Error! Bookmark not defined.
IX. REPORTING SUSPECTED FRAUD AND ABUSE.....	8
X. REPORT DISTRIBUTION	9



McConnell Jones

October xx , 2026

The Honorable Greg Abbott, Governor
Members of the Legislative Budget Board
Internal Audit Coordinator, State Auditor's Office

Dear Ladies and Gentlemen:

Attached is the 2026 Annual Internal Audit Report for the State Office of Risk Management (SORM). This Annual Internal Audit Report is submitted in accordance with the Texas Internal Auditing Act requirement for state agency internal auditors to prepare and distribute an annual report (Government Code, Chapter 2102).

SORM engaged McConnell & Jones LLP (MJ) to provide internal audit services to the agency in accordance with the Texas Internal Auditing Act. MJ submits this FY 2026 Annual Internal Audit Report on behalf of the State Office of Risk Management.

The Texas Internal Auditing Act requires agencies to file an annual report on their internal audit activities and the internal audit reports prepared for governing boards. The purpose of the Annual Internal Audit Report is to provide information on the assurance services, consulting services, and other activities of the internal audit function. In addition, the Annual Internal Audit Report assists oversight agencies in their planning and coordination efforts. According to Texas Government Code, Section 2102.009, the Annual Internal Audit Report for fiscal year 2026 is due November 1, 2026.

Please contact Liz Meyers 512.828.3129 or Todd Holt at 512. 936.1508 if you should have any questions about this Annual Internal Audit Report.

Sincerely,

Liz Meyers, CPA, CFE
Partner

6805 Capital of Texas Hwy
Suite 266
Austin, TX 78731
Phone: 713.968.1600

WWW.MCCONNELLJONES.COM

DRAFT

I. COMPLIANCE WITH POSTING REQUIREMENTS

Texas Government Code, Section 2102.015, requires state agencies and institutions of higher education to post the approved internal audit plan and internal audit annual reports to the agency's internet website. Texas Government Code, Section 2102.015, also requires agencies to update the posting on the website to include a detailed summary of any weaknesses, deficiencies, wrongdoings, or other concerns raised by the audit plan or annual report and include a summary of the actions taken by the agency to address the issues raised.

In accordance with requirements of Texas Government Code, Section 2102.015, McConnell & Jones LLP (MJ) will ensure the required Annual Internal Audit Plan, Internal Audit Annual Report and any other required internal audit information is provided to the State Office of Risk Management (SORM) for posting to their website.

II. INTERNAL AUDIT PLAN FOR STATUS FISCAL YEAR 2026

McConnell & Jones LLP prepared the Fiscal Year 2026 Annual Internal Audit plan based on a comprehensive risk assessment which was approved by SORM's Board of Directors. The table below reflects the status of the approved audit plan status as of August 31, 2026.

Fiscal Year 2026 Internal Audit Plan Status

#	Description	Report Number	Report Date	Report Title	Audit Status
1	Claims Processes and Payments	26-001	August 28, 2026	SORM Claims Processes and Payments	Completed
2	Follow-Up on Open Audit Findings	26-002	August 21, 2026	Report on Prior Audit Findings Follow-up	Completed
3	Update Annual Risk Assessment & Audit Plan	N/A	N/A	N/A	Completed
4	Annual Audit Report	N/A	N/A	N/A	Completed
5	Audit Communications, Project Management	N/A	N/A	N/A	On-going

Deviation from 2026 Plan:

There were no deviations from the FY2026 Annual Internal Audit Plan.

III. CONSULTING SERVICES AND NON-AUDIT SERVICES COMPLETED

Internal audit did not perform consulting or advisory services in FY 2026.

IV. EXTERNAL AUDIT SERVICES

External audit services procured in fiscal year 2026 consisted of internal audit services necessary to execute SORM's internal audit plan.

V. EXTERNAL QUALITY ASSURANCE REVIEW (PEER REVIEW)

MJ has been a member of the AICPA since 1987 and is subject to the AICPA's peer review process every three years. Issues noted by the peer reviewer were related to another practice line in the firm and not the risk advisory services practice. MJ developed an action plan to remediate the deficiencies noted. We provide a copy of our most recent peer review letter below.



ADKF | with you
all the way

Member of the AICPA & TCFPA
Registered with Public Company
Accounting Oversight Board

Report on the Firm's System of Quality Control

July 19, 2024

To the Partners
McConnell & Jones LLP
and the National Peer Review Committee

We have reviewed the system of quality control for the accounting and auditing practice of **McConnell & Jones LLP** applicable to engagements not subject to PCAOB permanent inspection in effect for the year ended June 30, 2023. Our peer review was conducted in accordance with the Standards for Performing and Reporting on Peer Reviews established by the Peer Review Board of the American Institute of Certified Public Accountants (Standards).

A summary of the nature, objectives, scope, limitations of, and the procedures performed in a system review as described in the Standards may be found at www.aicpa.org/prsummary. The summary also includes an explanation of how engagements identified as not performed or reported in conformity with applicable professional standards, if any, are evaluated by a peer reviewer to determine a peer review rating.

Firm's Responsibility

The firm is responsible for designing and complying with a system of quality control to provide the firm with reasonable assurance of performing and reporting in conformity with the requirements of applicable professional standards in all material respects. The firm is also responsible for evaluating actions to promptly remediate engagements deemed as not performed or reported on in conformity with the requirements of applicable professional standards, when appropriate, and for remediating weaknesses in its system of quality control, if any.

Peer Reviewer's Responsibility

Our responsibility is to express an opinion on the design of and compliance with the firm's system of quality control based on our review.

- 1 -

MAIN OFFICE:
5905 McAllister Fwy, STE 800
San Antonio, Texas 78206
Phone: 210.820.1300
Fax: 210.829.4380

672 Widge Hill Dr, STE B
New Braunfels, TX 78058
Phone: 830.387.4441

818 E. Blanco, STE 3000
Boerne, TX 78005
Phone: 830.895.8000



WWW.ADKF.COM

Internal Use

Opinion

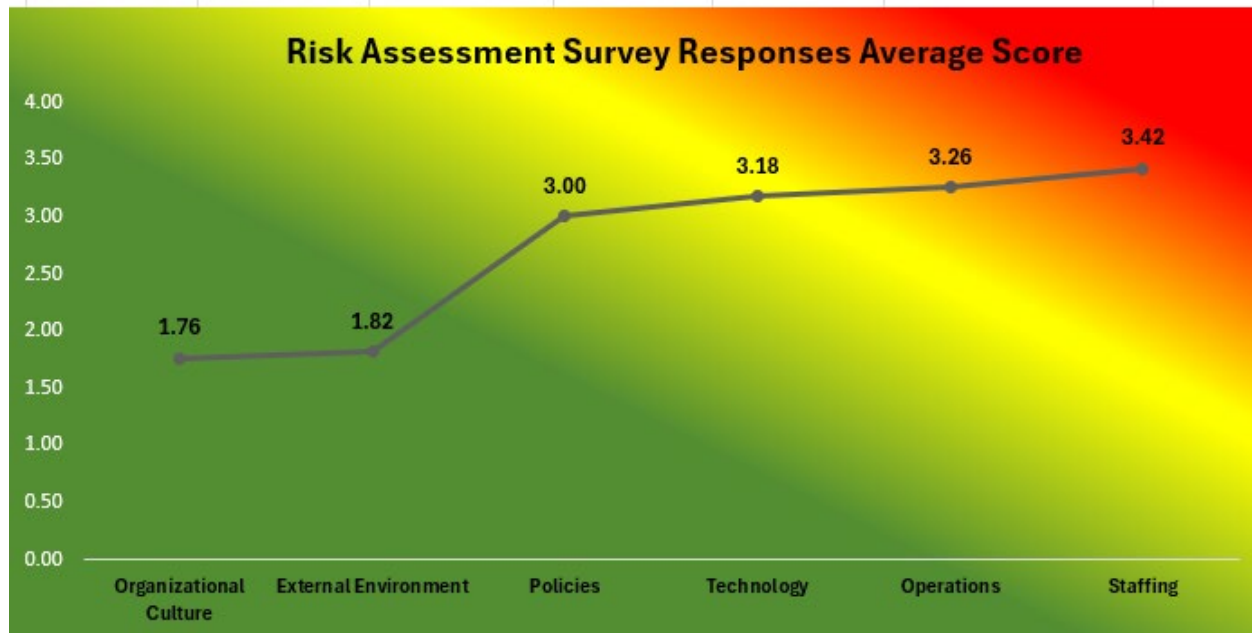
In our opinion, except for the deficiencies previously described, the system of quality control for the accounting and auditing practice of **McConnell & Jones LLP** applicable to engagements not subject to PCAOB permanent inspection in effect for the year ended June 30, 2023, has been suitably designed and complied with to provide the firm with reasonable assurance of performing and reporting in conformity with applicable professional standards in all material respects. Firms can receive a rating of *pass*, *pass with deficiencies*, or *fail*. **McConnell & Jones LLP** has received a peer review rating of *pass with deficiencies*.


 ADKF, P.C.

- 3 -

VI. INTERNAL AUDIT PLAN FISCAL YEAR 2027

MJ conducted a risk assessment and prepared the following heat map to reflect the areas of highest risk.



Based on this year's risk assessment and discussion with leadership, we recommend that Internal Audit assess their operational system, Origami, to assess its utilization by staff as well as its impact to operations. In addition to this assessment, we will conduct a review of prior years' open audit findings, perform a risk assessment for the FY2028 audit plan, and prepare the fiscal year 2027 Annual Internal Audit Report and in accordance with the Texas Internal Auditing Act. The proposed audit activities are reflected below.

Fiscal Year 2027 Annual Audit Plan Activities

Audit Activity #	Description	Risk Rating	Estimated Hours
1	Access Origami Utilization Audit ✓ Understanding of system features ✓ Process / procedures gaps ✓ Management of Vendor including SLA's ✓ Potential gaps in system functionality	High	356
2	Follow-Up on Prior Audit Findings	Compliance	51
3	Risk Assessment and Annual Internal Audit Plan	Compliance	25

Audit Activity #	Description	Risk Rating	Estimated Hours
4	Annual Internal Audit Report (FY 2026)	Compliance	2
5	Audit Communications, Committee Meetings, Project Management	N/A	20

VII. REPORTING SUSPECTED FRAUD AND ABUSE

The State Office of Risk Management has implemented measures to comply with Article IX, Section 7.09, of the General Appropriations Act (89th Legislature) and Texas Government Code, Section 321.022. These measures include, but are not limited to, SORM provides a link to the State Auditor's Office (SAO) website for fraud reporting at the footer of their website. In addition, information on reporting suspected fraud to the State Auditor is included in the agency's policies and procedures.

This Annual Internal Audit Report was presented to the State Office of Risk Management Board of Directors.

VIII. REPORT DISTRIBUTION

This report is being distributed to the following individuals:

State Office of Risk Board Members

Elizabeth “Lisa” Maciejewski-West, Acting Chair

Jeff Houston, Member

Jason Boatwright, Member

Jason Hartgraves, Member

Oversight Agencies

Governor’s Office of Budget Planning and Policy Division

Fisher Reynolds budgetandpolicyreports@gov.texas.gov

Legislative Budget Board

Christopher Mattsson audit@lbb.texas.gov

Internal Audit Coordinator, State Auditor’s Office

Internal Audit Coordinator iacoordinator@sao.texas.gov



State Office of Risk Management

FY 2027 Risk Assessment Internal Audit

FY2027 Origami Assessment (All Areas)

Reasoning:

Risk Assessment showed risks in turnover, staff training, organizational changes and technology usage. All these risks areas may impact the utilization of Origami systems specifically relating to compliance with regulations, policies and procedures gaps, and knowledge gaps. Additionally, the contract with Origami expires December 2027.

Focus Areas:

1. Claims Operations* – Utilization, Compliance, Policies and Procedures, Report
2. Medical Management - Utilization, Compliance, Policies and Procedures, Report
3. Intake Management – Utilization, Compliance, Policies and Procedures, Report
4. Vendor Management
5. Self Developed Functionality Impact
6. Financial Management – Reconciliation & Payment Process
7. Information Technology – Support
8. Storage Concerns
9. Legal Services
10. Risk Management
11. Analytics

* This area requires less hours as it was audited in FY 2026

Internal Audit Hours & Fees

	Total Hours	Total Fees
Origami - All Areas	365	\$71,172
Required Activities ¹ :	98	\$18,364
Total	454	\$89,536
Contract Fees		\$65,444
Fees Not Covered		\$24,092

¹ Conduct Follow-up Audit, Annual Risk Assessment, Annual Audit Report, Audit Liaison/ Commissioner Meetings



This charter identifies the purpose, authority, responsibilities, professional requirements, and quality assurance of the State Office of Risk Management Internal Audit function in accordance with the Texas Internal Auditing Act and the Institute of Internal Auditors (IIA).

Purpose

The Internal Audit function (Internal Audit) is outsourced to an independent contractor and serves as an independent and objective assurance and consulting activity by providing a philosophy of adding value to improve the operations of the State Office of Risk Management (SORM). The purpose of Internal Audit is to help the agency accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control, and governance processes.

Assurance services are defined as examinations of evidence for the purpose of providing an independent assessment of risk management, control, or governance processes for an organization. Examples may include financial audit, compliance audit, economy and efficiency audit, effectiveness audit, and investigation engagements. Consulting services are advisory and related to client service activities, the nature and scope of which are agreed upon with the client, and which are intended to add value and improve an organization's operations. Examples include counsel, advice, facilitation, and training.

The scope of work of Internal Audit is to determine whether the agency's network of risk management, control, and governance processes, as designed and represented by management, is adequate and functioning in a manner to ensure:

- Risks are appropriately identified and managed.
- Significant financial, managerial, and operating information is accurate, reliable, and timely.
- Employee actions are in compliance with policies, standards, procedures, and applicable laws and regulations.
- Resources are acquired economically, used efficiently, and adequately protected.
- Programs, plans, and objectives are monitored and achieved in accordance with the agency's mission.
- Quality and continuous improvement are fostered in the agency's control process.
- Significant legislative or regulatory issues impacting the agency are recognized and addressed appropriately.
- Other goals and objectives of economy, efficiency, effectiveness, compliance, and safekeeping are achieved.

Internal Audit assists the five-member Board of Directors and agency management by furnishing independent analyses, appraisals, and recommendations about the adequacy and effectiveness of the agency's systems of internal control policies and procedures and the quality of performance in carrying out assigned responsibilities.

ROLE

The internal audit activity is established by the five-member Board of Directors or highest level of governing body (hereafter referred to as the Board). The internal audit's responsibilities are defined by the Board as part of its oversight role.

AUTHORITY

Internal Audit, in the performance of its work and with stringent accountabilities of safekeeping and confidentiality, will be granted full and free access to all activities, records, property, and personnel of the agency, and of its contractors and subcontractors. In addition, Internal Audit is authorized to:

- Have full and free access to the Board, management, and SORM staff.
- Allocate resources, set frequencies, select subjects, determine scope of work, and apply the techniques required to accomplish audit objectives in accordance with the approved audit plan.
- Obtain the necessary assistance of personnel in the agency, as well as other specialized services from within or outside the agency.
- Obtain timely reports from management on actions proposed and taken pertaining to any audit findings and recommendations.

Independence, Objectivity and Reporting Relationship

Objectivity and independence are essential to Internal Audit in the proper fulfillment of its duties and is mandated by the Texas Internal Auditing Act and professional standards as defined later in this document.

Internal Audit reports directly to the Board to ensure independence, comprehensive audit coverage, adequate consideration of audit findings, and appropriate management action on audit recommendations. The Board shall ensure the independence of the Internal Audit function. To facilitate daily operations, Internal Audit will report administratively to the Executive Director.

The internal audit contractor will govern itself by adherence to The Institute of Internal Auditors' Mandatory Guidance, which includes the Core Principles for the Professional Practice

of Internal Auditing, the Code of Ethics, the International Standards for the Professional Practice of Internal Auditing, and the Definition of Internal Auditing. The IIA's Mandatory Guidance constitutes the fundamental requirements for the professional practice of internal auditing and the principles against which to evaluate the effectiveness of the internal audit activity's performance.

Performance of management's responsibilities by Internal Audit may compromise its objectivity. This, however, does not preclude Internal Audit from serving in an advisory capacity in the implementation of corrective action or the establishment of new activities, policies, or procedures. Internal Audit is a function that has no authority over activities which it reviews, and the performance of these reviews does not relieve management of any assigned responsibilities.

Internal Audit is not authorized to:

- Perform any operational duties for the agency or its contractors.
- Initiate or approve accounting transactions external to Internal Audit.
- Direct the activities of any agency employee not employed by Internal Audit, except to the extent such employees have been appropriately assigned to assist in the performance of internal audit activities.

RESPONSIBILITIES

The following outlines the respective responsibilities of the Board, the Internal Audit Contractor, and agency management as it relates to implementing an effective internal audit function for the agency.

Responsibilities of the Five-Member Board

The Board ensures the independence of the internal audit function. The Chair of the Board serves as the Audit Liaison, unless he or she designates another Board Member to serve in that role. To the extent allowed by law, the five-member Board may delegate to the Audit Liaison certain responsibilities of the five-member Board. The five-member Board shall:

- Approve the Internal Audit Charter.
- Appoint, remove, oversee, evaluate and take any appropriate contractual action towards the internal audit contractor.
- Approve the internal audit budget and resource plan.
- Periodically review the resources dedicated to the internal audit function and determine whether adequate resources exist to ensure that risks identified in the annual risk assessment are adequately covered within a reasonable time frame.
- Approve the risk based annual internal audit plan, including any changes or deviations.
- Receive communications from the internal audit contractor on the activity's

performance relative to the annual plan and other matters.

- Receive and review all internal audit reports.
- Make appropriate inquiries of management and Internal Audit to determine whether there is inappropriate scope or resource limitations.

Responsibilities of Internal Audit Contractor

Internal Audit is outsourced to an independent contractor. The contractor is responsible for assessing the adequacy and effectiveness of the various functions and control systems within the agency, advising the Board and agency management concerning the condition of those functions and systems, and developing recommendations to enhance economy, efficiency, effectiveness, and excellence. In fulfilling these responsibilities, Internal Audit shall:

- Communicate and interact directly with the Board, including in executive sessions and between Board meetings, as appropriate.
- Develop a flexible annual internal audit plan using an appropriate risk-based methodology and submit that plan to the Board for review and approval.
- Implement the approved annual internal audit plan including, as appropriate, special assignments, projects, or reviews requested by agency management or the Board.
- Submit any changes or deviations to the annual internal audit plan to the Board for review and approval.
- Provide periodic updates to the Board regarding the activities and responsibilities of Internal Audit.
- Conduct all audit functions as required by Texas Government Code § 2102.
- Appraise the effectiveness, reliability, and integrity of the agency's accounting, administrative, electronic data processing, and other major systems and controls, and ensure that all major systems and controls are reviewed on a periodic basis.
- Evaluate risk exposures relating to the agency's governance, operations, and information systems regarding the reliability and integrity of financial and operational information, effectiveness and efficiency of operations, safeguarding of assets, and compliance with laws, regulations, and other requirements.
- Review operations or programs to ascertain whether results are consistent with established objectives and goals and whether the operations or programs are being carried out as planned.
- Seek and utilize the available resources of the agency, as appropriate, including legal counsel.
- Conduct or assist, as appropriate, the investigation of suspected illegal or fraudulent activities within the agency and report results, as appropriate.
- Perform special assignments, projects, or reviews as requested by the Board and, as appropriate, other such special assignments, projects, or reviews requested by agency

management. Such assignments and reviews must not impair Internal Audit's independence.

- Determine that corrective action was taken on reported audit findings and is achieving the desired results, or that senior management has assumed the risk of not taking corrective action. Internal Audit shall assess the adequacy, effectiveness, and timeliness of actions taken by management to resolve reported audit findings.
- Perform consulting/advisory services to the extent they do not, nor will not, represent a conflict of interest, compromise or impair independence or objectivity, or detract from Internal Audit's obligations to the Board and the agency. Examples include, but are not limited to:
 - evaluating and assessing significant new or changing functions, services, processes, operations, and control processes concurrent with their development, implementation, and/or expansion,
 - participating in manual and automated system design as an advisor on risk and management controls, and
 - appraising existing allocation of resources by the agency.
- Keep the Board informed of emerging trends and successful practices in internal auditing.
- Consider both internal and external audit and review efforts to ensure optimal audit coverage at a reasonable overall cost.
- Assist the agency with external auditors or review groups for any audit or review conducted of the agency, as requested. Participate in status meetings and receive copies of all communications and reports.

Responsibilities of Agency Management

Management of the agency shall:

- Cooperate with and provide Internal Audit full and free access to all activities, records, property, and personnel of the agency and of its contractors and subcontractors.
- Timely inform Internal Audit of any reviews, evaluations, assessments, audits, or inspections conducted by local, state, or federal entities, or any external consultants, contractors, or auditors.
- Respond to draft internal audit reports within the time specified, indicating management's agreement or disagreement with the issues and recommendations, management's corrective actions proposed or taken, and dates for accomplishing those corrective actions. If there is any disagreement with the issues or recommendations, management will provide reasons. Alternative actions that correct issues are acceptable. Management accepts the risk of not taking appropriate corrective action on reported issues.

- Establish, administer, and assess the system of risk management and control processes designed to ensure the achievement of agency objectives and the following conditions exist:
 - Financial and operational information is reliable and possesses integrity.
 - Operations are performed efficiently and achieve effective results.
 - Assets are safeguarded.
 - Actions and decisions of the agency are in compliance with laws, regulations, and other requirements.
- Report to Internal Audit instances in which management has reasonable cause to believe that money received from the State by the agency or by a client or contractor of the agency may have been lost, misappropriated, or misused, or that other fraudulent or unlawful conduct has occurred in relation to the operation of the agency.

INTERNAL AUDIT PLAN

Internal Audit will prepare an annual risk-based audit plan. The annual audit plan will contain proposed audits for the upcoming fiscal year and be submitted to the Board for review and approval. The internal audit plan will consist of a detailed work schedule, as well as budget and resource requirements for the next fiscal/calendar year. Additionally, Internal Audit will communicate the impact of resource limitations and significant interim changes to senior management and the Board.

The internal audit plan will be developed based on prioritization of the audit universe using a risk-based methodology, including input of senior management and the Board. Internal Audit will review and adjust the plan, as necessary, in response to changes in the agency's business, risks, operations, programs, systems, and controls. Any significant deviation from the approved internal audit plan will be communicated to senior management and the Board through periodic activity reports.

The approved annual audit plan will be provided to required regulatory agencies and posted on the SORM's web site.

REPORTING

A written report will be prepared and issued by Internal Audit following the conclusion of each internal audit engagement and will be distributed as appropriate. Internal audit results will also be communicated to the Board and regulatory agencies as required.

Internal Audit will issue an annual audit report that provides a summary of Internal Audit activities, summary of findings, status of management's implementation of corrective action plans, any changes or deviations from that annual audit plan, and the proposed activities for the following year. The annual report will be drafted in accordance with the State Auditor's Office (SAO) and the Texas Internal Auditing Act requirements. The annual audit report will be provided to the Board and required regulatory agencies and posted on SORM's web site.

Reporting will also include significant risk exposures and control issues, including fraud risks, governance issues, and other matters needed or requested by senior management and the Board.

PROFESSIONALISM

Internal Audit will govern itself by adherence to The Institute of Internal Auditor's Definition of Internal Auditing and shall conform to *The Professional Practices Framework* as promulgated by the IIA, which includes *The International Standards for the Professional Practice of Internal Auditing* and the *Code of Ethics*, and to generally accepted government auditing standards. In addition, Internal Audit shall conform to requirements found under the Texas Internal Auditing Act (Chapter 2102, Texas Government Code). Internal Audit shall also comply with all policies and procedures of SORM.

The Institute of Internal Auditors' Practice Advisories, Practice Guides, and Position Papers will also be adhered to as applicable to guide operations.

All professional staff assigned to perform Internal Audit activities shall maintain technical competence by attending continuing professional education as required by the governing boards which regulate the professional designations of Certified Internal Auditor and Certified Public Accountant, as appropriate.

QUALITY ASSURANCE

Internal Audit shall maintain an effective quality assurance program that includes all aspects of the internal audit function, including supervision, training, internal reviews, and periodic comprehensive external peer reviews to ensure compliance with the Texas Internal Auditing Act and professional standards. The program will include an evaluation of the internal audit activity's conformance with the Definition of Internal Auditing and the *Standards* and an evaluation of whether Internal Audit staff apply the Code of Ethics. The program also assesses the efficiency and effectiveness of the internal audit function and identifies opportunities for improvement.

The Internal Audit contractor will communicate to senior management and the Board on the internal audit activity's quality assurance and improvement program, including results of ongoing internal assessments and external assessments.

The Internal Audit contractor shall maintain a professional audit staff with sufficient knowledge, skills, experience, and professional certifications, or supplement with external resources, to meet the requirements of this charter.

Approved by the Board at its meeting on [date].

Acknowledgments/Signatures

Liz Meyers, Chief Audit Executive

Date

Sara Hays, Executive Director

Date

This Charter was approved by the Board of Directors of the State Office of Risk Management on_____, 2026 and supersedes any previously approved charter.

Elizabeth Maciejewski-West, Board Chair



State Office of Risk Management

300 W. 15TH, AUSTIN, TEXAS 78701 / P.O. BOX 13777, AUSTIN, TEXAS 78711-3777
(512) 475-1440, FAX (512) 370-9025 / WWW.SORM.TEXAS.GOV

5. New business (continued)

5.2 Discussion of Claims Process and Payments Audit and Follow-up on Open Audit Findings

Information

Representatives of the agency's audit contractor will update the Board claims process and payments audit and follow-up on open audit findings.

Action Required

No official action required.



State Office of Risk Management

300 W. 15TH, AUSTIN, TEXAS 78701 / P.O. BOX 13777, AUSTIN, TEXAS 78711-3777
(512) 475-1440, FAX (512) 370-9025 / WWW.SORM.TEXAS.GOV

6. Executive Session (closed session):

Recess pursuant to Section 551.074, Government Code, to discuss the evaluation of a public officer or employee.

Pursuant to Section 551.071, Government Code, consultation with legal counsel to receive legal advice on items posted on this agenda; or consultation on a matter where SORM seeks the advice of its attorney as privileged communications under the Texas Disciplinary Rules of Professional Conduct of the State Bar of Texas

Information

The Board will meet in executive session pursuant to Section 551.074 & Section 551.071, Government Code to discuss matters.

Action Required

No official action may be taken.



State Office of Risk Management

300 W. 15TH, AUSTIN, TEXAS 78701 / P.O. BOX 13777, AUSTIN, TEXAS 78711-3777
(512) 475-1440, FAX (512) 370-9025 / WWW.SORM.TEXAS.GOV

7. Reconvene in Open Session for possible action on matters considered in Executive Session.

Information

The Board returns to public session and may deliberate and consider action on items discussed in Executive Session, such as, but not limited to:

- 7.1 Executive Director Performance Appraisal, including consideration of revisions to the Executive Director Performance Appraisal and possible adoption of the document (closed in accordance with Section 551.074, Government Code)
- 7.2 Discussion regarding delegation of authority to the Executive Director to negotiate and execute an addendum to the audit contract with existing vendor (closed in accordance with Section 551.071, Government Code)

Action Required

The Chair may entertain motions for consideration and possible action on relevant matters discussed in Executive session, if applicable.



State Office of Risk Management

300 W. 15TH, AUSTIN, TEXAS 78701 / P.O. BOX 13777, AUSTIN, TEXAS 78711-3777
(512) 475-1440, FAX (512) 370-9025 / WWW.SORM.TEXAS.GOV

8. Recognition of Former Board Chair Gerald Ladner

Information

Presentation of recognition to former Board Chair Gerald Ladner in appreciation of his distinguished service, leadership, and commitment to the State Office of Risk Management and its Board.

Action Required

No official action may be taken.



State Office of Risk Management

300 W. 15TH, AUSTIN, TEXAS 78701 / P.O. BOX 13777, AUSTIN, TEXAS 78711-3777
(512) 475-1440, FAX (512) 370-9025 / WWW.SORM.TEXAS.GOV

9. Public comment

Information

It is the policy of the Board that members of the public shall be given the opportunity to appear before the Board during public meetings of the Board and to speak on any issue under the jurisdiction of the Board.

Action Required

No official action requested, at this time.



State Office of Risk Management

300 W. 15TH, AUSTIN, TEXAS 78701 / P.O. BOX 13777, AUSTIN, TEXAS 78711-3777
(512) 475-1440, FAX (512) 370-9025 / WWW.SORM.TEXAS.GOV

10. Discussion and possible action on future meeting date

Information

Tentative meeting date is attached for discussion.

Action Required

Selection of future meeting date.



State Office of Risk Management

300 W. 15TH, AUSTIN, TEXAS 78701 / P.O. BOX 13777, AUSTIN, TEXAS 78711-3777
(512) 475-1440, FAX (512) 370-9025 / WWW.SORM.TEXAS.GOV

TENTATIVE BOARD OF DIRECTORS MEETING DATES FY27

FY27Q1

Primary: Thursday, January 21st at 9:30 a.m. (Location: Stephen F. Austin Boardroom)

Alternate: TBD



State Office of Risk Management

300 W. 15TH, AUSTIN, TEXAS 78701 / P.O. BOX 13777, AUSTIN, TEXAS 78711-3777
(512) 475-1440, FAX (512) 370-9025 / WWW.SORM.TEXAS.GOV

11. Adjourn meeting

The Chair:

1. Calls the meeting adjourned and announces time