



STATE OF MICHIGAN
DEPARTMENT OF HEALTH AND HUMAN SERVICES
LANSING

GRETCHEN WHITMER
GOVERNOR

ELIZABETH HERTEL
DIRECTOR

October 22, 2025

Jessica Thomas, Chief Internal Auditor
Office of Internal Audit Services
111 S. Capitol Avenue
Lansing, Michigan 48933

Dear Ms. Thomas:

In accordance with the State of Michigan Financial Management Guide, Part VII, enclosed is our final corrective action plan to address recommendations contained within the Office of the Auditor General report of the Michigan Long Term Care Ombudsman Program Follow-up.

All legislative inquiries should be directed to Chardae Burton, Michigan Department of Health and Human Services (MDHHS) Director of Legislative Affairs, at burtonc5@michigan.gov. All other questions regarding the corrective action plan should be directed to me at havenss2@michigan.gov.

Sincerely,

A handwritten signature in cursive script that reads 'Shannah M. Havens'.

Shannah Havens, CPA, MBA
Director, MDHHS Bureau of Audit

SH:cc

Enclosure (1)

- c: Executive Office
Office of the Auditor General
House and Senate Fiscal Agencies
House and Senate Oversight Committees
House Appropriations Subcommittee on Medicaid and Behavioral Health
Senate Appropriations Subcommittee on MDHHS
Senate Health Policy Committee
Elizabeth Hertel, MDHHS, Director
David Knezek, MDHHS, Chief Operating Officer
Amy Epkey, MDHHS, Senior Deputy Director, Financial Operations Administration
Chardae Burton, MDHHS, Director, Legislative Affairs
Meghan Groen, MDHHS, Chief Deputy Director, Health Services
Laura Blodgett, MDHHS, Senior Deputy Director, Communications Administration

Michigan Department of Health and Human Services
Michigan Long-Term Care Ombudsman Program Follow-up (391-0571-21F)
Issued by the Office of the Auditor General
July 2025
Department Final Corrective Action Plan

Summary Response Matrix

	Complied	Will Comply	Partially Complied	Will Not Comply
Agrees				
Partially Agrees				
Disagrees				Finding 2

Final Corrective Action Plan

Finding Number 1

OAG determined MDHHS complied with the prior audit finding. No corrective action is required.

Finding Number 2

Oversight of MLTCOP's complaint investigation process needed.

Department Response

Management Views: MDHHS disagrees that processes have not been fully established and implemented to monitor and evaluate MLTCOP's complaint investigation process. Refer to the department's complete response in report 391-0571-21F.

Finding Number 3

OAG determined MDHHS complied with the prior audit finding. No corrective action is required.