



STATE OF MICHIGAN

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GOVERNOR

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
LANSING

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](mailto:burtonc5@michigan.gov). All other questions regarding the corrective action plan should be directed to me at [havenss2@michigan.gov](mailto:havenss2@michigan.gov).

Sincerely,

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.