



STATE OF MICHIGAN

GRETCHEN WHITMER
GOVERNOR

DEPARTMENT OF HEALTH AND HUMAN SERVICES
LANSING

AMY EPKEY
ACTING DIRECTOR

August 25, 2026

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 Oversight of Selected Support, Information and Referral Hotlines.

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,

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

Enclosure (1)

c: Executive Office
Office of the Auditor General
House and Senate Fiscal Agencies
House and Senate Oversight Committees
House and Senate Appropriations Committees
House Appropriations Subcommittee on Medicaid and Behavioral Health
House Appropriations Committee on Public Health
House Appropriations Subcommittee on Human Services
Senate Appropriations Subcommittee on MDHHS
House Oversight Committee on Child Welfare
House and Senate Health Policy Committee
House Families and Veterans Committee
Senate Housing and Human Services Committee
Amy Epkey, MDHHS, Acting Director

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Mike DeRose, MDHHS, Acting Chief Operating Officer
Jean Ingersoll, MDHHS, Chief Administrative Officer
Chardae Burton, MDHHS, Director, Legislative Affairs
Erin Frisch, MDHHS, Senior Deputy Director, Economic Stability Administration
Meghan Groen, MDHHS, Senior Chief Deputy Director, Health Services
Erin Emerson, MDHHS, Senior Deputy Director, Health Services Administration
Laura Blodgett, MDHHS, Senior Deputy Director, Communications Administration

Michigan Department of Health and Human Services
Oversight of Selected Support, Information and Referral Hotlines (491-0211-24)
Issued by the Office of the Auditor General
June 2026
Department Final Corrective Action Plan

Summary Response Matrix

	Complied	Will Comply	Partially Complied	Will Not Comply
Agrees	Finding 3	Finding 1		
Partially Agrees				
Disagrees				Finding 2

Final Corrective Action Plan

Finding Number 1

Finding Title: Significant improvement needed in Michigan Department of Health and Human Services (MDHHS) oversight of Michigan 211 hotline activities.

Department Response

Management Views: MDHHS agrees with the finding.

Planned Corrective Action and Milestones: For part a., MDHHS will monitor Michigan 211's quarterly reports closely to ensure progress is being made towards confirming 90% of database records are accurate every 12 months and will require 211 to submit a corrective action plan if progress is significantly below the 90% target. If contract requirements are not met, MDHHS will work with DTMB to evaluate whether penalties should be assessed.

Michigan 211 is required to submit a gap analysis as part of a Standard Contact and Resource Performance Metrics report each year and was received during the audit period. Although review of the report was not formally documented, the analysis was reviewed and progress was discussed during monthly meetings. MDHHS staff will schedule a review session after each submission to specifically discuss the results of the gap analysis and create a documented plan of action.

The Michigan 211 resource database is updated by a wide range of agencies that provide direct services to the public to ensure their information is accurate and accessible. During fiscal year 2025, Michigan 211 implemented a new electronic process to notify agencies that a review is due and provides agencies direct access to review and update their own organizational information within the database to improve agency accuracy. The electronic process is much more efficient than paper communication and will allow Michigan 211 to promptly send reminders to those agencies that do not timely respond.

For part b., MDHHS is evaluating the current oversight process for Michigan 211, and will strengthen monitoring and evaluation of third party service organization controls.

For part c., Michigan 211 will provide key performance information as part of quarterly reporting. MDHHS staff will review and discuss any gaps or concerns, and plan of action for improvement, which will be documented for follow-up and monitoring.

While Michigan 211 did not consistently meet their performance goals in the audited years, improvement has been made in fiscal year 2025. In fiscal year 2026, MDHHS staff began monitoring performance goals and document conversations related to needed improvements to service delivery deficiencies. If an allowable credit is warranted, staff will work with Department of Technology, Management and Budget (DTMB) to determine the appropriate credit.

For part d., MDHHS will create a checklist that will include the required information for the annual legislative report. The checklist will be reviewed annually and Michigan 211 will be required to revise the report to include any missing information.

For part e., MDHHS will work with DTMB to amend the Michigan 211 contract to require submission of an annual report detailing the number of complaints received by call center, by type of complaint and any resolution implemented based on the complaint. To ensure confidentiality of the caller, no specific caller information will be reported.

The annual report will also require any policy or procedure changes implemented as a result of the complaints process. In addition, MDHHS will develop and implement a documented review process to identify any emerging issues, trends, or patterns in Michigan 211 responses.

Anticipated Compliance Date: September 30, 2027

Responsible Individuals:
Paula Van Dam, MDHHS
Robin Grinnell, MDHHS

Finding Number 2

Finding Title: Improvements needed in monitoring the Michigan Problem Gambling Helpline grantee's information system controls.

Department Response

Management Views: MDHHS disagrees with the finding. Refer to the department's response in report 491-0211-24.

Comment on CAP from Michigan Office of the Auditor General (09/29/2026, 10:00 AM)

MDHHS indicates it disagrees with our Finding, will not comply with our recommendation, and provides no intended corrective actions. This is notable because MDHHS's response at the time of our report also indicated its disagreement with our recommendation to strengthen its monitoring of the Michigan Problem Gambling Helpline grantee's information system controls. However, it did not challenge the existence of the weaknesses noted in the finding related to:

- 1) The absence of third-party assurance reports.
- 2) The grantee's expired accreditation from the Commission on Accreditation of Rehabilitation Facilities.
- 3) A lack of documentation to fully evidence the breadth of MDHHS's periodic performance report reviews, meetings with the grantee, and/or verification of the grantee's assertions and policies regarding its data security program.

For full details see Finding 2 beginning on page 19 of [our report](#) and the corresponding agency preliminary response and auditor's comment beginning on page 24.

Finding Number 3

Finding Title: Improvements needed in MDHHS's monitoring of key oversight employees' independence.

Department Response

Management Views: MDHHS agrees with the finding.

Planned Corrective Action and Milestones: MDHHS agrees that monitoring of employee conflict of interest disclosure should be improved to ensure documentation of employee conflict of interest disclosures are maintained, however, Civil Service Rule 2-8 only requires employees to submit conflict of interest forms annually if a potential conflict exists. MDHHS Human Resources has reviewed the personnel files for the employees selected for sample that are still employed with the department, and each personnel file now contains a conflict of interest form in accordance with Civil Service regulations. For each conflict of interest form reviewed, there were no MDHHS staff conflicts identified.

Beginning in 2024, MDHHS Office of Human Resources implemented a process to send an annual reminder to update conflict of interest forms in alignment with Civil Service regulations. If any potential conflicts are identified, MDHHS will submit the required form to MDHHS Human Resources and evaluate if further action is needed.

Anticipated Compliance Date: Completed