



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

March 3, 2026

Daniel Bogosian
Moriah Inc. c/o Dan Bogosian
3200 East Eisenhower Pkwy
Ann Arbor, MI 48108

RE: License #: AL810280703
Investigation #: 2026A0575017
Moriah Hall

Dear Mr. Bogosian:

Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- How compliance with each rule will be achieved.
- Who is directly responsible for implementing the corrective action for each violation.
- Specific time frames for each violation as to when the correction will be completed or implemented.
- Indicate how continuing compliance will be maintained once compliance is achieved.
- Be signed and dated.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please contact the local office at (517) 284-9720.

Sincerely,

A handwritten signature in blue ink that reads "Jeffrey J. Bozsik".

Jeffrey J. Bozsik, Licensing Consultant
Bureau of Community and Health Systems
(734) 417-4277

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
SPECIAL INVESTIGATION REPORT**

I. IDENTIFYING INFORMATION

| | |
|---------------------------------------|--|
| License #: | AL810280703 |
| Investigation #: | 2026A0575017 |
| Complaint Receipt Date: | 02/12/2026 |
| Investigation Initiation Date: | 02/12/2026 |
| Report Due Date: | 03/14/2026 |
| Licensee Name: | Moriah Inc. c/o Dan Bogosian |
| Licensee Address: | 3200 East Eisenhower Pkwy Ann Arbor, MI 48108 |
| Licensee Telephone #: | (734) 677-0070 |
| Administrator: | Daniel Bogosian |
| Licensee Designee: | Daniel Bogosian |
| Name of Facility: | Moriah Hall |
| Facility Address: | 3200 E. Eisenhower Pkwy Ann Arbor, MI 48108 |
| Facility Telephone #: | (734) 677-0070 |
| Original Issuance Date: | 03/19/2008 |
| License Status: | REGULAR |
| Effective Date: | 09/26/2024 |
| Expiration Date: | 09/25/2026 |
| Capacity: | 16 |
| Program Type: | DD; MI; TBI |

II. ALLEGATION(S)

| | Violation Established? |
|---|-------------------------------|
| Insufficient staffing on 1/18/2026. | Yes |
| Resident A's medication is not given as prescribed. | Yes |

III. METHODOLOGY

| | |
|------------|--|
| 02/12/2026 | Special Investigation Intake-2026A0575017 |
| 02/12/2026 | Special Investigation Initiated - On Site |
| 02/12/2026 | APS Referral |
| 02/13/2026 | Inspection Completed On-site- interview with Daniel Bogosian, licensee designee. |
| 02/24/2026 | Inspection Completed-BCAL Sub. Compliance |
| 02/24/2026 | Corrective Action Plan Requested and Due |
| 02/24/2026 | Contact - Telephone calls made-(a) Guardian A1; (b) direct care staffs: (1) Abubakun Bangura; (2) Kay Unbenhowar; (c) Laura Caincross- residential supervisor-North Main facility. |
| 02/24/2026 | Exit Conference with Daniel Bogosian, licensee designee |
| 02/25/2026 | Contact-Telephone call made- (a) Trava Boyd, direct care staff; (b) Guardian B1 |

ALLEGATION:

Insufficient staffing on 1/18/2026

INVESTIGATION:

Residents A and B were not interviewed because they are non-verbal and developmentally disabled.

On 2/12/2026, APS and ORR referrals were received. The APS referral alleged insufficient staffing levels on 1/18/2026.

On 2/13/2026 I interviewed Daniel Bogosian, licensee designee. He provided the names and telephone numbers of the guardians and of the staff who worked on 1/18/2026. We reviewed Resident A and B's IPOS's and assessment plans which required that both Resident A and B have 1:1 staffing during awake hours.

On 2/24/2026, I interviewed Guardian A1. She stated that there were only 2 staff working in Moriah Hall on 1/18/2026 while Resident A (and Resident B) requires 1:1 staffing per his IPOS and there were another 13 residents requiring general supervision.

On 2/24/2026, I interviewed direct care staff Abubakun Bangura. He stated that he was the 1:1 staff assigned to Resident A from 7:30am-8:00pm on 1/18/2026. He did not know who was assigned as Resident A's 1:1 staff after 8:00pm. He stated that Resident A had several behavior episodes during his shift because Guardian A1 was not coming to pick him up.

On 2/24/2026, I interviewed direct care staff Kay Unbenhowar. She stated that she was the 1:1 staff assigned to Resident B on 1/18/2026. She stated that she worked from 7:30am-1:00pm and was allowed to leave at 1:00pm. She did not know who was assigned as Resident B's 1:1 staff after 1:00pm.

On 2/24/2026, I interviewed Laura Caincross, residential supervisor at the North Main facility. She stated that she was aware that there was a staff shortage on 1/18/2026, but that she was unaware of the staffing situation in Moriah Hall. She stated that she went over to Moriah Hall from North Main to assist with the staffing shortage on 1/18/2026 and stated that Sundays are a particularly difficult day to have enough shift staff.

On 2/25/2026, I interviewed Trava Boyd, former direct care staff at Moriah Hall. She stated that adequate staffing is a recurring problem at Moriah Hall. She stated that she was not assigned as a 1:1 staff member on 1/18/2026 but was a general floor staff. She stated that her last day of employment at Eisenhower Center was 2/3/2026.

On 2/25/2026, I interviewed Guardian B1. She stated that she was aware of the ongoing lack of adequate staffing at Moriah Hall. She stated that on a previous visit, the date of which she could not remember, Resident B had no 1:1 staff. Finally, she stated that she was dissatisfied with Resident B's placement and residential services at Eisenhower Center.

On 2/24/2026, I conducted an exit conference with Daniel Bogosian. He understood that I was substantiating a rule violation for insufficient staffing on 1/18/2026 and acknowledged that staffing was a problem on that particular date.

| APPLICABLE RULE | |
|------------------------|--|
| R 400.671 | Resident care. |
| | (4) A licensee shall provide supervision, protection, and personal care as specified in a resident's assessment plan. A hospice service plan, do-not resuscitate order, or any other advance directive must be included as an addendum to the resident assessment and maintained with the assessment plan in the resident's record. |
| ANALYSIS: | The preponderance of credible evidence is that on 1/18/2026 there was a staffing shortage at Moriah Hall that resulted in the licensee not providing supervision, protection, and personal care as specified in Resident A and B's assessment plans and IPOS. |
| CONCLUSION: | VIOLATION ESTABLISHED |

ALLEGATION:

Resident A's medication is not given as prescribed.

INVESTIGATION:

On 2/24/2026, I interviewed Guardian A1 an antibiotic prescription she had brought in for Resident A. The prescription was for 5 days, from 2/3/2026-2/7/2026, two pills/doses per day for a total of 10 pills/doses. She stated that the staff did not give Resident A the medication as prescribed. She stated that she had given Resident A 1 dose and the Eisenhower staff documented that they administered an additional 7 doses, but there were 6 doses left on 2/8/2026.

On 2/13/2026 during my interview with Daniel Bogosian we reviewed Resident A's medications. Specifically, the antibiotic that Guardian A1 had brought in for Resident A. We reviewed Resident A's medication administration record which showed that there were 7 doses administered by Eisenhower Center staff plus the 1 dose Guardian A1 administered to Resident A. Therefore, there were 2 doses that were not administered by prescription.

On 2/24/2026, during my exit conference with Daniel Bogosian, I stated that I would be substantiating a medication rule violation. He agreed with my conclusions.

| APPLICABLE RULE | |
|------------------------|--|
| R 400.675 | Resident medications. |
| | (1) Medication must be given, taken, or applied as prescribed, ordered, or directed by an appropriately licensed health care professional. |
| ANALYSIS: | The preponderance of credible evidence is that Resident A's prescription antibiotic medication was not given as prescribed by the Eisenhower Center staff from 2/3/2026 to 2/7/2026. |
| CONCLUSION: | VIOLATION ESTABLISHED |

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, I recommend no change in the license status.

Jeffrey J. Bozsik
Licensing Consultant

Date: 2/25/2026

Approved By:

Ardra Hunter
Area Manager

Date: 3/3/2026