United States Department of Justice
Civil Rights Division
civilrights.justice.gov

Thank you for submitting a report to the Civil Rights Division.

Report successfully submitted

Your record number is: **355156-LRB**

What to expect

1 We review your report

Our specialists in the Civil Rights Division carefully read every report to identify civil rights violations, spot trends, and determine if we have authority to help with your report.

2 Our specialists determine the next step

We may decide to:
Open an investigation or take some other action within the legal authority of the Justice Department.
Collect more information before we can look into your report.
Recommend another government agency that can properly look into your report. If so, we'll let you know.

In some cases, we may determine that we don't have legal authority to handle your report and will recommend that you seek help from a private lawyer or local legal aid organization.

3 When possible, we will follow up with you

We do our best to let you know about the outcome of our review. However, we may not always be able to provide you with updates because:
We're actively working on an investigation or case related to your report.
We're receiving and actively reviewing many requests at the same time.

If we are able to respond, we will contact you using the contact information you provided in this report. Depending on the type of report, response times can vary. If you need to reach us about your report, please refer to your report number when contacting us. This is how we keep track of your submission.

What you can do next

1 Contact local legal aid organizations or a lawyer if you haven't already

Legal aid offices or members of lawyer associations in your state may be able to help you with your issue.
American Bar Association, visit www.americanbar.org/groups/legal_services/flh-home or call (800) 285-2221
Legal Services Corporation (or Legal Aid Offices), to help you find a legal aid lawyer in your area visit www.lsc.gov/find-legal-aid

2 Get help immediately if you are in danger

If you reported an incident where you or someone else has experienced or is still experiencing physical harm or violence, or are in immediate danger, please call 911 and contact the police.

Your submission

Contact

Contact information

Your name

David Medeiros

Email address

aabiwr@live.com

Phone number

8604633638

Address

215 Mountain St
-
Willimantic, Connecticut 06226

Are you now or have ever been an active duty service member?

No

Primary concern

What is your primary reason for contacting the Civil Rights Division?

Discriminated against in a commercial location or public place

Location

Please choose the type of location that best describes where the incident happened

Public space

Where did this happen?

Organization name
Connecticut Department of Social Services

Address
55 Farmington Ave Hartford, CT 06105
-
Hartford, Connecticut

Personal characteristics

Do you believe any of these personal characteristics influenced why you were treated this way?

Disability (including temporary or recovered and including HIV and drug addiction)

Date

When did this happen?

10/4/2023

Personal description

In your own words, describe what happened

UNITED STATES DEPARTMENT OF JUSTICE
CIVIL RIGHTS DIVISION
950 Pennsylvania Avenue, NW
Washington, D.C. 20530
RE: Formal Complaint of Discrimination
I. EXECUTIVE OVERVIEW
To the Honorable Representatives of the Civil Rights Division,
I, David Medeiros, submit this formal complaint to the Department of Justice's Civil Rights Division with profound urgency and gravitas. Grounded in both federal and Connecticut state anti-discrimination laws, this document presents a disconcerting chronicle of alleged discriminatory actions and oversights perpetuated by the Connecticut Department of Social Services and the COU Community Options Unit.
II. IDENTIFICATION OF PARTIES
Complainant: David Medeiros, an emblematic figure in disability rights advocacy, proprietor of ABI Resources LLC, and a tenacious survivor of traumatic brain injury and stroke.

Respondents: Connecticut Department of Social Services and COU Community Options Unit, state entities duly bound by federal and state anti-discrimination mandates.

III. CHRONOLOGY OF DISCRIMINATORY CONDUCT

With meticulous detail, the following systemic transgressions are chronicled:

Systemic Communication Marginalization: A troubling neglect of my professional communications.

Deliberate Professional Barriers: Constructed obstructions inhibiting my professional ascent.

Sustained Harassment Campaign: Repeated acts undermining my dignity and professional standing.

Disregard for Grievance Mechanisms: An evident abrogation of my due process rights.

Resource Allocation Biases: Apparent disparities underscoring inherent bias against my professional endeavors.

IV. LEGISLATIVE AND REGULATORY INFRACTIONS

In accordance with the highest standards of legal rigor, I cite infractions of:

Americans with Disabilities Act, 42 U.S.C. § 12101 et seq. (ADA): A fundamental federal mandate that prohibits disability-based discrimination.

Section 504 of the Rehabilitation Act of 1973: An integral federal statute that safeguards against disability-based discrimination within federally funded programs or activities.

28 CFR Part 36: Regulatory provisions that underscore non-discrimination based on disability in public accommodations.

V. PRAYERS FOR REDRESS

I humbly entreat the Civil Rights Division to:

Initiate a Comprehensive Investigation into the infractions as detailed herein.

Mandate Immediate Remedial Actions by the Respondents to rectify their actions and ensure compliance with federal mandates.

Impose Appropriate Sanctions against the Respondents in accordance with the gravitas of the transgressions.

VI. CONCLUDING REMARKS

With unwavering faith in the bedrock principles of justice, equity, and civil rights that have defined this great nation, I submit this complaint to the Department of Justice, ardently seeking redress and anticipating a judicious resolution.

Dated:10.05.2023

With Deepest Respect,

David Medeiros

FEDERAL TRADE COMMISSION
ReportFraud.ftc.gov

Consumer Report To The FTC

FTC Report Number
165191346

The FTC cannot resolve individual complaints, but we can provide information about next steps to take. We share your report with local, state, federal, and foreign law enforcement partners. Your report might be used to investigate cases in a legal proceeding. Please read our Privacy Policy to learn how we protect your personal information, and when we share it outside the FTC.

About you

Name: David Medeiros

Email: aabiwr@live.com

Address: 215 Mountain St

Phone: 860-463-3638

City: Willimantic **State:** Connecticut **Zip Code:** 06226

Country: USA

What happened

Federal Trade Commission 600 Pennsylvania Avenue NW Washington, DC 20580 Subject: Unlawful Practices of Connecticut Supported Living Group (SLG) and Its Implications on Federal Trade Laws Dear FTC Commissioners, I hope this letter finds you well. My name is David Medeiros, and I am writing on behalf of ABI Resources, a service provider dedicated to assisting the recovering brain-injured population. I am writing to bring to your attention alarming information we have received concerning potentially illicit and anti-competitive actions by the Connecticut Supported Living Group (SLG) Executive Office of Bethany, located at 23 Amity Rd, Bethany, CT 06524. 1. Payment to Clients for Service Retention: We have been made aware that SLG has adopted a strategy wherein clients receiving federally-funded Medicaid services for brain injury recovery are also being paid an amount of $30 a week for their continued patronage. Not only does this raise concerns regarding the ethicality of essentially 'paying' clients to receive medical care, but it also casts a shadow over the integrity of the decision-making process these vulnerable clients must navigate. 2. Termination of Services for Seeking Clarity: Further aggravating the matter, when a particular client sought more details regarding this $30 per week payment, SLG allegedly terminated their federally-funded healthcare support services. Such retaliation for a simple inquiry is not only unacceptable but also could potentially breach the rights of Medicaid beneficiaries. 3. Anti-Competitive Behavior and Its Impacts: The said practice poses significant challenges for other service providers, like ABI Resources. When clients receive financial incentives from SLG, they are naturally less likely to explore or shift to other service providers, regardless of the quality or appropriateness of care. This unfairly impacts our ability and that of other agencies to compete on a level playing field. Violations of FTC Laws: Given the above, we believe SLG's actions potentially violate several key FTC provisions: a. Deceptive Practices (Section 5 of the FTC Act): By paying clients and not being transparent about the nature or reasons for these payments, SLG may be engaging in deceptive practices. b. Unfair Practices (Section 5 of the FTC Act): Terminating services in retaliation for queries regarding the payments can be deemed as an unfair practice, which could lead to substantial harm to consumers who are denied necessary medical services. c. Anti-Competitive Practices (Sherman Act, Section 2): By paying clients to retain their services, SLG is potentially creating a monopoly in the market for services related to brain injury recovery. This could result in lessened competition, which is detrimental to consumers who benefit from a competitive marketplace that fosters innovation and better services. Request for Action: Given the severe implications of these actions for the welfare of the recovering brain-injured community and the competitive landscape of healthcare services in Connecticut, we respectfully request that the FTC promptly investigates this matter and take the necessary measures to halt and rectify any unfair and deceptive practices found. We remain at your disposal for any further information or clarity that you may need to pursue this matter. Thank you for your time and consideration. Sincerely, David Medeiros ABI Resources

How it started

Date fraud began:	Amount I was asked for:	Amount I Paid:
10/01/2023		
Payment Used:		**How I was contacted:**
Other		Other

Details about the company, business, or individual

Company/Person		
Name: Supported Living Group (SLG) Executive Office of Bethany, lo		
Address Line 1:	Address Line 2:	City:
State:	Zip Code:	Country:
Email Address:		
Phone:		
Website:		
Name of Person You Dealt With:		

Your Next Steps

Scam Advice:

- If you're concerned a scammer has your personal information, like your Social Security, credit card, or bank account number, go to identitytheft.gov for steps you can take.
- Learn more about different scams and how to recover from them at ftc.gov/scams.
- You also can file a report with your state attorney general.

What Happens Next

- Your report will help us in our efforts to protect all consumers. Thank You!
- We can't resolve your individual report, but we use reports to investigate and bring cases against fraud, scams, and bad business practices.
- We share your report with our law enforcement partners who also use reports to investigate and bring cases against fraud, scams, and bad business practices.
- We use reports to spot trends, educate the public, and provide data about what is happening in your community. You can check out what is going on in your state and metro area by visiting ftc.gov/exploredata.

ftc.gov/refunds

Thank you for submitting a report to the Civil Rights Division

DOJ Civil Rights - Do Not Reply <civilrightsdonotreply@mail.civilrights.usdoj.gov>

Thu 9/28/2023 1:37 PM

To:davidmedeiros@live.com <davidmedeiros@live.com>

U.S. Department of Justice
Civil Rights Division

civilrights.justice.gov

Please do not reply to this email. This is an unmonitored account.

Thank you for submitting a report to the Civil Rights Division. Please save your record number for tracking. Your record number is: **352533-WJH**.

If you reported an incident where you or someone else has experienced or is still experiencing physical harm or violence, or are in immediate danger, please call 911 and contact the police.

What to Expect

1. We review your report

Our specialists in the Civil Rights Division carefully read every report to identify civil rights violations, spot trends, and determine if we have authority to help with your report.

2. Our specialists determine the next steps

We may decide to:

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What You Can Do Next

1. Contact local legal aid organizations or a lawyer if you haven't already.

Legal aid offices or members of lawyer associations in your state may be able to help you with your issue.

- American Bar Association, visit the www.americanbar.org/groups/legal_services/flh-home or call (800) 285-2221
- Legal Services Corporation (or Legal Aid Offices),to help you find a legal aid lawyer in your area visit www.lsc.gov/find-legal-aid

2. Learn More

Visit civilrights.justice.gov to learn more about your rights and see examples of violations we handle.

Please Note: *Each week, we receive hundreds of reports of potential violations. We collect and analyze this information to help us select cases, and we may use this information as evidence in an existing case. We will review your letter to decide whether it is necessary to contact you for additional information. We do not have the resources to follow-up on every letter.*

Contact

civilrights.justice.gov

U.S. Department of Justice
Civil Rights Division
950 Pennsylvania Avenue, NW
Washington, D.C. 20530-0001

(202) 514-3847
1-855-856-1247 (toll-free)
Telephone Device for the Deaf
(TTY) (202) 514-0716

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Office for Civil Rights

New England Region ● Government Center
JFK Federal Building, Room 1875 ● Boston, MA 02203
Voice - (800) 368-1019 ● TDD - (800) 537-7697
Fax - (617) 565-3809 ● http://www.hhs.gov/ocr

10/05/2023

VIA ELECTRONIC MAIL

David Medeiros

Email: davidmedeiros@live.com

OCR Transaction Number: 01-23-547732

Dear Mr. Medeiros:

Thank you for your correspondence to the U.S. Department of Health and Human Services ("HHS"), Office for Civil Rights ("OCR").

OCR enforces federal civil rights laws which prohibit discrimination in the delivery of health and human services based on race, color, national origin, disability, age, sex, religion, and the exercise of conscience, and also enforces the Health Insurance Portability and Accountability Act ("HIPAA") Privacy, Security and Breach Notification Rules.

Based upon our review of your complaint, we have determined that the concerns you raise are more appropriately addressed by the U.S. Department of Justice ("DOJ"). For additional information and to file a complaint with DOJ, please see the following link.

Submitting a Complaint (justice.gov)

OCR's determination as stated in this letter applies only to the allegations in this complaint that OCR reviewed. If you have any questions regarding this matter, please contact William Lawton, Investigator, at 617-565-1354, or by email at William.Lawton@hhs.gov.

Sincerely,

Susan M. Pezzullo Rhodes
Regional Manager

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Office for Civil Rights

New England Region ● Government Center
JFK Federal Building, Room 1875 ● Boston, MA 02203
Voice - (800) 368-1019 ● TDD - (800) 537-7697
Fax - (617) 565-3809 ● http://www.hhs.gov/ocr

10/05/2023

VIA ELECTRONIC MAIL

David Medeiros

Email: davidmedeiros@live.com

OCR Transaction Number: 01-23-547732

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OCR enforces federal civil rights laws which prohibit discrimination in the delivery of health and human services based on race, color, national origin, disability, age, sex, religion, and the exercise of conscience, and also enforces the Health Insurance Portability and Accountability Act ("HIPAA") Privacy, Security and Breach Notification Rules.

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Submitting a Complaint (justice.gov)

OCR's determination as stated in this letter applies only to the allegations in this complaint that OCR reviewed. If you have any questions regarding this matter, please contact William Lawton, Investigator, at 617-565-1354, or by email at William.Lawton@hhs.gov.

Sincerely,

Susan M. Pezzullo Rhodes
Regional Manager

RE: Freedom of Information Act Request: Communications Pertaining to Federal Medicaid ABI Waiver Program & Money Follows the Person Program

DSS, FOIA <FOIA.DSS@ct.gov>

Tue 9/26/2023 8:24 AM

To:ABI RESOURCES 860 942-0365 <aabiwr@live.com>;DSS, FOIA <FOIA.DSS@ct.gov>;DSS, Commis <Commis.DSS@ct.gov>

David –

Your request for information has been received.

The Department will respond in accordance with the requirements of the CT FOIA.

If there are any costs associated with complying with your request, an estimate will be provided to you before the records are compiled and provided to you.

Thank you.

FOIA Officer
Department of Social Services

From: ABI RESOURCES 860 942-0365 <aabiwr@live.com>
Sent: Tuesday, September 26, 2023 7:11 AM
To: DSS, FOIA <FOIA.DSS@ct.gov>; DSS, Commis <Commis.DSS@ct.gov>
Subject: Freedom of Information Act Request: Communications Pertaining to Federal Medicaid ABI Waiver Program & Money Follows the Person Program
Importance: High

Subject: Freedom of Information Act Request: Communications Pertaining to Federal Medicaid ABI Waiver Program & Money Follows the Person Program

Department of Health and Human Services
Center for Medicare and Medicaid Services / Connecticut Department of Social Services / and the Community Options Unit,

I hope this message finds you well. I am writing on behalf of ABI Resources LLC to make a request under the Freedom of Information Act (5 U.S.C. § 552) and Connecticut's Freedom of Information Act (Conn. Gen. Stat. § 1-200 et seq.).

Request Details:
We formally request access to, and copies of, all email communications, including attachments, sent to and from the Connecticut Department of Social Services, the Connecticut Community Options Unit, the Connecticut DSS Commissioners as well as emails to and from Ms. Amy Dumont COU DSS representative, related to the federal Medicaid Acquired Brain Injury (ABI) Waiver Program and the Money Follows the Person Program.

Specific Email Addresses:
AABIWR@live.com
ABI@ctbraininjury.com
David.M@ctbrainInjury.com

Timeframe:
From January 1, 2013, to the present date.

Objective:
Our objective is to obtain a comprehensive understanding of all communications, dialogues, discussions, and information exchanged relating to the aforementioned programs.

Format:
We prefer to receive the requested documents in electronic format to facilitate access and review. Please send the documents via email to the following addresses:

Aabiwr@live.com

Conclusion:
We understand the obligations and constraints of your office and appreciate your attention to this request. We look forward to your prompt response, and, as stipulated by statute, we hope to receive the requested records within the legal time frame.

Thank you very much for your time and cooperation. We anticipate your expedient disclosure of the requested documents.

Sincerely,

David Medeiros
ABI Resources LLC

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop C5-11-06
Baltimore, Maryland 21244-1850

Office of Strategic Operations and Regulatory Affairs/Freedom of Information Group
Refer to: Control Number 010620247001 and PIN ATP6

1/17/2024

David Medeiros
ABI Resources LLC
215 Mountain St
Willimantic, CT 06226

Dear Mr. Medeiros

I am acknowledging receipt of your 1/12/2024 Freedom of Information Act (FOIA) appeal, which you sent to the Principal Deputy Director, Centers for Medicare & Medicaid Services (CMS). We will process your appeal as expeditiously as possible, consistent with Department of Health and Human Services FOIA rules set forth at 45 CFR Part 5.

Questions regarding your appeal should be directed to Joseph Tripline via e-mail, at joseph.tripline@cms.hhs.gov.

Sincerely yours,

Joseph Tripline

Joseph Tripline
Acting Director
Freedom of Information Group

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop C5-11-06
Baltimore, Maryland 21244-1850

Office of Strategic Operations and Regulatory Affairs/Freedom of Information Group
Refer to: Control Number 010620247001 and PIN ATP6

1/17/2024

David Medeiros
ABI Resources LLC
215 Mountain St
Willimantic, CT 06226

Dear Mr. Medeiros

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Questions regarding your appeal should be directed to Joseph Tripline via e-mail, at joseph.tripline@cms.hhs.gov.

Sincerely yours,

Joseph Tripline

Joseph Tripline
Acting Director
Freedom of Information Group

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop C5-11-06
Baltimore, Maryland 21244-1850

Office of Strategic Operations and Regulatory Affairs/Freedom of Information Group
Refer to: Control Number 010920247033 and PIN B6MT

1/17/2024

David Medeiros
ABI Resources, LLC
39 Kings Hwy STE C
Ledyard, CT 06335

Dear Mr. Medeiros

I am acknowledging receipt of your 1/12/2024 Freedom of Information Act (FOIA) appeal, which you sent to the Principal Deputy Director, Centers for Medicare & Medicaid Services (CMS). We will process your appeal as expeditiously as possible, consistent with Department of Health and Human Services FOIA rules set forth at 45 CFR Part 5.

Questions regarding your appeal should be directed to Joseph Tripline via e-mail, at joseph.tripline@cms.hhs.gov.

Sincerely yours,

Joseph Tripline

Joseph Tripline
Acting Director
Freedom of Information Group

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop C5-11-06
Baltimore, Maryland 21244-1850

Office of Strategic Operations and Regulatory Affairs/Freedom of Information Group
Refer to: Control Number 122120237092 and PIN AZB5

1/11/2024

David Medeiros
ABI Resources LLC
215 Mountain St
Willimantic, CT 06226

Dear Mr. Medeiros:

This letter is in response to your Freedom of Information Act (5 U.S.C. § 552) request of 12/21/2023 which you sent to the Centers for Medicare & Medicaid Services (CMS). Within your correspondence you request a comprehensive list and copies of all Freedom of Information Act requests submitted by yourself and/or ABI Resources to any department of the government.

In addition, you requested expedited processing of your request. Our agency conducted an expedited search for records falling within the scope of your request and located one Excel spreadsheet of responsive documents. We are releasing this document to you in their entirety, without deletions.

If you are not satisfied with any aspect of the processing and handling of this request, you have the right to seek dispute resolution services from:

Joseph Tripline
CMS FOIA Public Liaison
Centers for Medicare & Medicaid Services
7500 Security Blvd., MS N2-20-16
Baltimore, Maryland 21244-1850
Telephone: (410) 786-5353 fax (443)-380-7260

and/or:

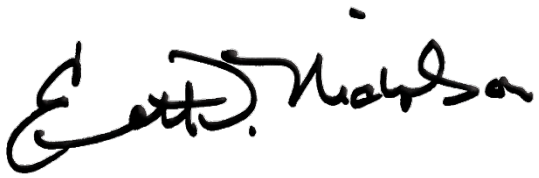
Office of Government Information Services
National Archives and Administration
8601 Adelphi Road – OGIS
College Park, MD 20740-6001

Telephone: 202-741-5770

Toll-Free: 1-877-684-6448

E-mail: ogis@nara.gov

Respectfully,



Emmett Nicholson
Director, Division of FOIA Analysis – C
Freedom of Information Group

Enclosure

Outlook

Freedom of Information Act- 110420247041

From James, Michelle (CMS/OSORA) <michelle.james@cms.hhs.gov>
Date Mon 11/4/2024 2:16 PM
To ABI RESOURCES 860 942-0365 <aabiwr@live.com>

1 attachments (129 KB)
Expedited Processing_Fee Waiver Grant Letter-Medeiros2.pdf;

Hello,

Please see the attached acknowledgement letter regarding your recent FOIA request. Feel free to email me if you have any questions.

Thank you,

Michelle A James

Government Information Specialist
Division of FOIA Analysis - C
Office of Strategic Operations and Regulatory Affairs (OSORA)
Centers for Medicare & Medicaid Services

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop C5-11-06
Baltimore, Maryland 21244-1850

Office of Strategic Operations and Regulatory Affairs/Freedom of Information Group
Refer to: Control Number 010220247006 and PIN AJNT

1/4/2024

David Medeiros
ABI RESOURCES
39 Kings HWY STE C
Gales Ferry, CT 06335

Dear Mr. Medeiros:

I am responding to your 12/21/2023 letter requesting expedited processing of your Freedom of Information Act (FOIA) request for documents regarding Connecticut Departments of Social Services systems for consumers under the Medicaid ABI Waiver program. The basis for expedited processing set forth in your letter is due to the legal case David Medeiros v State of CT.

I reviewed your request in line with 5 U.S.C. §552(a)(6)(E). This section provides for expedited processing of FOIA requests when the person requesting the records demonstrates a compelling need as defined by the statute; i.e., an imminent threat to the life and safety of an individual; or, for the media, urgency to inform the public concerning actual or alleged government activity. On the basis of the information available to me, I find that your request does not qualify for expedited processing based upon "compelling need."

I also reviewed your request in light of "other" circumstances that warrant expedited processing according to this agency's Federal Register Notice Vol. 81, No. 209 (dated Friday, October 28, 2016). Such circumstances cover the need for disclosure of the specific records in question because the requester must meet: a deadline in litigation, either in court or before an administrative tribunal; or a deadline imposed by a governmental agency for commenting on a proposed regulation. I find that none of these circumstances apply here.

Finally, in line with the provision of our Federal Register Notice that requires consideration of all requests that do not fall within the circumstances enumerated therein, I have considered the situation set forth in your letter. Unfortunately, I cannot conclude from the information you have provided that there is "exceptional need or urgency" justifying expedited processing in this case.

Therefore, I cannot grant your request for expedited processing. This Group will process your request in accordance with this agency's "first in, first out" practice.

If you disagree with this decision, you may appeal. Any such appeal must be mailed within 30 days to: The Principal Deputy Administrator, Centers for Medicare & Medicaid Services, Room C5-16-03, 7500 Security Boulevard, Baltimore, Maryland 21244. Mark your envelope "Freedom of Information Act Appeal" and enclose a copy of this letter with your appeal.

Questions concerning the status of your request should be directed to Angela Pompey of my staff at 410-786-3153.

Respectfully,

Emmett Nicholson
Director, Division of FOIA Analysis – C
Freedom of Information Group

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop C5-11-06
Baltimore, Maryland 21244-1850

Office of Strategic Operations and Regulatory Affairs/Freedom of Information Group
Refer to: Control Number 122620237029 and PIN 34JA

1/9/2024

David Medeiros
215 Mountain St
Willimantic, CT 06226

Dear Mr. Medeiros:

I am responding to your 12/26/2023 letter requesting expedited processing of your Freedom of Information Act (FOIA) request for documents regarding any legal cases, lawsuits, or administrative proceedings related to civil rights violations, disability discrimination, or whistleblower retaliation within Connecticut's various state-managed programs. The basis for expedited processing set forth in your letter is due to the information, requested is crucial for ensuring that rights are not just upheld but actively protected, particularly in the context of disability support and advocacy.

I reviewed your request in line with 5 U.S.C. §552(a)(6)(E). This section provides for expedited processing of FOIA requests when the person requesting the records demonstrates a compelling need as defined by the statute; i.e., an imminent threat to the life and safety of an individual; or, for the media, urgency to inform the public concerning actual or alleged government activity. On the basis of the information available to me, I find that your request does not qualify for expedited processing based upon "compelling need."

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Respectfully,

Emmett Nicholson
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Freedom of Information Group

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop C5-11-06
Baltimore, Maryland 21244-1850

Office of Strategic Operations and Regulatory Affairs/Freedom of Information Group
Refer to: Control Number 010320247010 and PIN YBWU

1/9/2024

David Medeiros
215 Mountain St
Willimantic, CT 06226

Dear Mr. Medeiros:

I am responding to your 1/3/2024 letter requesting expedited processing of your Freedom of Information Act (FOIA) request for documents regarding Michael Slitt's involvement in the Connecticut Medicaid Acquired Brain Injury Waiver Program. The basis for expedited processing set forth in your letter is due to the information, requested is crucial for ensuring that rights are not just upheld but actively protected, particularly in the context of disability support and advocacy.

I reviewed your request in line with 5 U.S.C. §552(a)(6)(E). This section provides for expedited processing of FOIA requests when the person requesting the records demonstrates a compelling need as defined by the statute; i.e., an imminent threat to the life and safety of an individual; or, for the media, urgency to inform the public concerning actual or alleged government activity. On the basis of the information available to me, I find that your request does not qualify for expedited processing based upon "compelling need."

I also reviewed your request in light of "other" circumstances that warrant expedited processing according to this agency's Federal Register Notice Vol. 81, No. 209 (dated Friday, October 28, 2016). Such circumstances cover the need for disclosure of the specific records in question because the requester must meet: a deadline in litigation, either in court or before an administrative tribunal; or a deadline imposed by a governmental agency for commenting on a proposed regulation. I find that none of these circumstances apply here.

Finally, in line with the provision of our Federal Register Notice that requires consideration of all requests that do not fall within the circumstances enumerated therein, I have considered the situation set forth in your letter. Unfortunately, I cannot conclude from the information you have provided that there is "exceptional need or urgency" justifying expedited processing in this case.

Therefore, I cannot grant your request for expedited processing. This Group will process your request in accordance with this agency's "first in, first out" practice.

If you disagree with this decision, you may appeal. Any such appeal must be mailed within 30 days to: The Principal Deputy Administrator, Centers for Medicare & Medicaid Services, Room C5-16-03, 7500 Security Boulevard, Baltimore, Maryland 21244. Mark your envelope "Freedom of Information Act Appeal" and enclose a copy of this letter with your appeal.

Questions concerning the status of your request should be directed to Angela Pompey of my staff at 410-786-3153.

Respectfully,

Emmett Nicholson
Director, Division of FOIA Analysis – C
Freedom of Information Group

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop C5-11-06
Baltimore, Maryland 21244-1850

Office of Strategic Operations and Regulatory Affairs/Freedom of Information Group
Refer to: Control Number 110420247041 and PIN FZMQ

11/4/2024

David Medeiros
ABI Resources
39 Kings Hwy Ste C
Gales Ferry, CT 06335

Dear David Medeiros:

I am acknowledging receipt of your Freedom of Information Act (FOIA) request dated 10/28/2024. Because we receive a very heavy volume of FOIA requests, we have had to establish a policy of "first in, first out" case processing. This policy is consistent with court decisions regarding FOIA's time limits. Please be assured that a search has been initiated for records falling within the scope of your request. If any such records are located, they will be reviewed as soon as possible, and you will be notified of our decision regarding release or non release of those documents.

You have asked for a waiver or reduction of the fees that we would customarily charge for furnishing agency records. I have reviewed your request for a fee waiver and have determined that disclosure to you of the information meets two basic requirements necessary for the granting of the fee waiver, i.e., (1) disclosure of information "is in the public interest because it is likely to contribute significantly to the public understanding of the operation or activities of the government" and (2) disclosure of the information "is not primarily in the commercial interest of the requester"

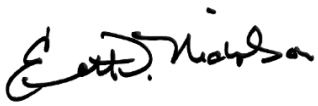
Therefore, I ***grant*** your request for fee waiver.

In addition, you request expedited processing of your request. I have reviewed your request [and associated documentation] in line with 5 U.S.C.§ 552(a)(6)(E) and this agency's expedite standards as published in the Federal Register,Vol. 81, No. 209 (Friday, October 28, 2016.) I find that your insert date FOIA request qualifies for expedited processing based upon exceptional need or urgency to inform the public.

Therefore, I ***grant*** your request for expedited processing, and your FOIA request will be processed by this Group as soon as practicable.

Questions concerning the status of your request should be directed to Michelle James of my staff at michelle.james@cms.hhs.gov.

Respectfully,



Emmett Nicholson
Director, Division of FOIA Analysis – C
Freedom of Information Group

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop C5-11-06
Baltimore, Maryland 21244-1850

Office of Strategic Operations and Regulatory Affairs / Freedom of Information Group

Request has been assigned: Control Number **100920247029** and PIN **EKF6**

10/10/2024

David Medeiros
ABI Resources LLC

Dear David**:**

This letter is to acknowledge receipt of your Freedom of Information Act (FOIA) (5 U.S.C. § 552) request and to provide you with a tracking number. The Centers for Medicare & Medicaid Services (CMS) received your FOIA request on October 10, 2024, pertaining to **Connecticut Medicaid Acquired Brain Injury (ABI) Waiver Program.**

To check the status of your request as it is being processed, please refer to the CMS FOIA website at https://foia-request.cms.gov/check-status and enter the control number and PIN (listed at the top of the page) that has been assigned to your request.

Once we complete our initial analysis of your request, we will initiate a search for responsive records. If, however, we determine that your request needs clarification, we will contact you. Additionally, if our searching units advise us that you have requested a voluminous number of records that requires extensive search, production, and review, we will contact you to discuss options for narrowing the scope to process your request as quickly and efficiently as possible.

Please note that CMS receives a very high volume of FOIA requests. The following unusual circumstances, as defined by 5 USC § 552(a)(6), may affect our ability to fulfill a FOIA request within 20 business days. These include circumstances such as (1) the request requires us to search for and collect records from multiple components and/or field offices; (2) the request involves a voluminous number of records that must be located, compiled, transferred to this office, and reviewed. In addition, given our high volume of requests, and in accordance with federal regulations, our processing policy includes factors such as the date and complexity of the request.

The FOIA assumes that requesters are willing to pay fees up to $25.00. If estimated fees to process your request exceed $25.00, we will notify you and may suspend processing until we receive written confirmation that you are willing to pay the estimated fees. Additionally, if the estimated fees exceed $250.00, the law authorizes us to collect the fees *in advance* of processing the request.

If your request sought a fee waiver or expedited processing, we will send additional communication to provide you with our determination decision(s).

If you are not satisfied with any aspect of the processing and handling of this request, please contact Michelle James at michelle.james@cms.hhs.gov.

You also have the right to seek dispute resolution services from:

Desiree Gaynor
CMS FOIA Public Liaison
Centers for Medicare & Medicaid Services
7500 Security Blvd., MS C5-11-06
Baltimore, Maryland 21244-1850
Telephone: (410) 786-5353 fax (443)-380-8871

and/or:

Office of Government Information Services
National Archives and Administration
8601 Adelphi Road – OGIS
College Park, MD 20740-6001

Telephone: 202-741-5770
Toll-Free: 1-877-684-6448
E-mail: ogis@nara.gov
Fax: 202-741-5769

Respectfully,

Emmett Nicholson
Director, Division of FOIA Analysis – C
Freedom of Information Group

NEW: You can now pay for CMS FOIA requests online through a secure website operated by the Department of the Treasury. Please have your invoice (CMS Form 633) readily available and click here to access Pay.Gov and pay online. https://www.pay.gov/public/form/start/1279541226

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop C5-11-06
Baltimore, Maryland 21244-1850

Office of Strategic Operations and Regulatory Affairs / Freedom of Information Group

Request has been assigned: Control Number **110620247022** and PIN **4GPY**

11/7/2024

David Medeiros
MuckRock News
Dept MR 175542
263 Huntington Ave
Boston, MA 02115

Dear David**:**

This letter is to acknowledge receipt of your Freedom of Information Act (FOIA) (5 U.S.C. § 552) request and to provide you with a tracking number. The Centers for Medicare & Medicaid Services (CMS) received your FOIA request on November 07, 2024, pertaining to Medicaid Waiver Program (Connecticut).

To check the status of your request as it is being processed, please refer to the CMS FOIA website at https://foia-request.cms.gov/check-status and enter the control number and PIN (listed at the top of the page) that has been assigned to your request.

Once we complete our initial analysis of your request, we will initiate a search for responsive records. If, however, we determine that your request needs clarification, we will contact you. Additionally, if our searching units advise us that you have requested a voluminous number of records that requires extensive search, production, and review, we will contact you to discuss options for narrowing the scope to process your request as quickly and efficiently as possible.

Please note that CMS receives a very high volume of FOIA requests. The following unusual circumstances, as defined by 5 USC § 552(a)(6), may affect our ability to fulfill a FOIA request within 20 business days. These include circumstances such as (1) the request requires us to search for and collect records from multiple components and/or field offices; (2) the request involves a voluminous number of records that must be located, compiled, transferred to this office, and reviewed. In addition, given our high volume of requests, and in accordance with federal regulations, our processing policy includes factors such as the date and complexity of the request.

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If your request sought a fee waiver or expedited processing, we will send additional communication to provide you with our determination decision(s).

If you are not satisfied with any aspect of the processing and handling of this request, please contact Michelle James at michelle.james@cms.hhs.gov

You also have the right to seek dispute resolution services from:

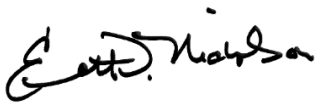
Desiree Gaynor
CMS FOIA Public Liaison
Centers for Medicare & Medicaid Services
7500 Security Blvd., MS C5-11-06
Baltimore, Maryland 21244-1850
Telephone: (410) 786-5353 fax (443)-380-8871

and/or:

Office of Government Information Services
National Archives and Administration
8601 Adelphi Road – OGIS
College Park, MD 20740-6001

Telephone: 202-741-5770
Toll-Free: 1-877-684-6448
E-mail: ogis@nara.gov
Fax: 202-741-5769

Respectfully,



Emmett Nicholson
Director, Division of FOIA Analysis – C
Freedom of Information Group

NEW: You can now pay for CMS FOIA requests online through a secure website operated by the Department of the Treasury. Please have your invoice (CMS Form 633) readily available and click here to access Pay.Gov and pay online. https://www.pay.gov/public/form/start/1279541226

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop C5-11-06
Baltimore, Maryland 21244-1850

Office of Strategic Operations and Regulatory Affairs/Freedom of Information Group
Refer to: Control Number 010920247054 and PIN SXSW

1/25/2024

David Medeiros
ABI Resources LLC
215 Mountain St
Willimantic, CT 06226

Dear Mr. Medeiros:

This letter is in response to your Freedom of Information Act (5 U.S.C. § 552) request of 1/9/2024 which you sent to the Centers for Medicare & Medicaid Services (CMS). Within your correspondence you seek copies of all Freedom of Information Act requests submitted by yourself, or on behalf of your organization, ABI Resources. In addition, you ask that all relevant correspondence, decisions, and responses associated with the requests be included.

Our agency initiated a search for records falling within the scope of your request, and located several pages of responsive documents. We are releasing those documents to you in their entirety, without deletions.

Relevant decisions and responses regarding your closed FOIA requests have been previously forwarded to you. Your open requests are currently assigned to one of our Agency components for a search of responsive records.

If you are not satisfied with any aspect of the processing and handling of this request, you have the right to seek dispute resolution services from:

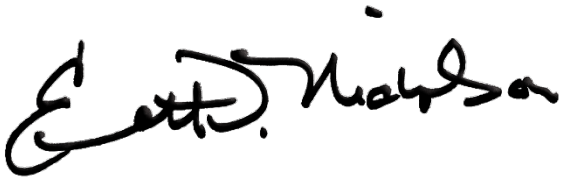
Joseph Tripline
CMS FOIA Public Liaison
Centers for Medicare & Medicaid Services
7500 Security Blvd., MS N2-20-16
Baltimore, Maryland 21244-1850
Telephone: (410) 786-5353 fax (443)-380-7260

and/or:

Office of Government Information Services
National Archives and Administration
8601 Adelphi Road – OGIS
College Park, MD 20740-6001

Telephone: 202-741-5770
Toll-Free: 1-877-684-6448
E-mail: ogis@nara.gov

Respectfully,



Emmett Nicholson
Director, Division of FOIA Analysis – C
Freedom of Information Group

Enclosure

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop C5-11-06
Baltimore, Maryland 21244-1850

Office of Strategic Operations and Regulatory Affairs/Freedom of Information Group
Refer to: Control Number 010920247054 and PIN SXSW

1/25/2024

David Medeiros
ABI Resources LLC
215 Mountain St
Willimantic, CT 06226

Dear Mr. Medeiros:

This letter is in response to your Freedom of Information Act (5 U.S.C. § 552) request of 1/9/2024 which you sent to the Centers for Medicare & Medicaid Services (CMS). Within your correspondence you seek copies of all Freedom of Information Act requests submitted by yourself, or on behalf of your organization, ABI Resources. In addition, you ask that all relevant correspondence, decisions, and responses associated with the requests be included.

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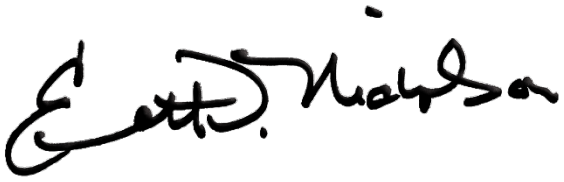
Joseph Tripline
CMS FOIA Public Liaison
Centers for Medicare & Medicaid Services
7500 Security Blvd., MS N2-20-16
Baltimore, Maryland 21244-1850
Telephone: (410) 786-5353 fax (443)-380-7260

and/or:

Office of Government Information Services
National Archives and Administration
8601 Adelphi Road – OGIS
College Park, MD 20740-6001

Telephone: 202-741-5770
Toll-Free: 1-877-684-6448
E-mail: ogis@nara.gov

Respectfully,



Emmett Nicholson
Director, Division of FOIA Analysis – C
Freedom of Information Group

Enclosure

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop C5-11-06
Baltimore, Maryland 21244-1850

Office of Strategic Operations and Regulatory Affairs/Freedom of Information Group
Refer to: Control Number 010920247054 and PIN SXSW

1/25/2024

David Medeiros
ABI Resources LLC
215 Mountain St
Willimantic, CT 06226

Dear Mr. Medeiros:

This letter is in response to your Freedom of Information Act (5 U.S.C. § 552) request of 1/9/2024 which you sent to the Centers for Medicare & Medicaid Services (CMS). Within your correspondence you seek copies of all Freedom of Information Act requests submitted by yourself, or on behalf of your organization, ABI Resources. In addition, you ask that all relevant correspondence, decisions, and responses associated with the requests be included.

Our agency initiated a search for records falling within the scope of your request, and located several pages of responsive documents. We are releasing those documents to you in their entirety, without deletions.

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If you are not satisfied with any aspect of the processing and handling of this request, you have the right to seek dispute resolution services from:

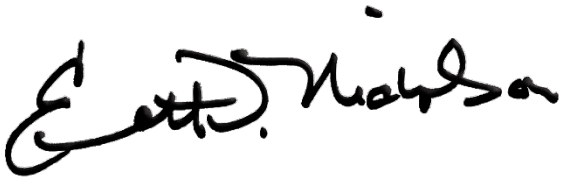
Joseph Tripline
CMS FOIA Public Liaison
Centers for Medicare & Medicaid Services
7500 Security Blvd., MS N2-20-16
Baltimore, Maryland 21244-1850
Telephone: (410) 786-5353 fax (443)-380-7260

and/or:

Office of Government Information Services
National Archives and Administration
8601 Adelphi Road – OGIS
College Park, MD 20740-6001

Telephone: 202-741-5770
Toll-Free: 1-877-684-6448
E-mail: ogis@nara.gov

Respectfully,



Emmett Nicholson
Director, Division of FOIA Analysis – C
Freedom of Information Group

Enclosure

2DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop C5-11-06
Baltimore, Maryland 21244-1850

Office of Strategic Operations and Regulatory Affairs /Freedom of Information Group

Refer to: Control Number 092920237066 and PIN PJXC

David Mederios
215 Mountain Street
Willimantic, CT 06226

January 19, 2024

Dear Mr. Medeiros:

This is in response to your September 29, 2023, Freedom of Information Act (FOIA) (5 U.S.C. § 552) request submitted to the Center for Medicare & Medicaid Services (CMS) or one of this agency's Medicare contractors via letter, facsimile transmission or e-mail seeking access to records, documents, and other pertinent information related to agency providers, services details and financial breakdowns for Connecticut Medicaid Acquired Brain Injury (ABI) Waiver Program for the time spanning the last seven years up to the present day. Documents responsive to your request, consisting of eighty-two (82) pages were forwarded to this Group because of my responsibility for administering the FOIA.

Enclosed are the eighty-two pages (82) pages received by this Group for review and release determination that respond to your request. After a careful review of the responsive documents, I have determined to release the pages to you in their entirety, without any deletions.

If you are not satisfied with any aspect of the processing and handling off this request, you have the right to seek dispute resolution services from:

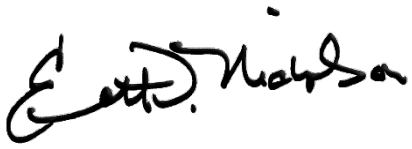
Joseph Tripline
CMS FOIA Public Liaison
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Room C5-11-06
Baltimore, Maryland 21244

Telephone: (410) 786-5362
E-mail: FOIA Request@cms.hhs.gov

and/or

Office of Government Information Services
National Archives and Records Administration
8601 Adelphi Road–OGIS
College Park, MD 20740-6001
Telephone: 202-741-5770
Toll-Free: 1-877-684-6448
E-mail: ogis@nara.gov
Fax: 202-741-5769

Sincerely,



Emmett D. Nicholson
Director, Division of FOIA Analysis - C
Freedom of Information Group

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop C5-11-06
Baltimore, Maryland 21244-1850

Office of Strategic Operations and Regulatory Affairs/Freedom of Information Group
Refer to: Control Number 102920247032 and PIN GVC9

10/30/2024

David Medeiros
ABI Resources LLC
39 Kings HWY STE C
Gales Ferry, CT 06335

Dear David Medeiros:

This letter is in response to your Freedom of Information Act (5 U.S.C. §552) request of 10/24/2024, which you sent to the Centers for Medicare & Medicaid Services (CMS). Within your correspondence, you requested records relating to Medicaid ABI Waiver Program.

After a careful search of the Centers for Medicare & Medicaid Services (CMS) files, i.e., a search reasonably calculated to locate records responsive to your request and employing reasonable standards, we were unable to locate any records responsive to your request. We suggest that you reach out to your state office at 860-424-5383.

If you believe that the information withheld should not be exempt from disclosure, or this response constitutes an adverse determination, you may appeal. By filing an appeal, you preserve your rights under FOIA and give the agency a chance to review and reconsider your request and the agency's decision.

Your appeal must be mailed within 90 days from the date of receipt of this letter, to:

Principal Deputy Administrator
Centers for Medicare and Medicaid Services
Room C5-16-03
7500 Security Blvd.
Baltimore, Maryland 21244-1850

Please clearly mark both the envelope and your letter "Freedom of Information Act Appeal."

If you would like to discuss our response before filing an appeal to attempt to resolve your dispute without going through the appeals process, you may contact Tahleemah Johnson or the CMS FOIA Public Liaison for assistance at:

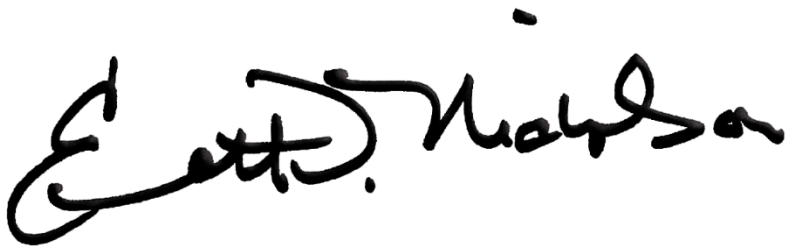
Desiree Gaynor
CMS FOIA Public Liaison
Centers for Medicare & Medicaid Services
7500 Security Blvd., MS C5-11-06
Baltimore, Maryland 21244-1850
Telephone: (410) 786-5353 fax (443)-380-7260

If you are unable to resolve your FOIA dispute through our FOIA Public Liaison, the Office of Government Information Services (OGIS), the Federal FOIA Ombudsman's office, offers mediation services to help resolve disputes between FOIA requesters and Federal agencies. The contact information for OGIS is:

Office of Government Information Services
National Archives and Records Administration
8601 Adelphi Road–OGIS
College Park, MD 20740-6001

Telephone: 202-741-5770
Toll-Free: 1-877-684-6448
E-mail: ogis@nara.gov
Fax: 202-741-5769

Respectfully,



Emmett Nicholson
Director, Division of FOIA Analysis – C
Freedom of Information Group

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop C5-11-06
Baltimore, Maryland 21244-1850

Office of Strategic Operations and Regulatory Affairs/Freedom of Information Group
Refer to: Control Number 060120237056 and PIN TBH7

10/16/2023

David Medeiros
39 Kings Highway, STE C
STE C
Gales Ferry, CT 06335

Dear Mr. Medeiros,

This letter is in response to your Freedom of Information Act (5 U.S.C. §552) request of 6/1/2023, which you sent to the Centers for Medicare & Medicaid Services (CMS). Within your correspondence, you requested records relating to Connecticut Community Care (CCC) and the Connecticut Department of Social Services (DSS), as well as the Community Options Unit (COU), pertaining to ABI Resources LLC.

After a careful search of the Centers for Medicare & Medicaid Services (CMS) files, i.e., a search reasonably calculated to locate records responsive to your request and employing reasonable standards, we were unable to locate any records responsive to your request.

If you believe that the information withheld should not be exempt from disclosure, or this response constitutes an adverse determination, you may appeal. By filing an appeal, you preserve your rights under FOIA and give the agency a chance to review and reconsider your request and the agency's decision.

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Principal Deputy Administrator
Centers for Medicare and Medicaid Services
Room C5-16-03
7500 Security Blvd.
Baltimore, Maryland 21244-1850

Please clearly mark both the envelope and your letter "Freedom of Information Act Appeal."

If you would like to discuss our response before filing an appeal to attempt to resolve your dispute without going through the appeals process, you may contact the CMS FOIA Public Liaison for assistance at:

Joseph Tripline
CMS FOIA Public Liaison
Centers for Medicare & Medicaid Services
7500 Security Blvd., MS C5-11-06
Baltimore, Maryland 21244-1850
Telephone: (410) 786-5353 fax (443)-380-7260

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College Park, MD 20740-6001

Telephone: 202-741-5770
Toll-Free: 1-877-684-6448
E-mail: ogis@nara.gov
Fax: 202-741-5769

Respectfully,

Emmett Nicholson.
Director, Division of FOIA Analysis – C
Freedom of Information Group

To Whom It May Concern:

Pursuant to the Connecticut Freedom of Information Act, I hereby request the following records:

Freedom of Information Officers
Subject: Comprehensive FOIA Request for Connecticut Medicaid Acquired Brain Injury Waiver Program Records

Dear Freedom of Information Officers,

I am writing to formally request access to all records under the Freedom of Information Act (FOIA) (5 U.S.C. § 552) and relevant Connecticut state laws, specifically related to the Connecticut Medicaid Acquired Brain Injury (ABI) Waiver Program. This information is critical to my participation in the oversight and administration of this program.

In accordance with Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. § 794) and the Americans with Disabilities Act (ADA) (42 U.S.C. § 12101 et seq.), I am requesting accommodations due to my condition. I respectfully request that all records be provided electronically via email, as opposed to portals or complex delivery methods, to ensure full and equal access to the information.

Scope of Request:
Legislative Records:

All bills, amendments, resolutions, legislative proposals, and legislative history related to the Connecticut Medicaid ABI Waiver Program.
Voting records of all state and federal legislators on any legislation affecting the Medicaid ABI Waiver Program.
Minutes, transcripts, and audio/video recordings of meetings, hearings, or discussions where the Medicaid ABI Waiver Program was a topic.
Public Records:

Comprehensive reports, studies, assessments, and evaluations on the Connecticut Medicaid ABI Waiver Program.
Budget allocations, financial statements, expenditure reports, and audit results related to the program, pursuant to Connecticut Budget Transparency Laws (C.G.S. § 4-66 and related sections).
All contracts, agreements, memoranda of understanding, and intergovernmental agreements involving the administration or management of the Medicaid ABI Waiver Program.
Correspondence:

All emails, letters, and other forms of communication, including internal and external, regarding the Medicaid ABI Waiver Program.
Internal memoranda, briefing documents, policy directives, and decision-making correspondence related to the oversight and implementation of the program.
Personnel Records:

Non-confidential employment records, including job descriptions, resumes, and performance evaluations, of individuals involved in the administration and oversight of the Medicaid ABI Waiver Program. This request is consistent with the Privacy Act of 1974 (5 U.S.C. § 552a), which protects confidential personal data.
Organizational charts detailing the structure and personnel responsible for managing the Medicaid ABI Waiver Program within relevant state and federal agencies.
Program Information:

All guidelines, protocols, procedural documents, and compliance reviews governing the operation of the Medicaid ABI Waiver Program, as mandated by Centers for Medicare & Medicaid Services (CMS) Regulations (42 CFR § 440.180) for home and community-based services waiver programs.
Implementation plans, performance metrics, outcome reports, and evaluation summaries regarding the

effectiveness of the program.
Comprehensive data sets related to enrollment, utilization, demographic information, and outcomes of beneficiaries participating in the Medicaid ABI Waiver Program.
Special Requests:
Expedited Processing: Pursuant to Executive Order 13392, which mandates the improvement of agency disclosure processes, and the Freedom of Information Act (5 U.S.C. § 552), I request expedited processing of this FOIA request due to the public interest and personal impact of the information.

Electronic Records: In compliance with my rights under Section 504 of the Rehabilitation Act and the ADA, I request that all records be provided in electronic format and sent directly to my email address. This will ensure that I can access the information without unnecessary barriers or delays.

Fee Waiver Request:
I request a waiver of all fees associated with this FOIA request under 5 U.S.C. § 552(a)(4)(A)(iii). This request is made in the public interest and not for commercial use. The disclosure of the requested information will significantly contribute to public understanding of government operations, particularly concerning the Connecticut Medicaid ABI Waiver Program, which impacts a vulnerable population. Additionally, due to my condition, as covered by Section 504 of the Rehabilitation Act, a fee waiver will ensure equitable access to this important information.

Relevant Laws:
This FOIA request, and the accommodations I am requesting, are governed by the following laws and regulations:

Freedom of Information Act (5 U.S.C. § 552) – Governing the right to request access to federal records.
Americans with Disabilities Act (ADA) (42 U.S.C. § 12101 et seq.) – Ensuring equal access for individuals with disabilities, including in communication.
Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. § 794) – Prohibiting discrimination based on disability in programs receiving federal funding.
Privacy Act of 1974 (5 U.S.C. § 552a) – Protecting personal privacy in records maintained by federal agencies.
Medicaid Statute (Title XIX of the Social Security Act) (42 U.S.C. § 1396 et seq.) – Governing Medicaid programs, including waivers like the ABI Waiver.
Connecticut Freedom of Information Act (C.G.S. §§ 1-200 to 1-242) – Governing the right to request access to state records.
Connecticut Budget Transparency Laws (C.G.S. § 4-66) – Requiring public disclosure of state budget allocations and financial reports.
CMS Regulations (42 CFR § 440.180) – Governing the administration of home and community-based services waiver programs, including the ABI Waiver.
Executive Order 13392 ("Improving Agency Disclosure of Information") – Mandating federal agencies to improve FOIA processing.
Non-Waiver of Rights:
This request does not waive any rights I may have under FOIA, the ADA, the Rehabilitation Act, or any other applicable law, and I reserve all rights regarding this matter.

Thank you for your prompt attention to this request and for accommodating my needs.

Sincerely,
David Medeiros
ABI Resources

Departments of Submission:
State of Connecticut Agencies:
Connecticut Department of Social Services (DSS)
Email: foia.dss@ct.gov
Department: Department of Social Services

Connecticut Office of the Attorney General
Email: attorney.general@ct.gov
Department: Office of the Attorney General

Connecticut General Assembly (CGA)
Email: foia@cga.ct.gov
Department: Connecticut General Assembly

Connecticut Office of Policy and Management (OPM)
Email: opm.foia@ct.gov
Department: Office of Policy and Management

Connecticut Department of Public Health (DPH)
Email: dph.foi@ct.gov
Department: Department of Public Health

Federal Agencies:
U.S. Department of Health and Human Services (HHS)
Email: HHS_FOIA@hhs.gov
Department: U.S. Department of Health and Human Services

Centers for Medicare & Medicaid Services (CMS)
Email: FOIA_Request@cms.hhs.gov
Department: Centers for Medicare & Medicaid Services

U.S. Department of Justice (DOJ)
Email: foia.requests@usdoj.gov
Department: U.S. Department of Justice

U.S. Department of Housing and Urban Development (HUD)
Email: foiarequests@hud.gov
Department: U.S. Department of Housing and Urban Development

U.S. Department of Labor (DOL)
Email: foiarequests@dol.gov
Department: U.S. Department of Labor

Federal Trade Commission (FTC)
Email: FOIA@ftc.gov
Department: Federal Trade Commission

I also request that, if possible and pursuant to Conn. Gen. Stat. § 1-212(d), fees be waived as I believe this request is in the public interest and not made for commercial gain. The requested documents will be made available to the public at MuckRock.com.

In the event that there are fees, I would be grateful if you would inform me of the total charges in advance of fulfilling my request. I would prefer the request filled electronically, by e-mail attachment if available or CD-ROM if not.

Thank you in advance for your anticipated cooperation in this matter. I look forward to receiving your response to this request within 4 business days, as the statute requires.

Sincerely,

DAVID MEDEIROS

To Whom It May Concern:

Pursuant to the Connecticut Freedom of Information Act, I hereby request the following records:

State and Federal FOIA Request for Medicaid Acquired Brain Injury (ABI) Waiver Program Provider Registry

State FOIA Request
To:
FOIA Officer and Supervisory Officers
Connecticut Department of Social Services
55 Farmington Avenue
Hartford, CT 06105

Federal FOIA Request
To:
FOIA Officer and Supervisory Officers
Centers for Medicare & Medicaid Services (CMS)
Freedom of Information Act Office
Mail Stop N2-20-16
7500 Security Boulevard
Baltimore, Maryland 21244

Re: Freedom of Information Act Request for Medicaid Acquired Brain Injury (ABI) Waiver Program Provider Registry and Related Documents
Dear FOIA Officer and Supervisory Officers,

Pursuant to the Freedom of Information Act (5 U.S.C. § 552) and Connecticut's FOIA statutes (Conn. Gen. Stat. § 1-200 et seq.), I am writing to request the following records related to the Medicaid Acquired Brain Injury (ABI) Waiver Program:

Requested Records:
Complete and current provider registry, including:
- Provider names
- Contact details (physical addresses, email addresses)
- Areas of specialty and services offered
- Provider enrollment dates and current status

Documents governing provider inclusion, such as:
Policies, regulations, or statutes detailing the criteria for selecting, monitoring, and removing providers from the ABI Waiver Program registry
Records of complaints, violations, or disciplinary actions, including:

Any and all records related to complaints, violations, or actions taken against providers in connection with their participation in the ABI Waiver Program
Correspondence or documentation regarding registry maintenance, including:

Documentation outlining the process and frequency of updating the registry, who is responsible for maintaining the records, and how updates are communicated to the public

Agencies to Provide Information or Enforce Compliance:
In recognition of the public's right to transparency in the administration of Medicaid and public health programs, this request emphasizes that multiple state and federal agencies may provide the requested information or compel compliance:

Connecticut Freedom of Information Commission (FOIC)
Enforces compliance with state FOIA laws.

Contact: 18-20 Trinity Street, Hartford, CT 06106
Phone: (860) 566-5682

U.S. Department of Health and Human Services (HHS) Office for Civil Rights (OCR)
Ensures proper management of Medicaid programs and enforces civil rights laws.
Contact: 200 Independence Avenue, S.W., Washington, D.C. 20201
Phone: (800) 368-1019

Centers for Medicare & Medicaid Services (CMS)
Oversees state Medicaid programs and can compel state agencies to provide records.
Contact: FOIA_Request@cms.hhs.gov | Phone: (410) 786-5353

HHS Office of Inspector General (OIG)
Investigates fraud or abuse in Medicaid programs.
Contact: Wilbur J. Cohen Building, 330 Independence Ave., SW, Washington, D.C. 20201
Phone: (800) 447-8477

Medicaid Fraud Control Unit (MFCU) – Connecticut Attorney General's Office
Investigates Medicaid fraud or improper management.
Phone: (860) 808-5318

U.S. Department of Justice (DOJ) – Civil Rights Division
Enforces ADA and other civil rights laws related to Medicaid services.
Phone: (202) 514-4609

Connecticut State Auditors of Public Accounts
Conducts audits of state agencies, including CT DSS.
Phone: (860) 240-8651

Legal Basis for Request:
This request is made under 5 U.S.C. § 552 (FOIA) and Connecticut's FOIA laws (Conn. Gen. Stat. § 1-200 et seq.). These statutes obligate public agencies to provide records necessary for the public's oversight of government operations, particularly those involving public health and Medicaid services.
5 U.S.C. § 552: The Freedom of Information Act statute, which outlines the right to access federal agency records, the process for making requests, and the exceptions to disclosure

Request for Expedited Processing:
Given the critical need for transparency in the Medicaid ABI Waiver Program, I request expedited processing under 5 U.S.C. § 552(a)(6)(E). Delays in providing this information may hinder public oversight and efforts to ensure proper care for individuals with acquired brain injuries.

Request for Accommodation and Fee Waiver:
As an individual living with a brain injury and a stroke survivor, I request reasonable accommodations under the Americans with Disabilities Act (42 U.S.C. § 12101 et seq.). Please provide all requested records directly via email to AabiWR@live.com. Do not use any portals or third-party websites that pose barriers to accessing this information. I request the reasonable accommodation to know the complete names and titles of FOIA representatives communicating with me.

Additionally, I request a waiver of all fees associated with this request, as it is made in the public interest to ensure transparency and accountability in the Medicaid ABI Waiver Program, and not for commercial purposes.

Response Time:
Under federal FOIA and Connecticut public records laws, agencies are required to respond to this request within specified timeframes. Contact me exclusively via email at AabiWR@live.com.

Conclusion:

I look forward to your prompt and complete response. If you require any further information, please contact me via email at AabiWR@live.com. Thank you for your attention to this important matter.

Sincerely,
David Medeiros
Founder & Owner, ABI Resources
39 Kings HWY STE C
Gales Ferry, Connecticut, 06335
AabiWR@live.com

Key Legal Citations:
5 U.S.C. § 552 (FOIA) – Federal statute governing public access to government records.
Conn. Gen. Stat. § 1-200 et seq. – Connecticut's Freedom of Information laws.
Americans with Disabilities Act (42 U.S.C. § 12101 et seq.) – Ensures reasonable accommodations for individuals with disabilities.

I also request that, if possible and pursuant to Conn. Gen. Stat. § 1-212(d), fees be waived as I believe this request is in the public interest and not made for commercial gain. The requested documents will be made available to the public at MuckRock.com.

In the event that there are fees, I would be grateful if you would inform me of the total charges in advance of fulfilling my request. I would prefer the request filled electronically, by e-mail attachment if available or CD-ROM if not.

Thank you in advance for your anticipated cooperation in this matter. I look forward to receiving your response to this request within 4 business days, as the statute requires.

Sincerely,

DAVID MEDEIROS

To Whom It May Concern:

Pursuant to the Connecticut Freedom of Information Act, I hereby request the following records:

State and Federal FOIA Request for Medicaid Acquired Brain Injury (ABI) Waiver Program Provider Registry | Connecticut

State FOIA Request
To:
FOIA Officer and Supervisory Officers
Connecticut Department of Social Services
55 Farmington Avenue
Hartford, CT 06105

Federal FOIA Request
To:
FOIA Officer and Supervisory Officers
Centers for Medicare & Medicaid Services (CMS)
Freedom of Information Act Office
Mail Stop N2-20-16
7500 Security Boulevard
Baltimore, Maryland 21244

Re: Freedom of Information Act Request for Medicaid Acquired Brain Injury (ABI) Waiver Program Provider Registry and Related Documents
Dear FOIA Officer and Supervisory Officers,

Pursuant to the Freedom of Information Act (5 U.S.C. § 552) and Connecticut's FOIA statutes (Conn. Gen. Stat. § 1-200 et seq.), I am writing to request the following records related to the Medicaid Acquired Brain Injury (ABI) Waiver Program:

Requested Records:
Complete and current provider registry, including:

- Provider names
- Contact details (physical addresses, email addresses)
- Areas of specialty and services offered
- Provider enrollment dates and current status
- Documents governing provider inclusion, such as:

Policies, regulations, or statutes detailing the criteria for selecting, monitoring, and removing providers from the ABI Waiver Program registry
Records of complaints, violations, or disciplinary actions, including:

Any and all records related to complaints, violations, or actions taken against providers in connection with their participation in the ABI Waiver Program
Correspondence or documentation regarding registry maintenance, including:

Documentation outlining the process and frequency of updating the registry, who is responsible for maintaining the records, and how updates are communicated to the public

Agencies to Provide Information or Enforce Compliance:
In recognition of the public's right to transparency in the administration of Medicaid and public health programs, this request emphasizes that multiple state and federal agencies may provide the requested information or compel compliance:

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Contact: 18-20 Trinity Street, Hartford, CT 06106
Phone: (860) 566-5682

U.S. Department of Health and Human Services (HHS) Office for Civil Rights (OCR)
Ensures proper management of Medicaid programs and enforces civil rights laws.
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Investigates fraud or abuse in Medicaid programs.
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Phone: (800) 447-8477

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U.S. Department of Justice (DOJ) – Civil Rights Division
Enforces ADA and other civil rights laws related to Medicaid services.
Phone: (202) 514-4609

Connecticut State Auditors of Public Accounts
Conducts audits of state agencies, including CT DSS.
Phone: (860) 240-8651

Legal Basis for Request:
This request is made under 5 U.S.C. § 552 (FOIA) and Connecticut's FOIA laws (Conn. Gen. Stat. § 1-200 et seq.). These statutes obligate public agencies to provide records necessary for the public's oversight of government operations, particularly those involving public health and Medicaid services.

Request for Expedited Processing:
Given the critical need for transparency in the Medicaid ABI Waiver Program, I request expedited processing under 5 U.S.C. § 552(a)(6)(E). Delays in providing this information may hinder public oversight and efforts to ensure proper care for individuals with acquired brain injuries.

Request for Accommodation and Fee Waiver:
As an individual living with a brain injury and a stroke survivor, I request reasonable accommodations under the Americans with Disabilities Act (42 U.S.C. § 12101 et seq.). Please provide all requested records directly via email to AabiWR@live.com. Do not use any portals or third-party websites that pose barriers to accessing this information.

Additionally, I request a waiver of all fees associated with this request, as it is made in the public interest to ensure transparency and accountability in the Medicaid ABI Waiver Program, and not for commercial purposes.

Response Time:
Under federal FOIA and Connecticut public records laws, agencies are required to respond to this request within specified timeframes. Please notify me promptly if any part of this request requires clarification or additional time to process. Contact me exclusively via email at AabiWR@live.com.

Conclusion:

I look forward to your prompt and complete response.Thank you for your attention to this important matter.

Sincerely,
David Medeiros
Founder & Owner, ABI Resources
39 Kings HWY STE C
Gales Ferry, Connecticut, 06335
AabiWR@live.com

Key Legal Citations:
5 U.S.C. § 552 (FOIA) – Federal statute governing public access to government records.
Conn. Gen. Stat. § 1-200 et seq. – Connecticut's Freedom of Information laws.
Americans with Disabilities Act (42 U.S.C. § 12101 et seq.) – Ensures reasonable accommodations for individuals with disabilities.th Disabilities Act (42 U.S.C. § 12101 et seq.) – Provides for reasonable accommodations for individuals with disabilities.

I also request that, if possible and pursuant to Conn. Gen. Stat. § 1-212(d), fees be waived as I believe this request is in the public interest and not made for commercial gain. The requested documents will be made available to the public at MuckRock.com.

In the event that there are fees, I would be grateful if you would inform me of the total charges in advance of fulfilling my request. I would prefer the request filled electronically, by e-mail attachment if available or CD-ROM if not.

Thank you in advance for your anticipated cooperation in this matter. I look forward to receiving your response to this request within 4 business days, as the statute requires.

Sincerely,

DAVID MEDEIROS

To Whom It May Concern:

Pursuant to the Connecticut Freedom of Information Act, I hereby request the following records:

Subject: FOIA Request for Comprehensive Records Regarding Connecticut Medicaid Programs, ABI Waiver Amendments, and Federal Agency Oversight and Communications with Accenture and Manatt (2012–Present)

To:

Connecticut Agencies:

Department of Social Services (DSS)
Office of Policy and Management (OPM)
Office of the Attorney General
Office of Health Strategy (OHS)
State Comptroller's Office
Auditors of Public Accounts (APA)

Federal Agencies:

Centers for Medicare & Medicaid Services (CMS)
U.S. Department of Health and Human Services (HHS)
Office of Inspector General, U.S. Department of Health and Human Services (OIG, HHS)
U.S. Government Accountability Office (GAO)
Centers for Disease Control and Prevention (CDC)
Department of Justice (DOJ) – Civil Rights Division
Date: 10.29.2024

From:
David Medeiros
ABI Resources
Email: AabiWR@live.com

Request for Records Under the Freedom of Information Act (FOIA)
Dear FOIA Officers and Supervisory Officers,

Pursuant to the Connecticut Freedom of Information Act (Conn. Gen. Stat. § 1-200 et seq.) and the federal Freedom of Information Act (5 U.S.C. § 552), I respectfully request access to all records from January 1, 2012, to the present related to communications, funding, agreements, policy analysis, and compliance oversight involving Connecticut's Medicaid programs, particularly focusing on the Acquired Brain Injury (ABI) Waiver Program. This request pertains to records involving the following entities:

Connecticut Department of Social Services (DSS)
Accenture and Manatt, Phelps & Phillips, LLP (Manatt), in their roles as consultants to DSS

Federal agencies involved in Medicaid program oversight, including CMS, HHS, OIG, GAO, CDC, and DOJ's Civil Rights Division
This request supports transparency, accountability, and oversight of Medicaid programs affecting vulnerable populations, particularly those involved in the ABI Waiver Program, managed care models, and accessibility initiatives.

Scope and Objectives of the Request
The objective of this request is to capture comprehensive records to allow for independent review, transparency, and the protection of vulnerable Medicaid populations in the following areas:

Medicaid Program Amendments and Policy Modifications
Records of amendments to the ABI Waiver Program and other Medicaid waivers managed by Connecticut DSS in consultation with Accenture and Manatt, as reviewed by federal agencies (CMS, HHS).

Medicaid Landscape Analysis and Managed Care Exploration
Documentation of data analysis, policy exploration, and evaluations related to managed care models, digital health, and accessibility for Medicaid recipients, conducted by Accenture and Manatt with DSS and reviewed by CMS or other federal entities.

Data Collection and Stakeholder Engagement
Information regarding data collection methodologies targeting Medicaid members, providers, and stakeholders, including strategies to ensure accessibility, equity, and compliance with federal and state protections.

Federal Oversight, Accountability, and Compliance
Documentation from federal agencies related to funding compliance, regulatory oversight, or audits, evaluations, or investigations assessing DSS's Medicaid program management, especially regarding the ABI Waiver and the involvement of Accenture and Manatt.

Detailed Records Requested
Please provide copies of the following documents:

Contracts, Agreements, and Operational Frameworks
Connecticut DSS: Contracts, MOUs, agreements, and scope of work documents between DSS and Accenture or Manatt.
Federal Agencies (CMS, HHS, GAO, OIG): Federal approvals, reviews, or conditions placed on Connecticut's Medicaid amendments or funding, particularly involving the ABI Waiver and managed care services.

Communications and Procedural Directives
Connecticut DSS: Email and written communications between DSS officials and representatives of Accenture and Manatt, specifically concerning Medicaid program amendments, stakeholder engagement, and managed care exploration.
Federal Agencies: Correspondence with DSS or contractors, as well as procedural directives involving Accenture or Manatt's contributions to Medicaid policy or program operations.
Metadata and Communication Logs: Metadata (sender, recipient, date, subject) and communication logs documenting DSS, CMS, HHS, or GAO interactions with Accenture or Manatt.

Meetings and Strategy Documentation
Connecticut DSS: Agendas, minutes, attendance records, and presentations from strategic planning sessions involving DSS, Accenture, and Manatt.
Federal Agencies: Records from any forums, workshops, or review meetings with DSS regarding Connecticut's Medicaid amendments, ABI Waiver program updates, or evaluations of managed care models.

Analysis, Recommendations, and Raw Data

Connecticut DSS and Federal Agencies (CMS, GAO): All data, draft versions, and final recommendations produced by Accenture and Manatt, including raw data, methodology documentation, and preliminary findings related to Medicaid program evaluations.
CDC Data on ABI/TBI: Any ABI or TBI-related data provided to DSS, Accenture, or Manatt, which may impact Medicaid ABI Waiver amendments.

Medicaid Provider and Consumer Access and Contact Records
Connecticut DSS: Documentation on Medicaid provider registry updates, provider affiliations, approval dates, and criteria used to select providers for feedback or analysis.
Federal Oversight: GAO or OIG records on Medicaid provider networks and consumer engagement requirements, particularly in relation to accessibility for individuals with disabilities.

Accessibility and Data Collection Accommodations
Connecticut DSS and Federal Agencies: Documentation of accommodations ensuring accessibility for individuals with disabilities, including language assistance, assistive technology, and accommodations in data collection and stakeholder engagement processes.
FOIA Compliance and Whistleblower Reports

Connecticut DSS and Federal Oversight (OIG, DOJ Civil Rights): Records related to previous FOIA requests, exemptions, information withheld, and any legal citations applied, as well as whistleblower complaints or investigations into DSS, Accenture, or Manatt regarding Medicaid program oversight, ethical conduct, or data manipulation.

Expedited processing is requested based on the following compelling factors:

Significant Public Interest in Government Transparency: Medicaid programs are taxpayer-funded and affect a large segment of the public. Ensuring that DSS's activities and collaborations with consulting firms like Accenture and Manatt align with federal and state standards is of great public interest. Expedited processing will allow public scrutiny and foster informed dialogue on the management and ethical administration of Medicaid services. The requested information will help assess whether any waste, fraud, or abuse has occurred within DSS's partnerships. Prompt access to these records is essential to identify any potential misconduct and prevent ongoing misuse of taxpayer dollars, particularly within critical programs affecting vulnerable populations.

Time-Sensitive Advocacy Needs: This information is critical for advocacy efforts that inform stakeholders, ensure consumer protection, and foster transparency. Any delay could impede the ability of stakeholders, including advocacy groups and affected individuals, to respond adequately to Medicaid policy changes.

Justification for Fee Waiver
This information will serve the public interest by supporting oversight, transparency, and protection for Medicaid recipients, particularly Connecticut's ABI Waiver participants. The release of these records will contribute to the ethical and accountable administration of taxpayer-funded programs. Accordingly, I request a waiver of fees for processing this request.

Delivery and Accessibility Requirements
To accommodate disability-related needs, please provide all records in digital format via email and avoid using external portals. If records cannot be provided within statutory timeframes, or if any information is withheld, please notify me promptly with legal justifications at AabiWR@live.com

Thank you for your attention and assistance in providing these records to facilitate public understanding and oversight of Connecticut Medicaid services.

Sincerely,
David Medeiros
ABI Resources

I also request that, if possible and pursuant to Conn. Gen. Stat. § 1-212(d), fees be waived as I believe this request is in the public interest and not made for commercial gain. The requested documents will be made available to the public at MuckRock.com.

In the event that there are fees, I would be grateful if you would inform me of the total charges in advance of fulfilling my request. I would prefer the request filled electronically, by e-mail attachment if available or CD-ROM if not.

Thank you in advance for your anticipated cooperation in this matter. I look forward to receiving your response to this request within 4 business days, as the statute requires.

Sincerely,

DAVID MEDEIROS

To Whom It May Concern:

Pursuant to the Connecticut Freedom of Information Act, I hereby request the following records:

Subject: FOIA Request for Records Pertaining to Medicaid Services for NPI 1962278119 and NPI 1023012345

To Whom It May Concern,

Pursuant to the Freedom of Information Act (5 U.S.C. § 552) and the Connecticut Freedom of Information Act (Conn. Gen. Stat. § 1-200 et seq.), I am requesting access to records related to Medicaid services, contracts, financial transactions, referral practices, and regulatory compliance associated with the following National Provider Identifiers (NPIs):

NPI 1962278119
NPI 1023012345
This FOIA request is designed to support transparency, accountability, and public interest within Connecticut's Medicaid ABI Waiver Program. Below are the specific records requested from each department, including their individual responsibilities and contact information to facilitate processing.

Requested Records by Agency
Federal Agencies

U.S. Department of Health and Human Services (HHS)
Sub-agency: Centers for Medicare & Medicaid Services (CMS)
Responsibilities: Oversees Medicaid program compliance, funding allocation, and adherence to federal standards.
Records to Request:
1. Funding Allocation and Compliance Reports: All records showing Medicaid funding allocations, reimbursements, and compliance reviews or audits for services under NPI 1962278119 and NPI 1023012345, from January 1, 2013, to present.
2. CMS-DSS Correspondence: Communications between CMS and the Connecticut Department of Social Services (DSS) regarding services associated with the specified NPIs, including any directives or advisories on provider selection, compliance, and transparency.
Contact Information:
FOIA Officer, Centers for Medicare & Medicaid Services
Address: 7500 Security Boulevard, Mail Stop C2-21-15, Baltimore, MD 21244
Email: FOIA_Request@cms.hhs.gov
Phone: (410) 786-5353

U.S. Department of Justice (DOJ)
Sub-agency: Civil Division, Fraud Section
Responsibilities: Investigates healthcare fraud, Medicaid fraud, and enforces anti-kickback statutes.
Records to Request:
1. Investigations and Case Files: Records of any DOJ investigations or case files concerning Medicaid fraud or potential kickbacks involving NPI 1962278119 and NPI 1023012345.
2. Legal Proceedings or Settlements: Documentation of any legal actions, settlements, or penalties issued in cases related to these NPIs.
Contact Information:
FOIA/PA Mail Referral Unit
Address: Department of Justice, Room 115, LOC Building, Washington, DC 20530-0001
Email: MRUFOIA.Requests@usdoj.gov
Phone: (202) 616-0307

U.S. Department of Labor (DOL)
Sub-agency: Wage and Hour Division
Responsibilities: Enforces labor laws, including wage standards, particularly for disabled individuals working

under Medicaid.
Records to Request:
1. Wage and Hour Investigations: Documentation of wage and hour compliance audits, investigations, or complaints involving NPI 1962278119, focusing on any employment of Medicaid consumers at sub-minimum wages.
2. 14(c) Certification Records: Records of any 14(c) certificates issued to entities associated with NPI 1962278119, authorizing sub-minimum wage payments to disabled workers.
Contact Information:
FOIA Coordinator, Wage and Hour Division
Address: 200 Constitution Ave NW, Washington, DC 20210
Email: foiarequests@dol.gov
Phone: (202) 693-0052

Connecticut State Agencies

Connecticut Department of Social Services (DSS)
Responsibilities: Administers Connecticut's Medicaid program, including provider enrollment, consumer rights, and compliance with state and federal standards.
Records to Request:
1. Contracts and Agreements: All contracts, MOUs, and agreements involving Medicaid funds directed to services under NPI 1962278119 and NPI 1023012345. Include documents that outline any exclusivity arrangements, referral restrictions, or financial incentives.
2. Provider Selection and Referral Policies: Internal guidelines, rules, and criteria for provider referrals associated with these NPIs, including distribution data and referral logs showing consumer choice limitations.
3. FOIA Compliance and Transparency Logs: Copies of FOIA requests related to these NPIs, including responses, reasons for any denials, and policies on FOIA compliance.
Contact Information:
FOIA Officer, Department of Social Services
Address: 55 Farmington Avenue, Hartford, CT 06105
Email: DSS.FOIA@ct.gov
Phone: (860) 424-4967

Connecticut Department of Public Health (DPH)
Responsibilities: Regulates and licenses healthcare providers, enforcing standards for Medicaid providers and addressing consumer complaints.
Records to Request:
1. Licensing and Inspection Reports: Records of licensing applications, inspection reports, and compliance reviews for entities associated with NPI 1962278119 and NPI 1023012345.
2. Complaint and Investigation Records: Documentation of any consumer complaints, investigations, or violations recorded against these NPIs, especially regarding quality of care, housing conditions, or employment practices.
Contact Information:
FOIA Coordinator, Department of Public Health
Address: 410 Capitol Avenue, Hartford, CT 06134
Email: DPH.FOIA@ct.gov
Phone: (860) 509-8000

Connecticut Office of the Attorney General
Responsibilities: Investigates healthcare fraud, consumer protection issues, and enforces state laws against anti-competitive practices.
Records to Request:
1. Investigative Records and Legal Actions: Records of any investigations, inquiries, or legal actions related to Medicaid fraud, consumer rights violations, or monopolistic practices associated with NPI 1962278119 and NPI 1023012345.
2. Correspondence with DSS: Communications between the Attorney General’s office and DSS concerning referrals, provider restrictions, or consumer complaints associated with these NPIs.
Contact Information:

Public Records Administrator, Office of the Attorney General
Address: 165 Capitol Avenue, Hartford, CT 06106
Email: attorney.general@ct.gov
Phone: (860) 808-5318

Accommodation Requests
To ensure this FOIA request is processed accurately and meets my accessibility requirements, please adhere to the following accommodations. These accommodations are essential for my full participation in every aspect of this request:

Contact Requirement

1. All responses, updates, and communications must be sent exclusively via email to AabiWR@live.com. Do not use physical mail, phone calls, portal-based communications, external links, or any platform outside of direct email.

2. Format Requirement: Include the full text of each response within the body of the email, along with any attached documents. This ensures that all information is immediately accessible without requiring downloads or access to external sites, allowing me to fully participate and understand the content.

3. Complete and Transparent Documentation
Provide all requested documents in full, without redactions unless legally required. For any necessary redactions, please cite the specific legal exemption or statute applied, and include a summary to facilitate understanding. This ensures that I have clear and complete access to all information.

4. Detailed Explanations for Any Denials
If any portion of this request is denied, include a clear, detailed explanation for each denied item, citing relevant legal statutes or exemptions. This clarity is essential to ensure I understand any limitations.

5. Guidance for Complex Records
For records containing complex financial, legal, or medical language, please include summaries or simplified explanations. This accommodation ensures that I can accurately interpret and fully understand the information provided.

6. Identification of FOIA Officer Handling This Request
Provide the full name, title, and direct contact information of the FOIA officer assigned to my request. While communication must remain email-only, I request this information for records and transparency.

7. Confirmation of Accommodations
Confirm receipt of this request, and explicitly acknowledge that each accommodation listed will be fully applied in all responses and communications.

Request for Expedited Processing of FOIA Request for Records Pertaining to Medicaid Services for NPI 1962278119 and NPI 1023012345
Pursuant to Federal Law and Connecticut FOIA Statutes, I am requesting expedited processing of this FOIA request due to the pressing public interest involved and the immediate impact on vulnerable Medicaid beneficiaries, as authorized under applicable legal provisions.

Request for Expedited Processing
Legal Basis: Under 5 U.S.C. § 552(a)(6)(E), expedited processing is required when there is an "urgency to inform the public concerning actual or alleged Federal Government activity." Additionally, Conn. Gen. Stat. § 1-210(a) mandates prompt availability of public agency records, especially where issues directly impact public welfare and accountability.

Justification for Expedited Processing
Public Interest and Transparency: These records are crucial for public scrutiny of Medicaid spending,

potential monopolistic practices, consumer choice limitations, and wage compliance within Connecticut's Medicaid ABI Waiver Program.

Immediate Impact on Vulnerable Populations: This request addresses policies that may limit autonomy, financial independence, and housing security for Medicaid beneficiaries, especially those with disabilities. Delays could harm these populations by preventing timely corrective action.

Compliance with FOIA Promptness Standards: Federal and Connecticut FOIA statutes require agencies to make records available "promptly." Any refusal to expedite processing would contravene both the letter and intent of FOIA law.

Potential Financial and Legal Violations: Requested records may reveal misuse of Medicaid funds or improper labor practices. Immediate access is necessary for regulatory assessment.

Request for Immediate Acknowledgment: Please provide immediate, written acknowledgment of this expedited processing request. If expedited processing is denied, provide a written statement detailing the specific legal grounds for denial, in compliance with FOIA statutes.

Thank you for your prompt attention to this matter.

Sincerely,
David Medeiros
ABI Resources
215 Mountain Street
Willimantic, CT 06226
Email: AabiWR@live.com

I also request that, if possible and pursuant to Conn. Gen. Stat. § 1-212(d), fees be waived as I believe this request is in the public interest and not made for commercial gain. The requested documents will be made available to the public at MuckRock.com.

In the event that there are fees, I would be grateful if you would inform me of the total charges in advance of fulfilling my request. I would prefer the request filled electronically, by e-mail attachment if available or CD-ROM if not.

Thank you in advance for your anticipated cooperation in this matter. I look forward to receiving your response to this request within 4 business days, as the statute requires.

Sincerely,

DAVID MEDEIROS

To Whom It May Concern:

Pursuant to the Connecticut Freedom of Information Act, I hereby request the following records:

To: FOIA Officer, Connecticut Department of Social Services (DSS)
CC: FOIA Officer, Centers for Medicare & Medicaid Services (CMS)
Subject: FOIA Request for NPI Numbers and Provider Information under Connecticut Medicaid ABI Waiver Program
Dear FOIA Officers,
Pursuant to the Connecticut Freedom of Information Act (C.G.S. §§ 1-200 to 1-242) and the Federal Freedom of Information Act (5 U.S.C. § 552), I am requesting access to records containing the National Provider Identifier (NPI) numbers and provider information for all entities approved to deliver services under Connecticut's Medicaid Acquired Brain Injury (ABI) Waiver Program. This request is submitted to both the Connecticut Department of Social Services (DSS) and the Centers for Medicare & Medicaid Services (CMS) to ensure a full and accurate compilation of records related to the Medicaid ABI Waiver providers.
Scope of Request
1. Provider Information for Medicaid ABI Waiver Program:
o A complete list of NPI numbers, along with corresponding provider names and addresses, for all entities authorized under Connecticut's Medicaid ABI Waiver Program. This includes all providers in the Medicaid Acquired Brain Injury Approved Provider Registry managed by DSS and recognized by CMS.
2. Provider Registry Documentation:
o Any official registries, directories, or databases maintained by CMS or DSS that list the approved ABI Waiver providers and their associated NPI numbers.

Purpose and Public Interest Justification
The requested information is essential to support transparency, public accountability, and accessibility in Medicaid-funded services. Access to these records will enable stakeholders and beneficiaries to verify approved providers, ensuring that taxpayer-funded services are administered equitably and with oversight. This request serves the public interest by facilitating oversight of Medicaid resources and supporting beneficiaries in making informed provider choices.

Legal Basis for Request
This request is supported by state and federal laws governing public access to records and ensuring Medicaid program transparency:
- Connecticut Freedom of Information Act (C.G.S. §§ 1-200 to 1-242): Provides public access to state-held records, including Medicaid-related data.
- Connecticut Public Records Law (Conn. Gen. Stat. § 1-210): Requires prompt access to public agency records, ensuring transparency for taxpayer-funded programs.
- Freedom of Information Act (5 U.S.C. § 552): Governs access to federal records, ensuring transparency and accountability for CMS-administered programs.
- Social Security Act – Title XIX (Medicaid) (42 U.S.C. § 1396 et seq.): Mandates federal and state oversight of Medicaid-funded programs.
- Connecticut Non-Discrimination Law (Conn. Gen. Stat. § 46a-58(a)), Americans with Disabilities Act (ADA) (42 U.S.C. § 12101 et seq.), and Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. § 794): Require that individuals with disabilities receive accommodations for full access to information, ensuring compliance in FOIA processes.

Disability and Accessibility Accommodations
In accordance with ADA and Section 504 requirements, please apply the following accommodations to ensure my full access to these records:
1. Email-Only Communication:
o All responses, updates, and records should be sent exclusively via email to AabiWR@live.com. No physical mail, phone calls, portal-based communications, external links, or alternative platforms are permitted.
2. Electronic and Accessible Format:
o Provide all documents in accessible electronic formats (e.g., PDFs compatible with screen readers).

3. Complete Documentation:
o Provide all records without redactions unless legally required. For any necessary redactions, cite the specific legal exemption applied and include a summary.
4. Detailed Explanations for Any Denials:
o If any portion of this request is denied, provide a clear and detailed explanation for each denied item, citing relevant statutes or exemptions.
5. Guidance for Complex Records:
o For records containing complex financial, legal, or procedural language, please include summaries or simplified explanations to ensure comprehension.
6. Identification of FOIA Officer Handling This Request:
o Provide the full name, title, and direct contact information of the FOIA officer assigned to my request. This information is necessary for transparency and documentation.
7. Confirmation of Accommodations:
o Confirm receipt of this request and explicitly acknowledge that each accommodation listed will be fully applied in all responses and communications.

Request for Expedited Processing
Due to the pressing public interest in transparency and accountability in Medicaid-funded services for vulnerable populations, I request expedited processing under Conn. Gen. Stat. § 1-210(a), which mandates prompt availability of public records, and 5 U.S.C. § 552(a)(6)(E), which allows expedited FOIA processing when there is an urgent need to inform the public.
Fee Waiver Request
I request a waiver of all associated fees under Conn. Gen. Stat. § 1-212(d) and 5 U.S.C. § 552(a)(4)(A)(iii), as this request is in the public interest and not for commercial use. The disclosure of the requested information will contribute significantly to the public's understanding of Medicaid operations and beneficiary access to services under the ABI Waiver Program.
Timeline Expectation
Please confirm receipt of this request within four business days as required by Connecticut FOIA laws. Additionally, I request an estimated timeline for fulfillment.
Thank you for your attention to this matter and for upholding transparency and accountability in Connecticut's Medicaid system.
Sincerely,
David Medeiros
ABI Resources
Email: AabiWR@live.com

I also request that, if possible and pursuant to Conn. Gen. Stat. § 1-212(d), fees be waived as I believe this request is in the public interest and not made for commercial gain. The requested documents will be made available to the public at MuckRock.com.

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Thank you in advance for your anticipated cooperation in this matter. I look forward to receiving your response to this request within 4 business days, as the statute requires.

Sincerely,

DAVID MEDEIROS

Your request for information has been received.

The Department will respond in accordance with the requirements of the CT FOIA.

If there are any costs associated with complying with your request, an estimate will be provided to you before the records are compiled and provided to you.

Thank you,
Kelly

[cid:image001.png@01DB216B.DF6495D0]
KELLY BARTOMIOLI
Paralegal Specialist
Communications & Legislative Management
Privacy Officer & FOIA Officer
Department of Social Services<https://portal.ct.gov/dsshome?language=en_US>
Phone: 860-984-0215
Kelly.Bartomioli@ct.gov<mailto:Kelly.Bartomioli@ct.gov>
PrivacyOfficer.DSS@ct.gov<mailto:PrivacyOfficer.DSS@ct.gov>
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FOIA.DSS@ct.gov<mailto:FOIA.DSS@ct.gov>

Good morning,
Your request for information has been received.

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FOIA.DSS@ct.gov<mailto:FOIA.DSS@ct.gov>

October 21, 2019: ABI Resources addresses inaccuracies in a DSS letter and discusses interactions with a client's father and care manager.

December 6, 2021: ABI Resources submits a Medicaid Programs FOIA request to the Connecticut Department of Social Services for data from 2018-2021 for various services under the ABI Waiver and MFP programs.

October 18, 2021: ABI Resources files a complaint to the Department of Social Services regarding a concern dated October 18, 2021.

July 25, 2022: Connecticut Community Care manager Doreen Andrews directs the immediate removal of ABI Resources for a Willington Consumer of the Medicaid ABI Waiver Program.

August 1, 2022: ABI Resources sends a formal inquiry and request for internal investigation to Connecticut Community Care Inc.

November 7, 2022: ABI Resources submits a FOIA request to Connecticut DSS regarding potentially discriminatory practices and concerns in the ABI Waiver program.

November 14, 2022: ABI Resources requests Connecticut's CHRO official complaint form for filing discrimination complaints against state agencies.

November 29, 2022: ABI Resources reports healthcare fraud to the HHS Office of Inspector General concerning Medicaid programs including the ABI Waiver I and II and MFP Program.

March 17, 2023: ABI Resources sends an email to Julia Evans Starr, President of Connecticut Community Care, expressing concern over a series of unanswered inquiries and concerns raised with Connecticut Community Care.

This timeline provides a complete picture of the sequence of formal communications, requests, and complaints made by ABI Resources, highlighting their ongoing efforts to address and resolve concerns related to the ABI Waiver Program and their interactions with Connecticut Community Care and the Department of Social Services.

October 21, 2019: ABI Resources addressed inaccuracies in a DSS letter and discussed interactions with a client's father and care manager.

October 6, 2021: ABI Resources communicated concerns to Kathleen Hazelton regarding provider poaching/talent raiding and requested a team meeting.

September 1, 2021: ABI Resources inquired about the SANDATA scheduling/billing system for a client and expressed readiness to start services.

October 15, 2021: ABI Resources communicated to Kathleen Hazelton concerning misunderstandings about service provision and addressed poaching concerns.

October 18, 2021: ABI Resources emailed Kathleen Hazelton expressing concerns about inaccuracies and seeking clarification.

October 25, 2021: ABI Resources followed up with Jennifer Cavallaro at DSS for a status update on an ABI Waiver Program Consumer Service Concern.

October 29, 2021: ABI Resources reiterated their request for a status update to Jennifer Cavallaro at DSS.

November 9, 2021: ABI Resources again requested a status update from Jennifer Cavallaro regarding the ABI Waiver Program Consumer Service Concern.

July 25, 2022: Connecticut Community Care manager Doreen Andrews directed the immediate removal of ABI Resources for a Willington Consumer of the Medicaid ABI Waiver Program.

August 1, 2022: ABI Resources sent a formal inquiry and request for internal investigation to Connecticut Community Care Inc.

November 7, 2022: ABI Resources submitted a FOIA request to Connecticut DSS regarding Medicaid programs.

November 14, 2022: ABI Resources requested the official discrimination complaint form from Connecticut's CHRO for complaints against state agencies.

November 29, 2022: ABI Resources reported Connecticut Medicaid fraud.

July 25, 2022: ABI Resources received a directive from Connecticut Community Care manager Doreen Andrews for the immediate removal of ABI Resources from a Willington consumer of the Medicaid ABI Waiver Program without notice.

August 1, 2022: ABI Resources submitted a formal inquiry and request for an internal investigation to Connecticut Community Care Inc., concerning the above-mentioned removal.

September 1, 2021: ABI Resources inquired about the SANDATA scheduling/billing system for a client and expressed readiness to start services.

October 6, 2021: ABI Resources communicated concerns about provider poaching/talent raiding to Kathleen Hazelton and requested a team meeting.

October 15 & 18, 2021: There was communication between ABI Resources and Kathleen Hazelton regarding misunderstandings about service provision and addressing poaching concerns.

October 21, 2019, & October 21, 2021: ABI Resources addressed inaccuracies in a DSS letter and discussed interactions with a client's father and care manager.

October 25, 29, and November 9, 2021: ABI Resources followed up with Jennifer Cavallaro at DSS for a status update on an ABI Waiver Program Consumer Service Concern.

November 7, 2022: ABI Resources submitted a FOIA request to Connecticut DSS regarding Medicaid programs.

November 14, 2022: ABI Resources requested the official discrimination complaint form from Connecticut's CHRO for complaints against state agencies.

November 28, 2022: ABI Resources reported potential Medicaid fraud in Connecticut.

November 29, 2022: Connecticut Medicaid fraud was officially reported by ABI Resources.

March 10, 2023 - Initial Inquiry from ABI Resources:

ABI Resources noticed a discrepancy in the correspondence received from ACR and the lack of correspondence from COU/CT DSS.

They raised concerns about the accuracy and reliability of the information provided and requested verification.

March 13, 2023 - Follow-Up Request for Verification:

ABI Resources followed up with a more detailed request for verification of the information provided by ACR.

They emphasized the importance of having accurate and up-to-date information for effectively providing services.

March 20, 2023 - DSS Acknowledgement of Request:

The Department of Social Services acknowledged ABI Resources' request for information and agreed to respond in accordance with CT FOIA requirements.

May 23, 2023 - Concerns About CCSNCT's Activities:

ABI Resources expressed concerns about CCSNCT referring ABI Waiver consumers to services and events organized by Project Genesis.

They noted this practice might violate professional conduct and influence consumer choices unfairly.

July 6, 2023 - Allegations Against ABI Waiver Behaviorist Nichole Collins:

ABI Resources reported protocol violations by ABI Waiver Behaviorist Nichole Collins, including directing case management activities and implementing care plans without proper consultation.

July 7, 2023 - DSS Response to Allegations Against Nichole Collins:

DSS acknowledged the receipt of ABI Resources' email regarding Nichole Collins and mentioned that they would look into the allegations.

August 1, 2022 - Formal Inquiry and Internal Investigation Request:

ABI Resources requested an internal investigation into Connecticut Community Care's actions, specifically concerning manager Doreen Andrews' directive to remove ABI Resources from a Medicaid ABI Waiver Program consumer.

2020

June 1, 2020: Discussion about the Allied Community Resources ABI Program Provider Directory.

June 2, 2020: Response to the previous day's inquiry regarding the Provider Directory.

2022

September 1, 2022: An email addressed to David Medeiros from ABI Resources about unanswered inquiries and concerns related to Medicaid Waivers.

December 1, 2022: An email expressing concerns over potential corruption, patient steering, unfair competition, monopolization, kickbacks, or inducements for Medicaid Referrals.

2023

March 10, 2023: Request for Documentation to Update and Confirm Information on Provider Registries.

March 11, 2023: Email concerning Care Management Referral Process Inquiry for MFP Program and Waivers.

March 14, 2023: Follow-up communication on the Verification Request and the documentation needed for updating Provider Registries.

March 17, 2023: Inquiry regarding the process for clients to change their Agency Service or Care Management Provider under the MFP ABI and PCA Waivers.

March 22, 2023: ABI Resources expresses concerns about the lack of response from Connecticut Community Care regarding their referral process.

March 24, 2023: Further discussion about the Comprehensive Inquiry: Referral Process, Provider List, and Care Manager's Role.

July 7, 2023: Acknowledgment of a complaint regarding solicitation and protocol violations by ABI Waiver Behaviorist Nichole Collins.

July 12, 2023: Announcement by DSS Commissioner Barton Reeves about new leads to the DSS Policy Team.

August 29, 2023: Response to an inquiry about participation and decision-making in the Medicaid ABI Waiver Operational Policy's person-centered planning processes.

August 31, 2023: A report addressing the lack of information sharing in the ABI Waiver Program, with a specific focus on ABI Waiver Program survivor EB and the challenges due to this information gap.

September 13, 2023: Request for a non-encrypted re-send of an investigation request regarding ethical concerns with Connecticut Community Care's Practices.

September 13, 2023: Discussion on the need for encrypted communication regarding an investigation request.

2023

October 31, 2023

Formal Grievance Filed: Concerning Discriminatory Unfair Business Practices within the Connecticut Medicaid ABI Waiver Program.

Issues raised include lack of transparency and bias in Medicaid referrals.

Financial incentives inducements by Medicaid service agencies are addressed.

November 13, 2023

Formal Grievance and Complaint: Regarding not receiving Medicaid ABI Waiver Program service and intervention plans from consumer-assigned care management consultants.

The impact on operational and financial integrity of ABI Resources is highlighted.

November 15, 2023

Formal Grievance and Complaint: About the concealment of public information, particularly the Medicaid ABI Waiver Program Directory of Providers.

Emphasizes the inaccessibility of vital information to vulnerable populations.

November 16, 2023

First Complaint

Formal Complaint and Request for Clarification: On unauthorized care management consultation services in ABI Waiver Program 1.

Raises concerns about compliance and program integrity.

Second Complaint

Formal Complaint: Regarding Unethical Practices and Possible Kickback Schemes in the ABI Waiver Program.

Details conflicts of interest, biased referrals, and potential financial incentives.

2024

January 1, 2024

Documentation Compiled: '1.1.2024 TIME LINE E Binder1.pdf' detailing the events, grievances, and complaints by ABI Resources.

Undated Events and Reports

Comprehensive Strategic Report for Enhancing the ABI Waiver Program

Undated: A strategic report was prepared, outlining various strategies and initiatives for improving the Connecticut Medicaid ABI Waiver Program. This includes a wide array of focus areas aimed at enhancing program effectiveness.

This sequence of events up to January 1, 2024, encapsulates the major formal grievances, complaints, and strategic recommendations made by ABI Resources concerning the Connecticut Medicaid ABI Waiver Program. The details reflect concerns about transparency, fairness, and ethical practices within the program, as well as efforts to propose improvements.

Timeline of Freedom of Information Act (FOIA) Requests by David Medeiros

November 2023

11/15/2023: FOIA request to Connecticut Gov. regarding Consumer Compensation ABI Waiver Program.

11/16/2023: Multiple FOIA requests:

For Medicaid ABI Waiver Program 1 Consumer Data and Financials.

Inquiry for identification from CT DSS FOIA Officer for record-keeping.

Appeal for additional information on Consumer Compensation ABI Waiver Program.

11/19/2023: Several FOIA requests:

To various Connecticut government departments and entities.

Specific request for Medicaid ABI Waiver Programs 1 and 2 details (Binder 1).

11/21/2023: Series of FOIA requests:

Allied Community Resources ACR.

Connecticut Community Care CCC.

Connecticut Department of Social Services DSS.

CT Community Options Unit COU.

Employment Options EO.

Goodwill.

Formal appeal regarding a FOIA request denial.

Late November 2023

11/26/2023: Additional FOIA requests:

For email communications involving Connecticut Community Care and The Supported Living Group.

Requesting emails of State Officials Amy Dumont, Jennifer Cavallaro, Michael Slitt, and Elizabeth Orejuela.

Concerning Governor Ned Lamont's oversight on Connecticut DSS compliance with ABI Waiver Program.

11/28/2023: Further FOIA requests:

For directories of PCA Providers - PCA MFP and ABI Waiver Programs.

For a directory of qualified providers - Medicaid ABI Waiver Program.

Related to email communications between State Officials and the Brain Injury Alliance of Connecticut.

December 2023

12/1/2023: Follow-up and appeals:

Continued correspondence and appeals for prior FOIA requests.

Addressing the responses and lack thereof from the Connecticut Gov. departments.

Formal appeals concerning the denial of information and requesting detailed justifications.

Observations:

Persistence in Inquiry: A consistent pattern of detailed, specific requests for information under the FOIA, demonstrating a thorough and methodical approach.

Scope of Requests: Requests cover a wide range of topics, all centered around the Medicaid ABI Waiver Program, indicating a focus on transparency and accountability in this area.

Engagement with Government Entities: Interaction with multiple departments within the Connecticut Government, reflecting a comprehensive effort to obtain necessary information.

Accommodation for Disability: Repeated requests for electronic format records due to disability, highlighting awareness and assertion of ADA rights.

Legal Appeals: Regular submission of formal appeals against responses deemed insufficient, showing a commitment to pursuing the information rigorously.

This timeline represents a detailed account of David Medeiros' efforts to obtain information about various aspects of the Medicaid ABI Waiver Program and related entities through the FOIA process in Connecticut.

Timeline of David Medeiros' FOIA Requests and Interactions

October 2023

10/21/2023: FOIA Request - Connecticut Community Care CCC SLG.

10/23/2023: FOIA Request - Connecticut Community Care Referrals.

November 2023

11/13/2023: FOIA Request - Directory of Qualified Providers Medicaid ABI Waiver Program.

11/15/2023: FOIA Request - Consumer Compensation ABI Waiver Program.

11/16/2023: FOIA Request - Medicaid ABI Waiver Program 1 Consumer Data and Financials.

11/19/2023: Multiple FOIA Requests:

Medicaid ABI Waiver Programs 1 and 2 (Binder 1).

Cognitive Behavioral Services Behavior Analysts in Medicaid ABI Waiver Program 1.

Housing and Rental Agreements in Medicaid ABI Waiver Programs 1 and 2.

Care Management Consultation Services in ABI Waiver Program 1.

11/21/2023: Series of FOIA Requests to various Connecticut government departments/entities:

Allied Community Resources ACR.

Connecticut Community Care CCC.

Connecticut Department of Social Services DSS.

CT Community Options Unit COU.

Employment Options EO.

Goodwill.

11/26/2023: FOIA Requests:

For Email Communications Involving Connecticut Community Care and The Supported Living Group.

For Email Communications Involving State Officials Amy Dumont, Jennifer Cavallaro, Michael Slitt, and Elizabeth Orejuela.

Governor Ned Lamont Oversight Records on Connecticut DSS Compliance with ABI Waiver Program.

11/28/2023: FOIA Requests:

Directories of PCA Providers - PCA MFP and ABI Waiver Programs.

Directory of Private Qualified Providers - Medicaid ABI Waiver Program.

Email Communications Between State Officials and the Brain Injury Alliance of Connecticut.

December 2023

12/1/2023:

Follow-up and appeals on previous FOIA requests.

Formal appeals regarding denial or incomplete responses.

Key Observations

The timeline demonstrates a consistent effort by David Medeiros to gather detailed information about the Medicaid ABI Waiver Program and related services through multiple FOIA requests.

The requests are extensive, covering various aspects of the program, including consumer data, financial details, service providers, and government oversight.

Responses from the Connecticut Department of Social Services and other entities indicate the processing and acknowledgment of these requests, but also highlight some challenges in obtaining the requested information, leading to subsequent appeals.

This timeline is a summarization of the key events based on the FOIA requests and related communications as detailed in the provided document.

The timeline of David Medeiros' FOIA requests and interactions from October to December 2023 is extensive and demonstrates a consistent and detailed pursuit of information regarding the Medicaid ABI Waiver Program and related services in Connecticut. Here's a summary of the key events:

October 2023:

10/21/2023: FOIA Request about Connecticut Community Care CCC SLG.

10/23/2023: FOIA Request for information on Connecticut Community Care Referrals.

November 2023:

11/13/2023: FOIA Request for a Directory of Qualified Providers in the Medicaid ABI Waiver Program.

11/15/2023: FOIA Request regarding Consumer Compensation in the ABI Waiver Program.

11/16/2023: FOIA Request for Medicaid ABI Waiver Program 1 Consumer Data and Financials.