

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.

11/19/2023: Multiple FOIA Requests including information on Medicaid ABI Waiver Programs 1 and 2, Cognitive Behavioral Services, Housing and Rental Agreements, and Care Management Consultation Services.

11/21/2023: Series of FOIA Requests to various Connecticut government departments/entities such as Allied Community Resources ACR, Connecticut Community Care CCC, Department of Social Services DSS, Community Options Unit COU, Employment Options EO, and Goodwill.

11/26/2023: FOIA Requests concerning Email Communications with Connecticut Community Care and The Supported Living Group, State Officials Amy Dumont, Jennifer Cavallaro, Michael Slitt, and Elizabeth Orejuela, and Governor Ned Lamont's Oversight Records on Connecticut DSS Compliance with ABI Waiver Program.

11/28/2023: FOIA Requests for Directories of PCA Providers, Private Qualified Providers, and 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, including formal appeals regarding denial or incomplete responses.

11/13/2023 - FOIA Request for Directory of Qualified Providers: David Medeiros requested access to the directory of qualified providers for the Medicaid ABI Waiver Program, including statistical data.

11/15/2023 - Follow-Up on Formal Complaint Records: Medeiros followed up on a formal complaint submitted on September 20, 2023, concerning employment concerns at the Supported Living Group (SLG) within the ABI Waiver Program.

11/15/2023 - FOIA Appeal for Consumer Compensation: An appeal was made regarding the FOIA request about consumer compensation in the ABI Waiver Program, seeking clarification and supporting documentation.

11/16/2023 - Multiple FOIA Requests Acknowledged by DSS: The Department of Social Services (DSS) acknowledged various FOIA requests submitted by Medeiros and promised to respond in accordance with the CT FOIA.

11/19/2023 - Comprehensive FOIA Request Covering Various Aspects of ABI Waiver Programs: Medeiros requested detailed information on grievances, complaints, financial audits, policies, and service plans related to Medicaid ABI Waiver Programs 1 and 2.

11/21/2023 - Multiple FOIA Requests Regarding Allied Community Resources, Connecticut Community Care, CT Community Options Unit, Employment Options, and Goodwill: These requests sought financial data and records from 2013 to the present day.

11/21/2023 - Legal Appeal Concerning FOIA Request: Medeiros filed a formal appeal regarding the response to his FOIA request dated November 19, 2023, pertaining to Medicaid ABI Waiver Programs 1 and 2.

11/21/2023 - DSS FOIA Response to Various Requests: The DSS FOIA officer responded to the requests, stating that the Department will act in accordance with CT FOIA requirements.

11/21/2023 - Connecticut Community Care Referrals FOIA Request Update: The DSS FOIA officer provided an update and attached relevant complaint records.

11/21/2023 - Response on Directory of Qualified Providers Request: The DSS FOIA officer indicated that they do not have access to the Directory of Qualified Providers as it is maintained by Allied Community Resources.

11/23/2023 - Further Correspondence and Clarifications: Medeiros continued correspondence for clarifications and further information regarding his requests.

10/30/2023: Submission of a formal FOIA request to the DSS regarding the Medicaid Acquired Brain Injury (ABI) Waiver Programs and related referral processes. The request included various specific areas such as referral records, funding documentation, referral limitations and conditions, quality and compliance records, electronic system accountability, guidance and regulation records, and FOIA and DSS communication records from January 1, 2015, to the present date.

11/02/2023: A FOIA request was made seeking details about the State of Connecticut employees responsible for managing the email address providerfraud.dss@ct.gov, including their roles, responsibilities, and the department overseeing the operation.

11/15/2023: Another FOIA request focused on Care Managers' Consultation Services in the ABI Waiver Program. This request sought detailed information and records, including comparative analyses,

compliance reports, training materials, and consumer feedback, specifically related to ABI Waiver Program 1.

11/16/2023: A request was submitted for comprehensive information about care management and consultation services provided to consumers in ABI Waiver Program 1, emphasizing the unique practices and compliance measures differentiating these services from those in ABI Waiver Program 2.

10/23/2023: A FOIA request addressed concerns about consumer compensation within the ABI Waiver Program, specifically related to the Supported Living Group (SLG). The request pointed to potential violations of wage standards, workplace safety issues, and the exploitation of individuals with disabilities .

Responses and Follow-Ups by DSS: In response, the DSS acknowledged the requests, provided clarifications where needed, and informed about the review process and potential costs. The responses also included requests for additional clarity from the DSS and indicated that some parts of the new requests were included in previous requests.

Appeals and Further Clarifications: Subsequent communications involved appeals due to incomplete disclosures and requests for more detailed responses, especially when specific exemption citations for withholding information were not provided by the DSS. These appeals and follow-ups emphasized the need for comprehensive disclosure and transparency in the handling of these requests.

This sequence outlines a meticulous and persistent effort to obtain detailed information and clarity on various aspects of the Medicaid ABI Waiver Programs, demonstrating an ongoing engagement with the DSS to uphold the principles of transparency and accountability in public services.

Early to Mid-2022

Ongoing Communication: Throughout this period, there were continuous interactions with CT DSS, primarily centered around requests for information and clarification regarding Medicaid programs.

July 2022

July 26, 2022: A follow-up communication was sent to CT DSS regarding a FOIA request originally submitted on December 6, 2021. This indicates an ongoing effort to seek information from the previous year that had not yet been fully addressed or resolved.

August 2022

August 30, 2022: Another reminder was sent to CT DSS concerning the FOIA request dated December 6, 2021. This step was likely taken due to a lack of comprehensive response or significant delay in the response from CT DSS.

October 2022

October 6, 2022: CT DSS responded to the FOIA request from December 6, 2021, with an apology for the delay and a promise to continue working to provide the remaining requested information.

October 18, 2022: A new FOIA request was submitted. This request focused on highlighting specific concerns and challenges related to DSS practices. It signifies an escalation in the pursuit of detailed information and a possible response to ongoing issues.

October 20, 2022: Receipt of the October 18, 2022 FOIA request was acknowledged by CT DSS. This acknowledgment indicated that CT DSS had officially received the request and would process it in accordance with FOIA requirements.

Summary of 2022

The year 2022 was marked by persistent efforts to obtain detailed information and clarification from CT DSS. Despite facing delays and incomplete responses, there was a continued push for transparency and accountability, especially concerning the handling of Medicaid programs. The multiple FOIA requests and follow-ups reflect an ongoing commitment to addressing systemic issues within the Medicaid ABI Waiver and MFP programs, and advocating for the rights of individuals with disabilities.

Based on the extensive documentation from your interactions with the Connecticut Department of Social Services (CT DSS) and related Freedom of Information Act (FOIA) requests, here's a comprehensive and detailed sequence of events:

2022

Throughout 2022: Numerous FOIA requests were made to CT DSS, focusing on various aspects of Medicaid programs, including data on applications, approvals, wait times, service providers, and specific communications.

July 26, 2022: Follow-up request sent regarding the status of a FOIA request initially submitted on December 6, 2021.

August 30, 2022: A reminder sent to DSS about the FOIA request from December 6, 2021.

October 6, 2022: DSS responded to the FOIA request from December 6, 2021, promising to provide remaining information.

October 18, 2022: A new FOIA request was submitted, highlighting concerns and challenges related to DSS practices.

October 20, 2022: DSS acknowledged the receipt of the October 18, 2022 FOIA request.

2023

January 18, 2023: Follow-up on the status of the FOIA request from December 6, 2021.

February 11, 2023: Further follow-up on the status of the same FOIA request.

March 14, 2023: Another status request was sent regarding the December 6, 2021 FOIA request.

April 7, 2023: Additional follow-up for an update on the FOIA request.

September 26, 2023: A comprehensive FOIA request was made, covering communications related to the Federal Medicaid ABI Waiver Program & Money Follows the Person Program.

October 11, 2023: Inquiry about communications between CT DSS and Allied Community Resources, particularly regarding ABI Resources LLC and David Medeiros, from 2013 to present.

October 17, 2023: FOIA request focused on Project Genesis and Medicaid Connecticut ABI Waiver programs financial details from 2013 to present.

October 18, 2023: Received a response from DSS regarding the FOIA request made on October 17, 2023.

December 14, 2023: Detailed letter to Matthew S. Antonetti, Legal Director CT DSS, expressing concerns over the handling of the ABI Waiver Program and requesting clarity and transparency.

Throughout the Timeline

Multiple Appeals and Follow-ups: Due to delays in processing and incomplete responses, several appeals and follow-up communications were initiated, emphasizing the need for transparency and accountability.

Advocacy for Disability Rights: Persistent advocacy for the rights of individuals with disabilities, demanding fair treatment, and addressing systemic issues in the ABI Waiver and MFP programs.

Requests for Accessibility Accommodations: Due to your disability, you consistently requested that information be provided in an accessible electronic format.

This timeline illustrates the ongoing efforts to seek information, transparency, and accountability from CT DSS regarding the Medicaid ABI Waiver and MFP programs, while also advocating for the rights and fair treatment of individuals with disabilities.

December 14, 2023

Urgent No Companion Authorizations Post-December 31st for Shared Consumers Medicaid ABI Waiver:

David Medeiros of ABI Resources reached out concerning the absence of companion authorizations for shared consumers under the Connecticut Community Care post-December 31st. This issue, highlighted by Sandata, required urgent attention to ensure continuity and quality of care.

Communication with Ronald Sturm:

Medeiros communicated with Ronald Sturm, requesting clarification and resolution of the authorization issue. He provided the names of the consumers involved to Sturm and asked for a status update from Gainwell regarding the PAs in the Gainwell system not appearing in the Sandata system.

December 15, 2023

Follow-up Communication:

Medeiros followed up for a status update, indicating the serious nature of the issue and its potential impact on service delivery.

December 18, 2023

Issue of a Consumer Not in the System:

Medeiros addressed another issue concerning a consumer (identified as MW) who was not properly integrated into the CT DSS systems. This resulted in no records being available in the Sandata EVV system for this consumer. He sought assistance from Ronald Sturm to review and rectify this matter.

Ronald Sturm responded, indicating that the issue was between Gainwell and Sandata, over which CCC (Connecticut Community Care) had no control. He also provided the PA and AVR ID details for MW.

Response to Sandata Technologies:

Medeiros was requested by Sandata Technologies to provide screenshots of authorizations from the state portal for each client, showing correct end dates, to address the issue of no authorization scheduling.

December 20, 2023

Ongoing Communication Efforts:

Throughout this period, Medeiros continued efforts to communicate with relevant parties, including CT DSS and Sandata, to resolve these issues impacting the ABI Waiver Program and its beneficiaries.

This detailed timeline provides a clear picture of the efforts made by ABI Resources to address urgent issues relating to the Acquired Brain Injury (ABI) Waiver Program, focusing on ensuring continuity and quality of care for consumers under the program.

December 14, 2023

Detailed Letter to Matthew S. Antonetti (CT DSS Legal Director):

David Medeiros, highlighting his dual role as the owner of ABI Resources and a person living with a brain injury, firmly expressed concerns over Connecticut DSS's handling of the ABI Waiver Program.

He pointed out the mischaracterization of his whistleblower grievances, the misleading nature of the department's letter, and issues of discriminatory practices, lack of transparency, and unethical behavior within the system.

Medeiros emphasized the importance of FOIA requests for transparency and accountability, addressing the department's aversion to such transparency.

He called for a comprehensive re-evaluation of the department's response and urged for a systemic change to address deep-seated problems within the ABI Waiver Program.

Urgent Issue of No Companion Authorizations Post-December 31st:

Medeiros informed Ronald Sturm about the absence of companion authorizations for shared consumers under CT Community Care, highlighting the potential disruption to care continuity and quality.

He requested detailed information on the status of these authorizations and any necessary steps to expedite the process.

Email Exchange with Ronald Sturm:

A series of emails between Medeiros and Sturm (Clinical Operations Manager, ABI PCA Waiver) discussed the specifics of the authorization issue. Medeiros provided the names of affected consumers and sought updates from Gainwell regarding the PA discrepancies in the Sandata system.

December 15, 2023

Continued Communication for Status Update:

Medeiros followed up with Ronald Sturm and Gainwell for a status update on the companion authorization issue, emphasizing its urgency and impact on service delivery.

December 18, 2023

Issue with Consumer 'MW' Not in the System:

Medeiros reached out regarding a specific consumer (MW) not appearing in the Sandata EVV system. He highlighted the issue's critical nature for accurate service delivery and requested assistance for review and rectification.

Sturm responded that the PA for MW had been active since December 6 and that the issue was a matter between Gainwell and Sandata, over which CCC had no control. He provided the relevant PA and AVR ID details for MW.

Request from Sandata Technologies for Authorization Screenshots:

Sandata Technologies requested Medeiros to provide screenshots of authorizations from the state portal for each client to address the no authorization scheduling issue. This included detailed information on member names, Medicaid IDs, service codes, and dates of service.

December 20, 2023

Ongoing Efforts for Resolutions:

During this period, Medeiros consistently communicated with various parties, including CT DSS, Sandata Technologies, and other entities, to resolve these pressing issues. His actions demonstrated a commitment to ensuring the proper operation and integrity of the ABI Waiver Program, while advocating for transparency, effective communication, and systemic improvements.

This comprehensive account underscores the extent of challenges faced and the efforts made by David Medeiros and ABI Resources to address critical issues impacting the ABI Waiver Program and its

beneficiaries. It highlights the need for systemic changes and effective communication strategies within the Connecticut Department of Social Services.

2019

October 21, 2019: ABI Resources responds to inaccuracies in a letter from the Connecticut Department of Social Services (DSS), clarifying services provided under the ABI Waiver program.

2021

December 6, 2021: ABI Resources submits a Freedom of Information Act (FOIA) request to Connecticut DSS regarding Medicaid programs.

2022

July 25, 2022: Connecticut Community Care manager orders immediate removal of ABI Resources from serving 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. regarding the July 25 incident.

October 18, 2022: Formal request sent to Connecticut DSS related to the ABI Waiver Program.

November 14, 2022: Request for an official discrimination complaint form from the Connecticut Commission on Human Rights and Opportunities.

2023

March 10, 2023: ABI Resources inquires about discrepancies in correspondence from Connecticut DSS and requests verification of information.

March 14, 2023: Follow-up on previous inquiries sent.

July 26, 2023: Follow-up on the FOIA request (dated December 6, 2021) sent to Connecticut DSS.

September 13, 2023: Request for an urgent investigation regarding ethical concerns with Connecticut Community Care's practices.

October 11, 2023: Another FOIA request sent to Connecticut DSS.

October 23, 2023: FOIA request sent regarding Connecticut Community Care referrals within the Medicaid ABI Waiver Program.

October 27, 2023: Request for complete disclosure of information under the Freedom of Information Act.

November 16, 2023: Appeal against the denial of a FOIA request (dated November 19, 2023) regarding housing and rental agreements within the Medicaid ABI Waiver Programs.

November 19, 2023: FOIA request submitted concerning housing and rental agreements within the Medicaid ABI Waiver Programs.

November 21, 2023: Formal appeal regarding the FOIA request denial filed.

These events demonstrate ABI Resources' continued efforts to address and resolve concerns related to the Medicaid ABI Waiver Program, ensuring transparency, ethical practices, and advocating for the rights and needs of ABI consumers. The company's engagement with various agencies and departments reflects a commitment to navigating bureaucratic complexities and improving healthcare service delivery.

To provide an even more detailed breakdown of the events based on the email exchanges in your document, I will outline each key communication, including the specific dates, senders, recipients, and the main points or actions requested or taken in each email:

December 14, 2023

Initial Inquiry by David Medeiros to Ronald Sturm: Medeiros raises concerns about the absence of companion authorizations post-December 31st and requests clarity on the status of these authorizations, listing specific consumer initials (EB, AJ, WL, ES, TM, AV, ZP).

Response Request from Ronald Sturm to David Medeiros: Sturm asks for the names of the concerned consumers in a secure email for further investigation.

December 15, 2023

3. Follow-Up by David Medeiros: Medeiros requests a status update on the companion authorizations issue.

December 18, 2023

4. Further Inquiry by David Medeiros: Medeiros questions whether CCC has escalated the issue to DSS and if Gainwell has been contacted.

Request from Gainwell for Client Information: Gainwell asks for Medicaid ID numbers for the clients whose initials were provided, to investigate why their Prior Authorizations (PAs) are not visible in Sandata.

December 19, 2023

6. Detailed Request for Assistance by David Medeiros to Amy Dumont and Laurie Filippini: Medeiros communicates the urgent need for companion authorizations, highlighting the impact on service delivery, and seeks guidance from CT DSS.

December 20, 2023

7. Appreciation Email from David Medeiros to Carol Siddall: Medeiros thanks Carol Siddall for her efficient handling of the issue.

December 21, 2023

8. Response from Amy Dumont to David Medeiros: Dumont acknowledges the technical issue affecting companion service authorizations and suggests a temporary workaround.

Request for Clarification from David Medeiros: Medeiros seeks detailed instructions from Amy Dumont and Laurie Filippini to resolve the issue.

Carol Siddall's Assurance: Siddall indicates she has been working on the issue and assures a resolution soon.

December 22, 2023

11. Update from Ronald Sturm to David Medeiros: Sturm provides an update on his work with DSS and Carol Siddall's involvement in addressing the issue.

Acknowledgment from David Medeiros to Ronald Sturm: Medeiros acknowledges the efforts and expresses gratitude for the collaboration in resolving the issue.

Electronic Visit Verification (EVV) Updates:

13. Comprehensive EVV System Update: The document includes detailed updates about the EVV system, covering enforcement target dates for home health claims, billing guidance, updates for Sandata Agency Management users, answers to critical questions, and various resources related to EVV.

Throughout these communications, there is a clear focus on resolving the technical issues related to companion service authorizations and ensuring continuous support for ABI Resources' consumers. The correspondence involves multiple stakeholders, including ABI Resources, CCC, CT DSS, Gainwell, and Sandata, showcasing a commitment to rapid resolution, collaboration, and maintaining the high standards of care and support.

To provide a more detailed breakdown, including specific dates from the document "1.1.2024 TIME LINE K Binder1.pdf":

December 14, 2023

Initial Contact About Authorization Issues: David Medeiros sends an email concerning the absence of companion authorizations post-December 31st for shared consumers. This action was taken as per guidance from Sandata.

December 15, 2023

Request for Status from Gainwell: Medeiros reaches out to Gainwell requesting a status update on the challenge related to companion authorizations.

December 18, 2023

Communication with CCC and Gainwell: Medeiros addresses the issue with Ronald Sturm, inquiring whether CCC has escalated the problem to DSS. Gainwell Technologies requests Medicaid ID numbers for the affected clients.

December 19, 2023

Further Inquiries and Clarifications: Medeiros seeks additional information from Sturm regarding CCC's actions. Ronald Sturm suggests that ABI Resources should communicate directly with Gainwell for a resolution.

December 20, 2023

Email to Carol Siddall: Medeiros sends an appreciative email to Carol Siddall for handling an issue efficiently.

December 21, 2023

Urgent Assistance Request to DSS: Medeiros sends an urgent email to Amy Dumont and Laurie Filippini at DSS, highlighting challenges related to companion authorizations.

Response from Amy Dumont: Dumont acknowledges the technical issue at Gainwell affecting authorizations and proposes a temporary workaround.

Concern for ABI Resources' Reputation: Medeiros writes to DSS emphasizing the need for actions to address misunderstandings affecting ABI Resources' reputation.

December 22, 2023

Acknowledgment of Collective Efforts: Medeiros sends an email acknowledging the collaborative efforts of Ronald Sturm and others in addressing the authorization issue.

Comprehensive EVV System Update: The document includes a detailed update about the EVV system, addressing enforcement dates for claims, billing guidelines, updates for Sandata Agency Management users, and FAQs.

Throughout the Document

Focus on Technical Issues: The primary concern is technical problems affecting companion service authorizations, vital for ABI Resources' service delivery.

Engagement with Key Stakeholders: Ongoing communication with entities like DSS, CCC, and Gainwell Technologies to resolve these challenges.

Reputation and Service Quality Concerns: There's a consistent focus on maintaining ABI Resources' reputation and ensuring the quality of service to consumers.

Proactive Resolution Efforts: Medeiros actively seeks solutions, demonstrating commitment to consumers and service quality.

This detailed account provides an insight into ABI Resources' proactive approach to resolving authorization issues and their dedication to maintaining service quality amidst technical challenges.

October 31, 2023

Formal Grievance Filed Against Discriminatory Practices

David Medeiros sends a detailed complaint to all pertinent departments within the state of Connecticut, highlighting discriminatory business practices in the Medicaid ABI Waiver Program, including issues with Medicaid referrals and financial inducements.

November 13, 2023

Grievance About Connecticut Medicaid ABI Waiver Program Service Plans

A formal grievance is filed concerning the Connecticut Medicaid ABI Waiver Program's Service and Intervention Plans, focusing on operational and financial implications.

November 15, 2023

Grievance on Concealment of Public Information

A complaint about the concealment of the Medicaid ABI Waiver Program Directory of Providers is lodged, impacting ABI Resources' operations and client choices.

November 16, 2023

Complaints on Unauthorized Services and Potential Kickback Schemes

ABI Resources raises issues about unauthorized care management services and unethical practices, including potential kickback arrangements within the ABI Waiver Program.

December 14, 2023

Urgent Email Regarding Companion Authorizations

An urgent email is sent to Ronald Sturm addressing the lack of companion authorizations post-December 31st for shared consumers in the Medicaid ABI Waiver.

December 15, 2023

Follow-up Email for Companion Authorization Update

A follow-up email is sent to Ronald Sturm, requesting an update on the issue of companion authorizations.

December 17, 2023

FOIA Request for Records on Disability Rights and Whistleblower Protections

A comprehensive FOIA request is submitted, seeking records related to disability rights and whistleblower protections.

December 18, 2023

Complaint of Systemic Injustice, Disability Discrimination, and Whistleblower Retaliation

A new complaint is filed addressing systemic injustice and disability discrimination, focusing on the removal and premature closure of Sandata EVV Ticket #539494 and the unauthorized alteration of ABI Resources' contact information.

December 23, 2023

Communication with Governor Ned Lamont Regarding Systemic Change

A communication is sent to Governor Ned Lamont calling for systemic change due to failures in ADA accommodation compliance, disability discrimination, and whistleblower retaliation.

December 28, 2023

Complaint for Equitable Referral Distribution in Disability Support Services

A complaint is submitted evaluating implications and solutions for equitable referral distribution within Connecticut's Disability Support Services.

These events represent a series of formal and structured attempts by David Medeiros and ABI Resources LLC to address and rectify significant concerns within the Connecticut Medicaid ABI Waiver Program. The concerns raised span from discriminatory practices in Medicaid referrals to systemic injustices and failures in upholding disability rights and whistleblower protections.

Re: Solicitation of ABI Waiver Consumers by CCSNCT

ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>

Tue 5/30/2023 2:45 PM

To:

- Dumont, Amy E <amy.dumont@ct.gov>;
- Slitt, Michael <Michael.Slitt@ct.gov>;
- Orejuela, Elizabeth <Elizabeth.Orejuela@ct.gov>;
- DSS, Commis <commis.dss@ct.gov>

Cc:

- ABI Resources HIPAA Secure Correspondence www.CTBRAININJURY.com
<abi@ctbraininjury.com>

Dear DSS Commissioner, Amy Dumont, COU CT Department of Social Services.

I am writing to again draw your immediate attention to a matter of significant concern and urgency. It has come to our notice that ABI Resources, a vital service provider within our community, has been subject to a series of distressing incidents which, to our knowledge, have not been appropriately addressed by the Department of Social Services (DSS).

The lack of evident response or preventative measures from DSS is raising concerns about the department's commitment to promoting a safe and supportive environment for such essential organizations like ABI Resources. Their invaluable contribution towards serving some of our community's most vulnerable individuals cannot be underestimated, and it is deeply concerning to observe the apparent lack of action taken to safeguard this vital institution.

We understand the complexities involved in such circumstances, but it is crucial that DSS acknowledges the issue to further occurrences. This includes conducting a thorough investigation into these incidents, implementing stricter security measures where necessary, and ensuring those responsible are held accountable for their actions.

By addressing these concerns promptly and efficiently, DSS COU will send a strong message that such behaviors are unacceptable and will not be tolerated. This decisive action will undoubtedly contribute to the strengthening of community trust and confidence in the department's dedication to ensuring the safety and welfare of all organizations under its jurisdiction.

We look forward to your prompt attention to this matter. We are confident that the DSS COU will take our concerns seriously and demonstrate its commitment to uphold the dignity and safety of all service providers in our community, particularly those as vital as ABI Resources.

Please inform us about the measures that are being taken to address this situation. We remain hopeful that with your department's prompt intervention, we can ensure a safer and more secure environment for ABI Resources, allowing them to continue their important work unhindered.

Thank you for your cooperation.

David Medeiros



A.B.I. RESOURCES

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ABI Resources Connecticut home-based supported living and community care services for the MFP, ABI and PCA Waivers.

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DSSIACCCACTIPSLGLHFSCSWCRCTACRCWCAAAR-REF-417



From: Dumont, Amy E <Amy.Dumont@ct.gov>

Sent: Tuesday, May 23, 2023 3:29 PM

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

Cc: ABI Resources HIPAA Secure Correspondence www.CTBRAININJURY.com <abi@ctbraininjury.com>

Subject: RE: Solicitation of ABI Waiver Consumers by CCSNCT

Hi David! I am looking into this matter and I will get back you.

Amy

Amy Dumont, LCSW
Interim Director/Program Manager
CT Department of Social Services
Community Options Unit
55 Farmington Avenue
Hartford CT 06105-3725
Tel: 860 424-5173

Fax: 860 424:4963
amy.dumont@ct.gov

From: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>
Sent: Tuesday, May 23, 2023 12:01 PM
To: Amy Dumont <amy.dumont@ct.gov>; Slitt, Michael <Michael.Slitt@ct.gov>; elizabeth orejuela <Elizabeth.Orejuela@ct.gov>
Cc: ABI Resources HIPAA Secure Correspondence www.CTBRAININJURY.com <abi@ctbraininjury.com>
Subject: Re: Solicitation of ABI Waiver Consumers by CCSNCT

05/23/2023

Hello Amy and Department of Social Services (DSS) COU.

I am writing this letter to formally bring to your attention a matter of grave concern, which pertains to the activities of the ABI Waiver Program behavioral service provider, CCSNCT, with regards to Medicaid Acquired Brain Injury (ABI) Waiver consumers referrals and solicitation.

CCSNCT, in their capacity as a Medicaid ABI Waiver service provider, is involved in a concerning practice of actively referring, promoting and encouraging ABI Waiver consumers to register for events and services organized by Project Genesis, an entirely separate entity. These solicitations have included adding Project Genesis events to consumer calendars and communication logs, and verbal endorsements of their services during Medicaid Waiver Team meetings as well as directly with consumers.

This practice violates the established norms and principles of professional conduct and integrity. It unfairly influences the choices of ABI Waiver consumers who rely on CCSNCT for their caregiving needs, and creates an undue burden on these individuals to participate in services or events they may not have otherwise chosen or needed.

Given the sensitive nature of the services offered and the vulnerability of the consumers under the Medicaid ABI Waiver, such behavior by CCSNCT is highly inappropriate. It can potentially lead to a conflict of interest, and adversely affect the consumers' ability to make fully informed decisions regarding their care and participation in various events or services.

In light of these concerns, ABI Resources respectfully request immediate attention and intervention from the Department of Social Services. The promotion of Project Genesis by CCSNCT to Medicaid ABI Waiver consumers should cease forthwith to ensure the preservation of the consumers' rights, as well as to maintain the ethical standards that service providers are expected to uphold.

Thank you in advance for your attention to this matter. I have full faith that the Department will take appropriate action to rectify this situation.

Will DSS provide detailed information on the specific steps the department plans to take in rectifying the ongoing issue of unauthorized solicitation and steering by CCSNCT towards ABI Waiver consumers for Project Genesis.

Your prompt response is highly appreciated.

All the best,

David Medeiros



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ABI Resources Connecticut home-based supported living and community care services for the MFP, ABI and PCA Waivers.

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DSSIACCCACTIPSLGLHFSCSWCRCTACRCWCAAAR-REF-417



From: ABI RESOURCES 860 942-0365 <aabiwr@live.com>

Sent: Tuesday, May 23, 2023 11:59 AM

To: Amy Dumont <amy.dumont@ct.gov>; Jennifer.cavallaro@ct.gov <Jennifer.Cavallaro@ct.gov>; Slitt, Michael <Michael.Slitt@ct.gov>; elizabeth orejuela <Elizabeth.Orejuela@ct.gov>

Cc: ABI Resources HIPAA Secure Correspondence www.CTBRAININJURY.com <abi@ctbraininjury.com>; ABI RESOURCES 860 942-0365 <aabiwr@live.com>

Subject: Solicitation of ABI Waiver Consumers by CCSNCT

05/23/2023

Hello Amy and Department of Social Services (DSS) COU.

I am writing this letter to formally bring to your attention a matter of grave concern, which pertains to the activities of the ABI Waiver Program behavioral service provider, CCSNCT, with regards to Medicaid Acquired Brain Injury (ABI) Waiver consumers referrals and solicitation.

CCSNCT, in their capacity as a Medicaid ABI Waiver service provider, is involved in a concerning practice of actively referring, promoting and encouraging ABI Waiver consumers to register for events and services organized by Project Genesis, an entirely separate entity. These solicitations have included adding Project Genesis events to consumer calendars and communication logs, and verbal endorsements of their services during Medicaid Waiver Team meetings as well as directly with consumers.

This practice violates the established norms and principles of professional conduct and integrity. It unfairly influences the choices of ABI Waiver consumers who rely on CCSNCT for their caregiving needs, and creates an undue burden on these individuals to participate in services or events they may not have otherwise chosen or needed.

Given the sensitive nature of the services offered and the vulnerability of the consumers under the Medicaid ABI Waiver, such behavior by CCSNCT is highly inappropriate. It can potentially lead to a conflict of interest, and adversely affect the consumers' ability to make fully informed decisions regarding their care and participation in various events or services.

In light of these concerns, ABI Resources respectfully request immediate attention and intervention from the Department of Social Services. The promotion of Project Genesis by CCSNCT to Medicaid ABI Waiver consumers should cease forthwith to ensure the preservation of the consumers' rights, as well as to maintain the ethical standards that service providers are expected to uphold.

Thank you in advance for your attention to this matter. I have full faith that the Department will take appropriate action to rectify this situation.

Will DSS provide detailed information on the specific steps the department plans to take in rectifying the ongoing issue of unauthorized solicitation and steering by CCSNCT towards ABI Waiver consumers for Project Genesis.

Your prompt response is highly appreciated.

All the best,
David Medeiros



A.B.I. RESOURCES

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Main Office: 1-860-942-0365 | Ledyard Fax: 1-860-464-4960 | Windham Fax: 1-860-465-9591

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Act 18 U.S.C. Sec 2510-2521 and is confidential. This confidential transmission may include privileged medical, psychiatric, and/or drug treatment information intended only for the recipient(s) names above. If you are not the intended recipient, reading, disclosure, discussion, dissemination, distribution or copying of this information by anyone other than the intended recipient or their legal agent(s) is strictly prohibited. Nothing in this communication is intended to constitute a waiver of any privilege or the confidentiality of this message. If you have received this in error, please notify ABI Resources by e-mail and/or telephone at 860-942-0365, delete the original message and any copy of it from your system. Also, ABI Resources accepts no responsibility for any loss or damage from the use of this message and/or any attachments, including damage from viruses. Thank you. NOTE: Messages to or from the State of Connecticut domain may be subject to the Freedom of Information statutes and regulations. ABI-639-DSSIACCCACTIPSLGLHFSCSWCRCTACRCWCAAAR-REF-417



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10/31/2023

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

To: All pertinent departments within the state of Connecticut,

I trust this correspondence reaches you in excellent health and high spirits. My name is David Medeiros, and I am addressing you in my capacity as a concerned business owner, resident, and individual with a disability residing in the state of Connecticut. I have the honor of leading ABI Resources, a distinguished service provider within the Connecticut Medicaid Acquired Brain Injury (ABI) Waiver Program.

I find myself compelled to highlight and formally complain about a series of blatant and persistent inequities pertaining to discriminatory business practices occurring under the aegis of the aforementioned program. Despite my multiple, concerted efforts to engage in constructive dialogue with the Connecticut Department of Social Services, addressing these grave concerns has been met with a disconcerting lack of engagement and rectification. This situation has had a deleterious impact not only on the operations of ABI Resources but also on the well-being and quality of service accessible to the disabled individuals we are committed to serving.

Key Concerns and Grievances:

a) **Medicaid Referrals:**

b) **Paying Consumers / Financial Incentives Inducements / Medicaid Service Agency**

a) **Medicaid Referrals:**

There is a prevailing lack of transparency and an apparent bias in the Medicaid referral processes within the ABI Waiver Program. ABI Resources, despite an unwavering commitment to excellence in service delivery, has been unfairly marginalized, resulting in an unequal and unjust distribution of referrals.

Addressing issues of transparency, bias, and unfair marginalization in Medicaid referrals, particularly within the Acquired Brain Injury (ABI) Waiver Program, is crucial to ensuring equitable access to quality healthcare services for all eligible individuals. ABI Resources and similar service providers play a vital role in supporting individuals with acquired brain injuries, and it is essential that they are treated fairly in the referral process to continue their commitment to excellence in service delivery.

Potential Steps to Address the Issue:

Increase Transparency:

Implement a transparent referral process where criteria for referrals are clearly defined and made publicly available.

Establish a monitoring system to track and publish referral data, including the number of referrals made to each service provider and the reasons for referral decisions.

Conduct an Independent Audit:

Hire an independent entity to conduct a thorough review of the Medicaid referral processes within the ABI Waiver Program to identify any biases or unfair practices.

The audit should also evaluate the performance and quality of services provided by ABI Resources and other service providers to ensure that referrals are based on merit and the ability to meet the needs of individuals with acquired brain injuries.

Implement a Fair and Equitable Referral System:

Develop a standardized and objective referral system that ensures all service providers are evaluated based on the same criteria.

Consider incorporating a randomized component to the referral process to prevent bias and ensure a fair distribution of referrals.

Engage Stakeholders:

Create a platform for open dialogue between Medicaid officials, service providers, individuals with acquired brain injuries, and their families to discuss concerns related to the referral process.

Use feedback from stakeholders to continuously improve the referral system and address any emerging issues.

Provide Training and Education:

Offer training to Medicaid officials and other stakeholders involved in the referral process to raise awareness about potential biases and the importance of a fair and equitable system.

Educate service providers about the referral process, criteria for referrals, and steps they can take if they believe they have been treated unfairly.

Establish a Complaint and Appeal Process:

Create a clear and accessible complaint and appeal process for service providers who believe they have been unfairly marginalized in the referral process.

Ensure that complaints are thoroughly investigated and that corrective action is taken when warranted.

Promote Accountability:

Hold Medicaid officials and other stakeholders accountable for ensuring a fair and transparent referral process.

Implement consequences for individuals or entities found to be engaging in biased or unfair practices.

Regularly Review and Update Policies:

Conduct regular reviews of referral policies and procedures to ensure they remain up-to-date, fair, and transparent.

Update policies as needed to address any identified issues and to adapt to changing needs and circumstances.

Addressing the issues of transparency, bias, and unfair marginalization in Medicaid referrals within the ABI Waiver Program is essential to ensuring that all eligible individuals have equal access to high-quality services. It is imperative that service providers like ABI Resources are treated fairly and equitably in the referral process to uphold the integrity of the healthcare system and to foster trust among all stakeholders. Implementing the above steps could contribute significantly to creating a more transparent, fair, and equitable referral system, ultimately benefiting individuals with acquired brain injuries and the service providers dedicated to supporting them.

b) Paying Consumers / Financial Incentives Inducements / Medicaid Service Agency

Provider: A Medicaid service agency provider is offering financial incentives to consumers, leading to an imbalance in the competitive landscape. This kind of practice can indeed raise serious ethical, legal, and fairness concerns.

Ethical Concerns:

Conflicts of Interest: Financial incentives could create a conflict of interest, where the provider's financial gain takes precedence over the best interests of the consumer.

Bias and Unfairness: It could lead to bias in referrals, favoring certain providers over others irrespective of the quality of services they offer.

Erosion of Trust: Such practices can erode trust in the Medicaid system and healthcare providers, as consumers may question the motives behind the services they are being referred to.

Legal Concerns:

Violation of Anti-Kickback Statutes: Providing inducements to influence the referral of services covered by Medicaid can violate anti-kickback statutes, potentially leading to legal actions and penalties.

False Claims Act Violations: If such inducements lead to fraudulent billing or claims, it could result in violations of the False Claims Act.

Non-Compliance with Medicaid Regulations: Medicaid has strict guidelines and regulations to ensure fairness and prevent fraud, and engaging in such practices can result in non-compliance and potential debarment from the program.

Lack of Responsiveness to Complaints and Reports: Our persistent complaints and reports, meticulously documenting these issues, have been met with apathy. There is an alarming deficit in the investigation, redressal, and accountability mechanisms within the system.

Adverse Impacts on ABI Resources:

Financial Duress: The discriminatory practices and referral shortages have placed ABI Resources under significant financial duress, compromising our ability to maintain operational viability and deliver superior services to our clients.

Reputational Harm: The state's nonintervention and perceived partiality have led to an erosion of our reputation. This has resulted in ABI Resources being unjustly perceived as a less favorable service provider, regardless of our commitment to quality and excellence.

Demoralization of Workforce: The protracted nature of these issues has led to a pervasive sense of demoralization among our staff and stakeholders, adversely impacting the morale and efficacy of our organizational operations.

Addressing the Issue:

Regulatory Oversight: There should be strict oversight and monitoring by regulatory bodies to ensure that all Medicaid service agency providers are complying with laws and regulations.

Transparency: Increasing transparency in the referral process can help in ensuring that referrals are made based on the quality of services rather than financial incentives.

Whistleblower Protections: Encouraging whistleblowing and providing protections for whistleblowers can help in uncovering and addressing such unethical practices.

Penalties and Sanctions: Implementing strict penalties and sanctions for those found guilty of engaging in such practices can act as a deterrent.

Public Awareness: Educating consumers about the potential for such conflicts of interest and providing them with information on how to report suspicious activities can empower them to make informed decisions.

Addressing this issue is crucial for maintaining the integrity of the Medicaid program, ensuring that consumers receive the best possible care, and fostering a competitive and fair marketplace for healthcare services.

Call to Action:

I earnestly seek your prompt intervention and advocacy in ensuring this grievance is communicated to all pertinent departments within the state of Connecticut tasked with addressing such critical matters. The departments that ought to be immediately apprised of this situation include, but are not limited to:

Connecticut Department of Social Services

Connecticut Attorney General's Office

Connecticut Commission on Human Rights and Opportunities

Connecticut Office of the Healthcare Advocate

Connecticut Office of Policy and Management

I have proactively initiated complaints and have directly engaged with the Connecticut Department of Social Services. Rest assured, all communications have been meticulously documented, encompassing dates, times, and the identities of the individuals engaged in these discussions.

I place my trust in your unwavering commitment to justice and fairness, confident that you will accord this matter the urgency and gravitas it demands, ensuring a

comprehensive investigation and the implementation of corrective measures. The equitable treatment of all service providers operating under the Connecticut Medicaid ABI Waiver Program is of utmost importance, and I am optimistic that your intervention will usher in a just resolution.

I am grateful for your time and thoughtful consideration of this crucial matter.

Sincerely,

David Medeiros

Best regards,

David Medeiros

David Medeiros
Founder, CEO, Director, Team Member
ABI Resources, LLC





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11/16/2023

Subject: Formal Complaint and Request for Immediate Clarification on
Unauthorized Care Management Consultation Services in ABI Waiver Program 1.

To: All pertinent departments within the state of Connecticut,

Connecticut Department of Social Services and Relevant Oversight Bodies

I am writing on behalf of ABI Resources to express grave concerns and urgently seek detailed clarification on practices we have observed within the Medicaid Acquired Brain Injury (ABI) Waiver Program, particularly in ABI Waiver Program 1. Our complaint specifically focuses on what appears to be an unauthorized provision of care management consultation services in Program 1, a practice traditionally and explicitly designated for Program 2 under existing guidelines. This letter outlines our observations, the potential negative impacts on our business operations and our consumers, and our urgent requests for resolution

Key concerns and grievances:

1. Unauthorized Consultation Services: The core of our concern lies in the apparent provision of care management consultation services to consumers in ABI Waiver Program 1. This practice is not authorized under the current program guidelines and represents a significant breach of protocol,

raising serious concerns about compliance and oversight within the program.

2. Lack of Clarity and Transparency in Program Administration: The sudden and unexplained introduction of these services in Program 1 has created an atmosphere of confusion and uncertainty. We seek immediate and detailed clarification from the Department on whether there have been any recent changes to the scope or administration of ABI Waiver Program 1 that would authorize such services.
3. Improper Recommendations for Program Transitions: Additionally, we have noted instances where care managers are inappropriately advising Program 1 consumers to transition to Program 2. This advice, given without proper authority or assessment, potentially disrupts the tailored care plans crucial for the recovery of individuals with acquired brain injuries.

In-Depth Analysis of Impact on ABI Resources and Consumers:

1. Operational and Strategic Challenges: The introduction of potentially unauthorized services has disrupted our strategic planning and operational execution. It has forced us to reevaluate our service delivery models and resource allocation, potentially leading to inefficiencies and diminished care quality.
2. Risk to Consumer Trust and Quality of Care: The ambiguity surrounding these services risks damaging the trust that consumers and their families have in the system. It raises concerns about the appropriateness of care

provided, which is essential for effective recovery and rehabilitation in ABI cases.

3. Market Imbalance and Competitive Disadvantage: This situation creates an unfair market environment. Providers adhering to the guidelines may be at a disadvantage compared to those who are offering these additional, potentially unauthorized services. This not only affects our competitive position but also skews the overall market dynamics in ABI care services.

Specific Requests for Resolution and Enhanced Transparency:

1. Comprehensive Investigation and Clear Communication: We request an immediate, comprehensive investigation into the provision of care management consultation services in ABI Waiver Program 1, accompanied by clear communication on any policy adjustments.
2. Immediate Enforcement of Compliance: We urge the prompt enforcement of existing program guidelines and the cessation of any unauthorized practices.
3. Proactive Support and Guidance for All Stakeholders: We advocate for the development of support and guidance initiatives for both service providers and consumers to navigate these changes effectively, ensuring everyone is fully informed about their rights and the services available.
4. Corrective Measures for Non-Compliance: Implementation of corrective actions, including disciplinary measures, against entities found in violation of program rules, to maintain the integrity and effectiveness of the program.

Conclusion:

ABI Resources is deeply committed to providing high-quality care within the ABI Waiver Program framework. The current situation, marked by potential unauthorized practices, poses significant challenges to our operations and the well-being of our consumers. We trust that the Connecticut Department of Social Services and relevant oversight bodies will address these issues with the urgency and thoroughness they demand, ensuring the program's integrity and efficacy. We look forward to a swift, detailed, and transparent response to this critical issue.

Call to Action:

I earnestly seek your prompt intervention and advocacy in ensuring this grievance is communicated to all pertinent departments within the state of Connecticut tasked with addressing such critical matters. The departments that ought to be immediately apprised of this situation include, but are not limited to:

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Connecticut Office of Policy and Management

I have proactively initiated complaints and have directly engaged with the Connecticut Department of Social Services. Rest assured, all communications have been meticulously documented, encompassing dates, times, and the identities of the individuals engaged in these discussions.

We urge the Connecticut Department of Social Services, alongside the Attorney General's Office, the Commission on Human Rights and Opportunities, the Office of the Healthcare Advocate, and the Office of Policy and Management, to address this grievance promptly. The issue at hand not only affects ABI Resources but also speaks to the larger matter of public trust and the accessibility of crucial healthcare information.

We anticipate a constructive and swift response to this urgent matter, underscoring the importance of transparency and accessibility in public services, especially those catering to vulnerable populations.

I place my trust in your unwavering commitment to justice and fairness, confident that you will accord this matter the urgency and gravitas it demands, ensuring a comprehensive investigation and the implementation of corrective measures. The equitable treatment of all service providers operating under the Connecticut Medicaid ABI Waiver Program is of utmost importance, and I am optimistic that your intervention will usher in a just resolution.

I am grateful for your time and thoughtful consideration of this crucial matter.

Best regards,

David Medeiros

David Medeiros

ABI Resources , CEO, Director, Team Member

ABI Resources





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11/16/2023

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

To: All pertinent departments within the state of Connecticut,

I am David Medeiros from ABI Resources, and I present this document to voice our serious concerns about certain activities within the Medicaid Acquired Brain Injury (ABI) Waiver program. These activities, which appear to breach ethical standards and potentially violate Medicaid regulations, require immediate scrutiny and action.

Examination of the ABI Waiver Program's Framework:

The ABI Waiver Program, established under sections 17b-260a-1 to 17b-260a-17 of the Connecticut State Agencies regulations, is designed to offer nonmedical, home, and community-based services to eligible individuals with an ABI. This program emphasizes the need for cost-effective services, personalized care, and adherence to strict qualifications for providers, ensuring that the services provided meet the highest ethical and professional standards.

Conflicts Arising from Service Provision:

Dual Service Conflict:

In the context of the ABI Waiver Program, a significant conflict has emerged due to an agency providing both Clinical Behavioral Therapy (CBT) and daily non-medical services to the same group of consumers. This situation raises several concerns:

Therapeutic Recommendations Overlapping with Financial Interests:

There is an apparent alignment of therapeutic recommendations with the agency's financial interests. The agency uses the platform of CBT sessions to recommend additional non-medical services that it also provides. This practice suggests a dual benefit for the agency, where it gains financially from both therapy sessions and the subsequent non-medical services.

Influence on Consumer Choice:

The dual role of the agency potentially influences consumer choice, where therapeutic sessions, which should be neutral and solely in the interest of the Consumer's health, may be used to steer consumers towards additional services provided by the same agency. This situation can lead to biased recommendations that may not always be in the best interest of the consumer.

Cycle of Service Provision and Financial Gain:

There is a creation of a cycle wherein the agency, through its provision of CBT, identifies or creates a need for additional services, fulfills these needs through its non-medical services arm, and consequently benefits financially. This cycle raises questions about the objectivity of the service recommendations and the potential for unnecessary or excessive services being provided.

Potential for Overutilization of Services:

This overlap in services could lead to overutilization, where consumers receive more services than are necessary, leading to increased costs for the Medicaid program.

Ethical Implications:

The practice blurs the lines between therapeutic need and financial gain, potentially compromising the ethical standards expected in healthcare and social service provision.

These concerns necessitate a thorough examination to ensure that services provided under the ABI Waiver Program are free from conflicts of interest, maintain the highest ethical standards, and truly serve the best interests of the consumers.

Manipulative Consumer Steering and Personnel Poaching:

Directing Consumer Choices:

The conduct of the agency's Clinical Behavioral Therapy (CBT) providers has raised significant concerns regarding the manipulation of Consumer choices. This issue manifests in several ways:

Targeted Referrals:

CBT providers are reportedly channeling consumers towards the agency's own non-medical services. This practice goes beyond the realm of impartial medical advice, as it systematically directs consumers to services that benefit the agency financially, rather than based on the unbiased assessment of Consumer needs.

Influence on Consumer Decision-Making:

This approach potentially undermines the autonomy of consumers in making informed decisions about their care. By directing consumers towards specific services, there's a risk that consumers are being provided a narrowed view of available options, influenced more by the agency's financial interests than by Consumer welfare.

Questionable Ethical Practices:

The behavior of these CBT providers raises ethical questions, particularly regarding the integrity of their recommendations. It potentially violates the principle of acting in the best interests of the Consumer, a cornerstone of healthcare and therapeutic professions.

Unfair Competitive Tactics:

The agency's practices extend beyond Consumer manipulation, affecting the broader operational dynamics within the industry:

Staff Poaching:

Reports indicate that the agency has engaged in poaching staff from other providers. This action not only disrupts the operations of other agencies but also indicates a strategic approach to weaken competition and consolidate the agency's position in the market.

Disruption of Industry Standards:

Such tactics contribute to an uneven playing field, where ethical providers adhering to fair hiring practices are disadvantaged. This behavior can lead to a destabilization of the market, with one agency gaining undue advantage and influence.

Impact on Service Quality:

The poaching of staff may lead to a shortage of skilled professionals in other agencies, potentially affecting the quality of care and services provided to consumers across the industry.

These practices of manipulative Consumer steering and personnel poaching call for an in-depth review to ensure that the ABI Waiver Program operates in a fair, ethical, and competitive environment, where Consumer welfare and industry standards are upheld.

Indicators of Potential Kickback Arrangements:

Referral for Incentives:

The relationships and interactions among the service provider, Clinical Behavioral Therapy (CBT) professionals, and care management consultants reveal possible mechanisms of kickback arrangements. This is characterized by:

Questionable Referral Patterns:

There appears to be a consistent pattern where CBT professionals and care management consultants funnel consumers to specific services offered by the agency. This pattern suggests a systematic approach to referrals that may not be solely based on Consumer needs but rather on underlying incentives.

Financial Incentives for Referrals:

The possibility that CBT professionals and care management consultants receive financial or other forms of incentives for directing consumers to the agency's services is a major concern. Such incentives could significantly compromise the

integrity of Consumer referrals, with decisions potentially driven by personal gain rather than Consumer welfare.

Cyclical Billing and Service Utilization:

The referral system seems to create a cyclical pattern of billing and service utilization, where Consumer needs are continuously identified and serviced within the same agency network, fostering an environment of repeated financial gain for the agency.

Impact on Medicaid Expenditures:

If these practices are occurring, they could lead to increased and potentially unnecessary Medicaid expenditures. Consumers may be receiving more services than medically necessary, or services that could be more effectively provided elsewhere, leading to inflated costs borne by the Medicaid program.

Ethical and Legal Implications:

Such kickback arrangements, if confirmed, would not only breach ethical standards but also could contravene legal statutes governing Medicaid and healthcare services. Kickbacks in healthcare are illegal and undermine the principle of fair competition and the integrity of patient care.

The existence of these indicators necessitates a thorough investigation to ascertain the presence of kickback arrangements and to evaluate their impact on the Medicaid program's ethical standards and financial integrity. It is imperative to ensure that all practices within the ABI Waiver Program align with legal and ethical guidelines, safeguarding the program's integrity and the wellbeing of its beneficiaries.

Impact on ABI Resources:

Revenue Reduction

Consumer Diversion Impact:

ABI Resources has experienced a significant downturn in revenue, which can be directly attributed to the diversion of consumers towards the agency in question. This diversion likely results from the alleged unethical steering and manipulative practices, leading to a reduced Consumer base for ABI Resources.

Financial Viability Threatened:

The reduction in revenue poses a threat to the financial viability and sustainability of ABI Resources, impacting our ability to provide quality care and services to our consumers.

Operational Cost Surge:

Increased Marketing Expenditures: In an effort to counteract the loss of consumers and to rebuild our Consumer base, ABI Resources has had to significantly increase our investment in marketing. These additional expenses are necessary to communicate our commitment to ethical practices and quality care to the community.

Legal and Consultation Fees:

Addressing these unethical practices and exploring legal avenues for recourse has led to increased spending on legal consultations and related services. These expenditures are essential for navigating the complexities of the situation and seeking justice, but they also divert resources from other operational areas.

Consumer Relationship Erosion:

Loss of Trust and Business: The most profound impact has been on our established Consumer relationships. The manipulative practices of the agency in question have led to a loss of trust among our consumers, as they are steered away from ABI Resources. This erosion of trust is deeply concerning, as it undermines the long-standing relationships we have built based on care, integrity, and ethical service provision.

Reputation Damage:

The wider implications of these practices in the industry have led to a tarnished reputation, not just for the agency in question, but for service providers in general, including ABI Resources. Restoring our reputation in the wake of these events is a significant challenge, requiring substantial effort and resources.

The cumulative effect of these impacts on ABI Resources is profound, affecting not just our financial stability but also our reputation and, most importantly, our ability to serve our consumers effectively. It is imperative that these issues are addressed comprehensively to restore the integrity of service provision within the ABI Waiver Program and to protect agencies like ours that are committed to ethical practices.

Formal Requests Thorough Examination and Compliance Review:

Comprehensive Investigation:

We formally request a complete and thorough examination of the outlined practices. This investigation should encompass all entities involved, including the service provider, CBT professionals, and care management consultants.

Medicaid Compliance Review:

A detailed review of Medicaid compliance is crucial to determine if these practices violate Medicaid regulations and standards.

Application of Corrective and Disciplinary Measures:

Immediate Corrective Action: Upon confirmation of these practices, we strongly advocate for swift implementation of corrective measures to address and rectify the identified issues.

Disciplinary Proceedings:

We also call for appropriate disciplinary actions against any parties found to be complicit in these unethical practices, in accordance with legal and regulatory guidelines.

Review and Revision of Policies and Oversight:

Policy Overhaul:

A comprehensive review and subsequent revision of existing policies within the ABI Waiver Program is necessary. This review should focus on closing loopholes that allow for such unethical practices and ensuring robust safeguards against future violations.

Enhanced Oversight Mechanisms:

We propose the establishment or enhancement of oversight mechanisms within the ABI Waiver Program to ensure ongoing compliance with ethical and legal standards.

In Closing:

The concerns we have raised in this document, if validated, point towards serious ethical lapses and potential legal infractions concerning Medicaid regulations. The very foundation of the ABI Waiver program, along with the trust placed in it by its beneficiaries, relies on prompt, effective, and transparent action from the Connecticut Department of Social Services.

We appreciate your attention to this urgent and significant matter and hope for a swift resolution that upholds the principles of justice and integrity.

Call to Action:

I earnestly seek your prompt intervention and advocacy in ensuring this grievance is communicated to all pertinent departments within the state of Connecticut tasked with addressing such critical matters. The departments that ought to be immediately apprised of this situation include, but are not limited to:

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Connecticut Attorney General's Office

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We anticipate a constructive and swift response to this urgent matter, underscoring the importance of transparency and accessibility in public services, especially those catering to vulnerable populations.

I place my trust in your unwavering commitment to justice and fairness, confident that you will accord this matter the urgency and gravitas it demands, ensuring a comprehensive investigation and the implementation of corrective measures. The equitable treatment of all service providers operating under the Connecticut Medicaid ABI Waiver Program is of utmost importance, and I am optimistic that your intervention will usher in a just resolution.

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Best regards,

David Medeiros

David Medeiros

ABI Resources , CEO, Director, Team Member

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11/20/2023

Subject Complaint and Request for Clarity Regarding Rental Agreements in the Medicaid ABI Waiver Program 1 and 2.

To: All pertinent departments within the state of Connecticut,

As a stakeholder in the Medicaid Acquired Brain Injury (ABI) Waiver Program, we, David Medeiros and ABI Resources, wish to raise a serious concern and request clarity regarding a critical issue impacting consumers and service providers within the program.

Key Grievance and Request:

We have observed a growing trend where consumers of the ABI Waiver Program are being locked into rental agreements with agency service providers or their business partners. These arrangements appear to significantly restrict consumer choice and freedom, creating a monopolistic environment detrimental to both consumers and independent service providers like ABI Resources.

Concerns:

Restricted Consumer Choice: Consumers are often coerced into staying with a particular agency due to fears of losing their housing, and belongings, or causing

inconvenience to roommates. This undermines the fundamental principle of consumer choice and control in the ABI Waiver Program.

Fear of Repercussions:

Many consumers feel trapped, unable to voice concerns about neglect or abuse due to the fear of losing their housing or facing other retaliatory actions.

Isolation from Advocacy and Assistance:

These rental agreements may isolate consumers from external resources and advocacy groups, further reducing their ability to seek help or change service providers.

Monopolistic Practices:

Such arrangements foster a monopolistic marketplace, hindering the ability of independent providers like ABI Resources to compete fairly and offer services to consumers.

Financial Concerns:

These rental agreements often involve dual payments - for waiver program services and rent - potentially leading to financial improprieties, especially when both payments are sourced from state or federal funding.

Request for Action:

Investigation into Legal and Ethical Violations:

We request a thorough investigation into these practices for potential violations of consumer rights, anti-trust laws, and Medicaid regulations.

Transparency and Regulatory Oversight:

There is a need for greater transparency and oversight in how rental agreements are managed within the ABI Waiver Program to ensure they do not conflict with program objectives or consumer rights.

Guidance and Policy Review:

We seek clear guidance on acceptable practices regarding rental agreements and the integration of housing with service provision.

Support for Affected Service Providers:

We request consideration of the adverse impact these practices have on service providers like ABI Resources, who strive to offer competitive and consumer-focused services.

Your prompt attention to this matter is crucial for maintaining the integrity of the ABI Waiver Program and the well-being of its consumers.

Indicators of Potential Kickback Arrangements:

Referral for Incentives:

The relationships and interactions among the service provider, and care management consultants reveal possible mechanisms of kickback arrangements.

This is characterized by:

Questionable Referral Patterns:

There appears to be a consistent pattern where care management consultants funnel consumers to specific services offered by the agency. This pattern suggests a systematic approach to referrals that may not be solely based on Consumer needs but rather on underlying incentives.

Financial Incentives for Referrals:

The possibility that professionals and care management consultants receive financial or other forms of incentives for directing consumers to the agency's services is a major concern. Such incentives could significantly compromise the integrity of Consumer referrals, with decisions potentially driven by personal gain rather than Consumer welfare.

Cyclical Billing and Service Utilization:

The referral system seems to create a cyclical pattern of billing, service utilization, and rental arrangements where consumer needs are continuously identified and serviced within the same agency network, fostering an environment of repeated financial gain for the agency.

Impact on Medicaid Expenditures:

If these practices are occurring, they could lead to increased and potentially unnecessary Medicaid expenditures. Consumers may be receiving more services than medically necessary, or services that could be more effectively provided elsewhere, leading to inflated costs borne by the Medicaid program.

Ethical and Legal Implications:

Such kickback arrangements, if confirmed, would not only breach ethical standards but also could contravene legal statutes governing Medicaid and healthcare services. Kickbacks in healthcare are illegal and undermine the principle of fair competition and the integrity of patient care.

The existence of these indicators necessitates a thorough investigation to ascertain the presence of kickback arrangements and to evaluate their impact on the Medicaid program's ethical standards and financial integrity. It is imperative to ensure that all practices within the ABI Waiver Program align with legal and ethical guidelines, safeguarding the program's integrity and the wellbeing of its beneficiaries.

Impact on ABI Resources:

Revenue Reduction

Consumer Diversion Impact:

ABI Resources has experienced a significant downturn in revenue, which can be directly attributed to the diversion of consumers towards the agencies in question. This diversion likely results from the alleged unethical steering and manipulative practices, leading to a reduced Consumer base for ABI Resources.

Financial Viability Threatened:

The reduction in revenue poses a threat to the financial viability and sustainability of ABI Resources, impacting our ability to provide quality care and services to our consumers.

Operational Cost Surge:

Increased Marketing Expenditures:

In an effort to counteract the loss of consumers and to rebuild our Consumer base, ABI Resources has had to significantly increase our investment in

marketing. These additional expenses are necessary to communicate our commitment to ethical practices and quality care to the community.

Legal and Consultation Fees:

Addressing these unethical practices and exploring legal avenues for recourse has led to increased spending on legal consultations and related services. These expenditures are essential for navigating the complexities of the situation and seeking justice, but they also divert resources from other operational areas.

Consumer Relationship Erosion:

Loss of Trust and Business:

The most profound impact has been on our established Consumer relationships. The manipulative practices of the agency in question have led to a loss of trust among our consumers, as they are steered away from ABI Resources. This erosion of trust is deeply concerning, as it undermines the long-standing relationships we have built based on care, integrity, and ethical service provision.

Reputation Damage:

The wider implications of these practices in the industry have led to a tarnished reputation, not just for the agency in question, but for service providers in general, including ABI Resources. Restoring our reputation in the wake of these events is a significant challenge, requiring substantial effort and resources.

The cumulative effect of these impacts on ABI Resources is profound, affecting not just our financial stability but also our reputation and, most importantly, our ability to serve our consumers effectively. It is imperative that these issues are addressed comprehensively to restore the integrity of service provision within the

ABI Waiver Program and to protect agencies like ours that are committed to ethical practices.

Formal Requests Thorough Examination and Compliance Review:

Comprehensive Investigation:

We formally request a complete and thorough examination of the outlined practices. This investigation should encompass all entities involved, including the agency service provider and care management consultants.

Medicaid Compliance Review:

A detailed review of Medicaid compliance is crucial to determine if these practices violate Medicaid regulations and standards.

Review and Revision of Policies and Oversight:

Policy Overhaul:

A comprehensive review and subsequent revision of existing policies within the ABI Waiver Program is necessary. This review should focus on closing loopholes that allow for such unethical practices and ensuring robust safeguards against future violations.

Enhanced Oversight Mechanisms:

We propose the establishment or enhancement of oversight mechanisms within the ABI Waiver Program to ensure ongoing compliance with ethical and legal standards.

In Closing:

The concerns we have raised in this document, if validated, point towards serious ethical lapses and potential legal infractions concerning Medicaid regulations. The very foundation of the ABI Waiver program, along with the trust placed in it by its beneficiaries, relies on prompt, effective, and transparent action from the Connecticut Department of Social Services.

We appreciate your attention to this urgent and significant matter and hope for a swift resolution that upholds the principles of justice and integrity.

Call to Action:

I earnestly seek your prompt intervention and advocacy in ensuring this grievance is communicated to all pertinent departments within the state of Connecticut tasked with addressing such critical matters. The departments that ought to be immediately apprised of this situation include, but are not limited to:

Connecticut Department of Social Services

Connecticut Attorney General's Office

Connecticut Commission on Human Rights and Opportunities

Connecticut Office of the Healthcare Advocate

Connecticut Office of Policy and Management

I have proactively initiated complaints and have directly engaged with the Connecticut Department of Social Services. Rest assured, all communications

have been meticulously documented, encompassing dates, times, and the identities of the individuals engaged in these discussions.

We urge the Connecticut Department of Social Services, alongside the Attorney General's Office, the Commission on Human Rights and Opportunities, the Office of the Healthcare Advocate, and the Office of Policy and Management, to address this grievance promptly. The issue at hand not only affects ABI Resources but also speaks to the larger matter of public trust and the accessibility of crucial healthcare information.

We anticipate a constructive and swift response to this urgent matter, underscoring the importance of transparency and accessibility in public services, especially those catering to vulnerable populations.

I place my trust in your unwavering commitment to justice and fairness, confident that you will accord this matter the urgency and gravitas it demands, ensuring a comprehensive investigation and the implementation of corrective measures. The equitable treatment of all service providers operating under the Connecticut Medicaid ABI Waiver Program is of utmost importance, and I am optimistic that your intervention will usher in a just resolution.

I am grateful for your time and thoughtful consideration of this crucial matter.

Best regards,

David Medeiros

David Medeiros

ABI Resources, CEO, Director, Team Member



Re: 12.14.2023 Urgent No Companion Authorizations Post-December 31st for Shared Consumers Medicaid ABI Waiver

ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>

Fri 12/15/2023 11:54 AM

To: Ronald Sturm <Ronald.Sturm@ctcommunitycare.org>; CTEVV@Gainwellgechnologies.com <CTEVV@Gainwellgechnologies.com>

Cc: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>

Would Gainwell please provide a status update?

Best regards,
David Medeiros
ABI Resources



From: Ronald Sturm <Ronald.Sturm@ctcommunitycare.org>

Sent: Thursday, December 14, 2023 3:37 PM

To: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>

Subject: RE: 12.14.2023 Urgent No Companion Authorizations Post-December 31st for Shared Consumers Medicaid ABI Waiver

Hi David,

For the consumers who are of concern here, you can reach out to CTEVV@Gainwellgechnologies.com to find out why the PAs in the Gainwell system are not in the Sandata system.

Thank you,

Ron

From: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>

Sent: Thursday, December 14, 2023 11:21 AM

To: Ronald Sturm <Ronald.Sturm@ctcommunitycare.org>

Subject: Re: 12.14.2023 Urgent No Companion Authorizations Post-December 31st for Shared Consumers Medicaid ABI Waiver

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe. (Review email address of sender to ensure it looks familiar and valid).

Document attached

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David Medeiros
ABI Resources



From: Ronald Sturm <Ronald.Sturm@ctcommunitycare.org>

Sent: Thursday, December 14, 2023 10:57 AM

To: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>

Subject: RE: 12.14.2023 Urgent No Companion Authorizations Post-December 31st for Shared Consumers Medicaid ABI Waiver

Could you provide me their names in a secure email?

Thank you,

Ron

Ronald Sturm, LMSW, MS, CBIS
Manager, Clinical Operations, ABI, PCA waiver
43 Enterprise Dr, Bristol, CT 06010-7472
860-257-1503 x4105

WWW.CTCOMMUNITYCARE.ORG

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Sent: Thursday, December 14, 2023 10:56 AM

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Consumers;

- EB
- AJ
- WL
- ES
- TM
- AV
- ZP

Best regards,
David Medeiros
ABI Resources



From: Ronald Sturm <Ronald.Sturm@ctcommunitycare.org>

Sent: Thursday, December 14, 2023 10:35 AM

To: ABI RESOURCES 860 942-0365 <aabiwr@live.com>

Subject: RE: 12.14.2023 Urgent No Companion Authorizations Post-December 31st for Shared Consumers Medicaid ABI Waiver

Good morning,

Could you please inform on who the clients are?

Thank you,

Ron

Ronald Sturm, LMSW, MS, CBIS
Manager, Clinical Operations, ABI, PCA waiver
43 Enterprise Dr, Bristol, CT 06010-7472
860-257-1503 x4105
WWW.CTCOMMUNITYCARE.ORG
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Subject: 12.14.2023 Urgent No Companion Authorizations Post-December 31st for Shared Consumers Medicaid ABI Waiver

Importance: High

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12.14.2023

Subject: Urgent: No Companion Authorizations Post-December 31st for shared consumers Medicaid ABI Waiver

Hello Ron,

I am reaching out concerning an important matter related to our shared consumers under CT Community Care.

It has come to our attention that there are no companion authorizations in place for these individuals after December 31st. This situation has been highlighted by Sandata, and as per their guidance, I am contacting you to seek clarity and a resolution.

The absence of these authorizations post the specified date could potentially disrupt the continuity and quality of care that we jointly strive to provide. Therefore, it is imperative that we address this matter promptly to ensure that our consumers continue to receive the necessary support without any hindrance.

Could you please provide us with detailed information regarding the status of these authorizations? Additionally, any steps that need to be taken from our end to expedite this process would be greatly appreciated.

12/15/23, 12:01 PM

Mail - ABI RESOURCES 860 942-0365 - Outlook

Understanding the critical nature of this issue, we are looking forward to your prompt response. Your assistance in this matter is crucial in helping us continue to provide exemplary care to our shared consumers.

Thank you in advance for your attention to this urgent matter.

Best regards,
David Medeiros
ABI Resources



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Thank you in advance for your attention to this urgent matter.

Best regards,
David Medeiros

ABI Resources



A.B.I. Resources LLC

39 Kings Highway, Suite C

Gales Ferry CT, 06335

Phone: (860) 942-0365

Fax: (860) 465-9591

<https://www.CTbrainINJURY.com>

Date: 12/15/2023

Office for Civil Rights

U.S. Department of Health & Human Services

200 Independence Avenue, S.W.

Room 509F, HHS Building

Washington, D.C. 20201

Complaint and Request for Federal Intervention and Support in Addressing Misconduct and Ensuring Accommodations for Self-Advocacy and Protection from Whistleblower Retaliations.

Dear Office for Civil Rights,

I am writing to lodge a formal complaint against Matthew S. Antonetti of the Connecticut Department of Social Services regarding his correspondence dated December 13, 2023. As a brain injury survivor and the founder of A.B.I. Resources LLC, I have faced significant challenges in advocating for myself, my business and the disabled population we serve. Mr. Antonetti's letter contains misleading, inaccurate, non-accommodating and intimidating statements that undermine my efforts and rights as a person living with a brain injury and as a whistleblower.

I request your assistance in ensuring fair treatment and accommodations, which are crucial for my effective communication and participation in these matters.

Additionally, I seek guidance and support from the federal government to uphold my rights to self-advocate, both as an individual with a disability, a whistleblower, and as a business owner.



It is imperative that government entities respect and facilitate the participation of individuals like me in matters affecting our lives and businesses. I am committed to advocating for transparency and accountability, and I believe the federal government's intervention is crucial in rectifying the current situation.

Thank you for your attention to this matter.

Best regards,
David Medeiros
David Medeiros
ABI Resources, CEO, Director, Team Member
Medicaid ABI Waiver Program Support Provider.





A.B.I. Resources LLC

39 Kings Highway, Suite C

Gales Ferry CT, 06335

Phone: (860) 942-0365

Fax: (860) 465-9591

<https://www.CTbrainINJURY.com>

Date: 12/18/2023

Connecticut Department of Social Services

Office of the Commissioner Andrea Barton Reeves

Connecticut Department of Commission on Human Rights and Opportunities.

And all Pertinent Departments with Connecticut gov.

Subject: New Complaint Addressing Systemic Injustice: Disability Discrimination and Whistleblower Retaliation Complaint.

I am writing to formally file a complaint of continued disability discrimination and whistleblower retaliation against myself, David Medeiros, and ABI Resources by the Connecticut Department of Social Services (DSS) and their systems.

1. Removal and premature closure of Sandata EVV Ticket #539494.

The recent incident involving the removal and premature closure of Sandata EVV Ticket #539494, without notification or consent, is a glaring example of this ongoing issue. This complaint, crucial to the operation and integrity of ABI Resources, was dismissed and marked as resolved, contrary to the actual unresolved status. This act not only undermines the trust and communication essential for our operations but also reflects a disturbing pattern of disregard for the rights and voices of those advocating for disability support services.

As you are aware there's a widespread problem related to the stop of companion authorizations within the Connecticut Departments of Social Services systems for consumers under the Medicaid ABI Waiver program

after December 31st, 2023 serviced by ABI Resources.

This situation may lead to a disruption in necessary support services for many Connecticut Medicaid Acquired Brain Injury (ABI) Waiver Program consumers.

2. Unauthorized alteration of ABI Resources' contact information.

Furthermore, the recent unauthorized alteration of ABI Resources' contact information in Sandata's system, which was only rectified after our proactive inquiry today, suggests a deliberate attempt to hinder our ability to receive critical information and engage in necessary advocacy. This action, coupled with the previous complaint's dismissal, points to a systemic issue of discrimination and retaliation that must be addressed immediately.

As a brain injury survivor, I find these actions by the Connecticut DSS not only professionally concerning but also personally disheartening. They represent a breach of trust, a violation of whistleblower protections, and a disregard for the rights of individuals with disabilities.

The Connecticut Department of Social Services must fix this wrongdoing now and protect and ensure the rights of people living with brain injuries and consumers of the Medicaid ABI Waiver Program.

I request a thorough and transparent investigation into these actions and insist on the implementation of measures to prevent recurrence. I also seek assurance that ABI Resources and I will not face further discriminatory practices or retaliatory actions for our advocacy and whistleblower activities.

I expect a prompt and constructive response to this complaint, along with a commitment to upholding the principles of fairness, transparency, and respect for the rights of all individuals, especially those with disabilities.

Best regards,
David Medeiros
David Medeiros
ABI Resources, CEO, Director, Team Member
Medicaid ABI Waiver Program Support Provider.



12/18/23, 9:46 AM

Mail - ABI RESOURCES 860 942-0365 - Outlook

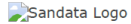
Re: CT DSS: No Authorization Scheduling-ABI RESOURCES 4103-Ticket 539494 ID: 539494 Account: [Sandata Technologies]

Lupson Pasteur (Sandata Technologies) <support@sandata.zendesk.com>

Mon 12/18/2023 9:15 AM

To: David Medeiros <aabiwr@live.com>

- Please type your reply above this line -##



PLEASE DO NOT FORWARD THIS EMAIL! Do not reply to this email unless it pertains to the issue referenced in this email.

Your request (539494) has been updated:

Lupson Pasteur (Sandata Technologies)

Dec 18, 2023, 9:15 AM EST

Heather and David,

I hope all is well. Please send me a screenshot of the authorization that shows in the state portal for each client showing the correct end date.

- Member Name:
- Member Medicaid ID:
- **ClientOtherID (Required in order to escalate):**
- Agency's AVRS ID Number:
- What Payor? Ct Medicaid Clinical/non clinical, MHW, Etc
- Member Authorization Number:
- Name of service code(s) missing:
- How many units/hours/visits:
- Dates of service(s) missing:
- Date Authorization Uploaded (Determination Date column in DSS Portal):
- Agency Confirmed Member in DSS Portal (Y/N):
- Client Eligibility in Portal- Agency should provide Verification Number in the Eligibility Verification Response field in portal:
- DSS Portal Status Column Reflects Approved or Auto-Approved (Y/N):
- Member Checked in EVV by Customer Care Agent (Y/N):

Thanks,

Check out Sandata on Demand (with the link below), your 24/7 resource to all things Sandata support! Review release notes, how to videos and other tips for using our software.

<https://sandata.zendesk.com/hc/en-us>

Lupson Pasteur

Specialist, Support-Tier 2

Sandata Technologies

[270 Duffy Avenue, Unit 266A, Hicksville, NY 11801](#)

Lupson Pasteur (Sandata Technologies)

Samantha Brown (Sandata Technologies)

Dec 14, 2023, 10:53AM EST

Thank you for contacting Sandata Customer Support today Heather.

We appreciate you taking the time to speak with us to resolve your issue with no authorization scheduling ticket [#539494](#).

- **Actions Taken**

- I advised Heather of why she was getting the authorization error when scheduling.

- **Next Steps**

- Heather should reach out to the case managers of the clients about the authorizations.

If you should have any additional issues or questions, please do not hesitate to reply back to this ticket!

Did you know that you can manage your tickets online and search for answers in real time? Visit us on Sandata on Demand at [Sandata.zendesk.com](https://sandata.zendesk.com) at any time for information about our products and answers to many of your questions. You can even submit your question right there on that site 24 hours a day.

You will receive a two-question satisfaction survey from Sandata in the next few hours. We hope that you will take a couple of minutes to let us know how we did today and what we can do to serve you even better in the future.

Thank you again and have a wonderful day!

-Sandata Customer Support

Samantha Brown

Tier I Support Specialist

Sandata Technologies

[270 Duffy Avenue, Unit 266A, Hicksville, NY 11801](#)

Please reach out to your designated Customer Care email group or your designated phone number if you have any questions or concerns.

Sincerely,

<https://outlook.live.com/mail/0/inbox/id/AQQkADAwATNiZmYAZC1hNTUAOC0wYjQ3LTAwAi0wMAoAEADi9Soz3yZhTqAamdViojif>

2/3

Re: CT DSS: No Authorization Scheduling-ABI RESOURCES 4103-Ticket 539494 ID: 539494 Account: [Sandata Technologies]

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Mon 12/18/2023 9:15 AM

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<https://sandata.zendesk.com/hc/en-us>

Lupson Pasteur

Specialist, Support-Tier 2

Sandata Technologies

[270 Duffy Avenue, Unit 266A, Hicksville, NY 11801](#)

Lupson Pasteur (Sandata Technologies)

Dec 18, 2023, 9:13 AM EST

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Thank you again and have a wonderful day!

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12/18/23, 9:46 AM

Mail - ABI RESOURCES 860 942-0365 - Outlook

Sandata Customer Support Team

Did you know that you can manage your tickets online and search for answers real time? Visit Sandata on Demand at <https://sandata.zendesk.com>. Jump right into helpful resources and support for home care, I/DD, and State EVV programs. Check it out now!

REMEMBER: If you are sending any attachments, screen shots, documents that may contain PHI/PII please be sure to encrypt this content. If you are unable to encrypt through your email system, we recommend submitting through our Sandata portal at Sandata.zendesk.com or uploading to our secure SendSafely site at: <https://sandata.sendsafely.com/dropzone/sendsafely/539494>

This email is a service from Sandata Technologies.

Re: 12.14.2023 Urgent No Companion Authorizations Post-December 31st for Shared Consumers Medicaid ABI Waiver

ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>

Fri 12/15/2023 11:54 AM

To: Ronald Sturm <Ronald.Sturm@ctcommunitycare.org>; CTEVV@Gainwellgechnologies.com <CTEVV@Gainwellgechnologies.com>

Cc: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>

Would Gainwell please provide a status update?

Best regards,
David Medeiros
ABI Resources



From: Ronald Sturm <Ronald.Sturm@ctcommunitycare.org>

Sent: Thursday, December 14, 2023 3:37 PM

To: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>

Subject: RE: 12.14.2023 Urgent No Companion Authorizations Post-December 31st for Shared Consumers Medicaid ABI Waiver

Hi David,

For the consumers who are of concern here, you can reach out to CTEVV@Gainwellgechnologies.com to find out why the PAs in the Gainwell system are not in the Sandata system.

Thank you,

Ron

From: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>

Sent: Thursday, December 14, 2023 11:21 AM

To: Ronald Sturm <Ronald.Sturm@ctcommunitycare.org>

Subject: Re: 12.14.2023 Urgent No Companion Authorizations Post-December 31st for Shared Consumers Medicaid ABI Waiver

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe. (Review email address of sender to ensure it looks familiar and valid).

Document attached

Best regards,
David Medeiros
ABI Resources



From: Ronald Sturm <Ronald.Sturm@ctcommunitycare.org>

Sent: Thursday, December 14, 2023 10:57 AM

To: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>

Subject: RE: 12.14.2023 Urgent No Companion Authorizations Post-December 31st for Shared Consumers Medicaid ABI Waiver

Could you provide me their names in a secure email?

Thank you,

Ron

Ronald Sturm, LMSW, MS, CBIS
Manager, Clinical Operations, ABI, PCA waiver
43 Enterprise Dr, Bristol, CT 06010-7472
860-257-1503 x4105

WWW.CTCOMMUNITYCARE.ORG

[FOLLOW US ON FACEBOOK](#)



From: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>

Sent: Thursday, December 14, 2023 10:56 AM

To: Ronald Sturm <Ronald.Sturm@ctcommunitycare.org>

Subject: Re: 12.14.2023 Urgent No Companion Authorizations Post-December 31st for Shared Consumers Medicaid ABI Waiver

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Consumers;

- EB
- AJ
- WL
- ES
- TM
- AV
- ZP

Best regards,
David Medeiros
ABI Resources



From: Ronald Sturm <Ronald.Sturm@ctcommunitycare.org>

Sent: Thursday, December 14, 2023 10:35 AM

To: ABI RESOURCES 860 942-0365 <aabiwr@live.com>

Subject: RE: 12.14.2023 Urgent No Companion Authorizations Post-December 31st for Shared Consumers Medicaid ABI Waiver

Good morning,

Could you please inform on who the clients are?

Thank you,

Ron

Ronald Sturm, LMSW, MS, CBIS
Manager, Clinical Operations, ABI, PCA waiver
43 Enterprise Dr, Bristol, CT 06010-7472
860-257-1503 x4105
WWW.CTCOMMUNITYCARE.ORG
[FOLLOW US ON FACEBOOK](#)



From: ABI RESOURCES 860 942-0365 <aabiwr@live.com>

Sent: Thursday, December 14, 2023 10:33 AM

To: Ronald Sturm <Ronald.Sturm@ctcommunitycare.org>

Subject: 12.14.2023 Urgent No Companion Authorizations Post-December 31st for Shared Consumers Medicaid ABI Waiver

Importance: High

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe. (Review email address of sender to ensure it looks familiar and valid).

12.14.2023

Subject: Urgent: No Companion Authorizations Post-December 31st for shared consumers Medicaid ABI Waiver

Hello Ron,

I am reaching out concerning an important matter related to our shared consumers under CT Community Care.

It has come to our attention that there are no companion authorizations in place for these individuals after December 31st. This situation has been highlighted by Sandata, and as per their guidance, I am contacting you to seek clarity and a resolution.

The absence of these authorizations post the specified date could potentially disrupt the continuity and quality of care that we jointly strive to provide. Therefore, it is imperative that we address this matter promptly to ensure that our consumers continue to receive the necessary support without any hindrance.

Could you please provide us with detailed information regarding the status of these authorizations? Additionally, any steps that need to be taken from our end to expedite this process would be greatly appreciated.

12/15/23, 12:01 PM

Mail - ABI RESOURCES 860 942-0365 - Outlook

Understanding the critical nature of this issue, we are looking forward to your prompt response. Your assistance in this matter is crucial in helping us continue to provide exemplary care to our shared consumers.

Thank you in advance for your attention to this urgent matter.

Best regards,
David Medeiros
ABI Resources





A.B.I. Resources LLC

39 Kings Highway, Suite C

Gales Ferry CT, 06335

Phone: (860) 942-0365

Fax: (860) 465-9591

<https://www.CTbrainINJURY.com>

Date: 12/17/2023

Dear FOIA Officer,

I am writing under the Freedom of Information Act (5 U.S.C. 552) to request access to and copies of all detailed records of communications and interactions between various state and federal officials, including but not limited to all records, reports, documents, and communications concerning but not limited to:

Disability civil rights grievances, complaints, whistleblower complaints or retaliation, and resolution outcomes, Medicaid federal funding, and FOIA freedom of information requests both state and federal, as well as tips and watchdog submissions reports.

- The legal case of David Medeiros v. State of CT, Department of Social Services, CHRO No. 2410220.'
- Whistleblower Report, Comprehensive Grievance Report and Request for Clarity. Addressing Issues within the Connecticut Medicaid Acquired Brain Injury (ABI) Waiver Program. Whistleblower Report Prepared by:

David Medeiros and ABI Resources LLC

Date: November 21, 2023

ABI Resources LLC

39 Kings Hwy STE C

Gales Ferry, CT. 06226

860 942-0365

These records are crucial for understanding the dynamics of interactions with these key figures in the context of disability rights and whistleblower protections.

Documentation from Federal and State Department Executives and Associated staff:

- Connecticut Department of Social Services Commissioner Andrea Barton Reeves
- U.S. Senators Richard Blumenthal and Chris Murphy
- U.S. House Representatives John Larson, Joe Courtney, Rosa DeLauro, Jim Himes, and Jahana Hayes
- Connecticut Governor Ned Lamont
- Lieutenant Governor Susan Bysiewicz
- Secretary of State Denise Merrill
- Attorney General William Tong
- State Treasurer Shawn Wooden
- State Comptroller Kevin Lembo
- State Auditors John Geragosian and Rob Kane
- U.S. Department of Health and Human Services (HHS) Secretary Xavier Becerra
- Centers for Medicare & Medicaid Services (CMS) Administrator Chiquita Brooks-LaSure
- U.S. Department of Justice (DOJ) Attorney General Merrick Garland
- U.S. Equal Employment Opportunity Commission (EEOC) Chair Charlotte A. Burrows
- Office of Special Counsel (OSC) Special Counsel Henry J. Kerner
- Office for Civil Rights (OCR) at HHS Acting Director Melanie Fontes Rainer
- The Department of Labor DOL
- Government Accountability Office GAO
- Connecticut General Assembly CGA

As well as communication with recognized esteemed organizations.

National and International Organizations:

- American Association of People with Disabilities (AAPD)
- The Consortium for Citizens with Disabilities (CCD)
- Disability Rights Education and Defense Fund (DREDF)
- Disabled in Action (DIA)
- Equip for Equality
- National Disability Rights Network (NDRN)
- National Council on Independent Living (NCIL)
- Disability Rights Advocates (DRA)

National Whistleblower / Retaliation Advocates

- Government Accountability Project (GAP)
- The Whistleblower Project
- ExposeFacts
- Freedom of the Press Foundation
- National Whistleblower Center
- Project On Government Oversight (POGO)
- Public Employees for Environmental Responsibility (PEER)
- Whistleblower Aid

News Media Outlets and Journalists:

Reporters Committee for Freedom of the Press, The New York Times, The Washington Post The Associated Press (AP), ProPublica, The Wall Street Journal, National Public Radio (NPR) Reuters, CNN, BuzzFeed News, VICE News, Fox News etc.

Expedited Processing Request:

Due to the legal case of David Medeiros v. State of CT, Department of Social Services, CHRO No. 2410220, I request expedited processing as this information is urgently needed for public knowledge on this significant matter.

Format of Records:

As a result of my disability, I kindly request accommodations, Please provide all records in an accessible electronic format, in accordance with the Americans with Disabilities Act (ADA).

Unique Nature of Request:

This request is unique due to its comprehensive scope and relevance to ongoing public and legal discussions.

Contact Information of FOIA Officer:

I request the contact details of the FOIA officer responsible for this request.

If any part of this request is denied, please cite the specific exemptions and provide appeal procedures under the law.

Thank you for your prompt attention to this matter.

Best regards,
David Medeiros
David Medeiros
ABI Resources, CEO, Director, Team Member
Medicaid ABI Waiver Program Support Provider.





A.B.I. Resources LLC

39 Kings Highway, Suite C

Gales Ferry CT, 06335

Phone: (860) 942-0365

Fax: (860) 465-9591

<https://www.CTbrainINJURY.com>

Date: 12/16/2023

Connecticut Commission on Human Rights and Opportunities (CHRO) Capitol
Region Office
450 Columbus Boulevard, Suite 2
Hartford, CT 06103-1835

Subject: **Submission of a Secondary, Distinct Complaint.**

Complaint Against Connecticut CHRO for Disability Discrimination and
Whistleblower Retaliations. RE: David Medeiros v. State of CT, Department of
Social Services CHRO No. 2410220
EEOC No. N/A

Dear CHRO and Connecticut Government Officials,

I am writing as both the complainant and a victim of the inaction perpetuated by the Connecticut Commission on Human Rights and Opportunities (CHRO) concerning my complaint filed on March 28, 2023. After 262 days without proper accommodation or support, I received a letter dated December 15, 2023, acknowledging an administrative delay without providing a substantive resolution or accommodation.

As a brain injury survivor and the founder of ABI Resources, my ability to function effectively in both personal advocacy and professional capacity has been significantly compromised. The CHRO's lack of action is not merely unacceptable; it represents a systemic failure to uphold the legal mandates designed to protect individuals in my position.

The CHRO's inaction is demonstrative of:

Violation of the ADA's Mandate:

The inexplicable delay in processing my complaint directly violates the ADA's requirements for prompt resolution, thereby discriminating against me based on my disability.

Failure to Provide Accommodations:

The inadequate response in providing the accommodations to which I am legally entitled has critically hampered my ability to participate in legal proceedings and advocate effectively.

Erroneous documentation, including the misidentification of state officials, undermines the integrity and reliability of CHRO's records and processes.

Systemic Disregard:

The pattern of inaction suggests a systemic disregard for the rights of individuals with disabilities and whistleblowers such as myself, calling for an immediate and thorough examination.

Given these points, I am compelled to demand the following:

An External Audit: A comprehensive external audit of the CHRO's handling of my case, including a review of procedures and accommodations for individuals with disabilities and whistleblowers.

ADA Accommodations: Immediate provision of the accommodations to which I am entitled under federal and state law, ensuring my full and fair participation in the complaint process.

Public Formal Apology and Reparations: A formal public acknowledgment of the hardships imposed by the CHRO's negligence and a discussion of reparations for the

significant personal and professional toll it has taken on me as a person living with a brain injury advocating for myself, ABI resources and the Connecticut disabled community at large.

The gravity of these issues and their impact on my civil rights require urgent and decisive action. An affirmative response is expected promptly detailing the CHRO's corrective measures.

Call for Accountability and Action for Disability Discrimination and Communication Barriers

I must again express my profound concern and distress regarding the Connecticut Government's inaction and the barriers I face as a brain injury survivor. It is disheartening and unacceptable that the government, well aware of the cognitive challenges associated with brain injuries, has failed to provide the necessary support and accommodations required for fair and effective communication.

Brain injuries can lead to a myriad of cognitive difficulties, which I experience daily. These include, but are not limited to:

Memory Impairments: Difficulty in recalling information, which can lead to challenges in following through with complex procedures or remembering important dates and instructions.

Attention Deficits: Problems with concentration and being easily overwhelmed by excessive information or convoluted language, hindering the understanding of critical communications.

Executive Dysfunction: Trouble with planning, organizing, and executing tasks, which is exacerbated by the government's convoluted self-advocacy bureaucratic processes.

Language and Communication Issues: Difficulties in understanding or expressing

oneself, especially when faced with intricate legal jargon and lengthy documents.

Processing Speed Delays: Slowed cognitive processing, making it hard to keep up with time-sensitive matters and requiring additional time to understand and respond to information.

Fatigue: Increased cognitive fatigue from trying to navigate complex systems, which can lead to reduced capacity to engage with necessary processes effectively.

The government's lack of action not only overlooks these challenges but seems to exploit them by failing to provide clear, concise, and accessible communication. This approach effectively discriminates against individuals with disabilities like me by creating an environment where they cannot participate fully in their advocacy or seek justice on an equal footing.

The expectation is not just for reasonable accommodations but for proactive measures that ensure communications and processes are fair and accessible. I am urging the Connecticut Government to review its procedures and communication strategies to ensure they align with the principles of the Americans with Disabilities Act (ADA) and respect the rights and needs of brain injury survivors.

Immediate action is required to remedy this situation. The government must:

Implement clear and straightforward communication protocols.

Provide all information in accessible formats, with consideration for cognitive challenges.

Establish a direct and reliable point of contact for assistance in navigating government processes.

Ensure that all government employees interacting with the public are trained in disability awareness and ADA compliance.

The state's failure to act is not only a disservice to individuals with disabilities but a disregard for the values of inclusivity and accessibility. As a brain injury survivor, I implore the Connecticut Government to take immediate steps to correct these oversights and to foster an environment where all citizens are given the tools to participate fully in civic life.

I am requesting that the Connecticut government body protect and ensure my rights and the rights of people like me living with disabilities. Connecticut must take legal action to enforce and ensure compliance with the ADA and protect my rights as a disabled Connecticut brain injury survivor, and founder of ABI Resources in addition to protecting my rights as a whistleblower.

It is imperative that government entities respect and facilitate the participation of individuals like me in matters affecting our lives and businesses. I am committed to advocating for transparency and accountability, and the government's intervention is crucial in rectifying the current situation.

Thank you for your attention to this matter.

Best regards,
David Medeiros
David Medeiros
ABI Resources, CEO, Director, Team Member
Medicaid ABI Waiver Program Support Provider.





State of Connecticut
COMMISSION ON HUMAN RIGHTS AND OPPORTUNITIES

Capitol Region Office ~ 450 Columbus Boulevard, Suite 2, Hartford, CT 06103

Promoting Equality and Justice for all People

December 15, 2023

Via email: aabiwr@live.com

David Medeiros
215 Mountain Street
Willimantic, CT 06226

RE: David Medeiros v. State of CT, Department of Social Services
CHRO No. 2410220
EEOC No. N/A

Dear Mr. Medeiros:

This letter confirms that your complaint, referenced above, has been filed with the Commission on March 28, 2023, but due to an administrative error the service was delayed, the Commission apologizes for any inconvenience this may have caused you.

The enclosed General Notice advises you of your rights, duties, and responsibilities. **Please read carefully the information contained in the notice.**

You have a duty to respond timely to any information or assistance requested and to cooperate with the Commission at all times. It is your sole duty and responsibility to notify the Commission of your whereabouts at all times throughout the pendency of this complaint. In the event that your address, telephone number, or email address changes, it is your duty to notify the Commission immediately in writing. **Parties are encouraged to submit all filings by email only without an additional hardcopy if possible. Emailed filings with Capitol Region Office should be emailed to CHRO.Capitol@ct.gov.**

Also, you have a duty to certify to the Commission that you have provided the Respondent with copies of all documents you file with the Commission. For your convenience and use, the enclosed Certification Form is made available.

If I can be of further assistance, please do not hesitate to contact me.

NO NAME

Commission on Human Rights and Opportunities
Capitol Region Office
450 Columbus Boulevard, Suite 2
Hartford, CT 06103
860-541-3456

Main (860) 566-7710 ~ Fax (860) 566-1997
www.ct.gov/chro - Toll Free in Connecticut (800) 477-8737
Affirmative Action/Equal Opportunity Employer



State of Connecticut
COMMISSION ON HUMAN RIGHTS AND OPPORTUNITIES

Capitol Region Office ~ 450 Columbus Boulevard, Suite 2, Hartford, CT 06103

Promoting Equality and Justice for all People

December 15, 2023

NOT THE COMMISSIONER

Via email: deidre.gifford@ct.gov

Diedre S. Gifford, MD, MPH
Commissioner
Department of Social Services
55 Farmington Avenue
Hartford, CT 06105

RE: David Medeiros v. State of CT, Department of Social Services
CHRO No. 2410220
EEOC No. N/A

Dear Commissioner Gifford:

A complaint, referenced above, has been filed with the Commission on March 28, 2023, but due to an administrative error the service was delayed, the Commission apologizes about any inconvenience this may have caused the Respondent. A copy of the complaint is attached.

The enclosed General Notice advises you of your rights, duties, and responsibilities. Please read carefully the information contained in the notice. The enclosed Notice Regarding Out of State Attorneys advises that all attorneys practicing before the Commission must be admitted to practice law in Connecticut and that it is the responsibility of all counsel to comply with Connecticut practice rules. Also enclosed is important information with respect to the no fault conciliation process. The Commission is available to assist you if you wish to pursue settlement of this complaint. If you wish to conciliate the complaint prior to providing an answer, you must notify the Commission within **10 days** of receipt of the enclosed complaint.

You must file an answer to the complaint under oath with the Commission within 30 days of receipt of this complaint unless pre-answer conciliation has been requested. If you fail to answer the complaint within this time, you may be defaulted by the Commission. Parties are encouraged to submit all filings by email only without an additional hardcopy if possible. You must email a scanned copy of your signed and notarized Answer to chro.capitol@ct.gov and dedra.morris@ct.gov.

Main (860) 566-7710 ~ Fax (860) 566-1997
www.ct.gov/chro - Toll Free in Connecticut (800) 477-8737
Affirmative Action/Equal Opportunity Employer

Comprehensive Grievance Report and Request for Clarity.

**Addressing Issues within the Connecticut Medicaid
Acquired Brain Injury (ABI) Waiver Program.**



Whistleblower Report Prepared by:

David Medeiros and ABI Resources LLC

Date: November 21, 2023

**ABI Resources LLC
39 Kings Hwy STE C
Gales Ferry, CT. 06226
860 942-0365**

Introduction

Title: Comprehensive Grievance Report and Request for Clarity / Whistleblower Report, ABI Resources LLC

Date: November 21, 2023

Prepared by: David Medeiros and ABI Resources LLC

Overview of ABI Resources LLC:

ABI Resources LLC, a dedicated service provider within the Connecticut Medicaid Acquired Brain Injury (ABI) Waiver Program, is committed to delivering exceptional care to individuals with acquired brain injuries. Our mission is to ensure effective rehabilitation and community reintegration for our clients through specialized programs.

Purpose of the Document:

This report is a formal consolidation of grievances faced by ABI Resources LLC within the Connecticut Medicaid ABI Waiver Program. It aims to address these concerns with the relevant authorities, advocating for change and improvement.

Summary of Grievances

1. **Discriminatory Business Practices**: ABI Resources LLC has faced inequities in Medicaid referrals, experiencing marginalization and an unfair distribution of referrals.
2. **Service and Intervention Plans**: Concerns about non-receipt of essential service and intervention plans, impacting operational and financial integrity.
3. **Concealment of Public Information**: The Medicaid ABI Waiver Program Directory of Providers has been concealed, affecting the ability of individuals to make informed decisions and impacting ABI Resources.
4. **Unauthorized Care Management Services**: Issues regarding unauthorized provision of care management consultation services in ABI Waiver Program 1.
5. **Unethical Practices and Possible Kickback Schemes**: Concerns about conflicts of interest and unethical practices, including potential kickback arrangements.
6. **Rental Agreements in Medicaid ABI Waiver Program**: Issues regarding rental agreements that restrict consumer choice and freedom, creating a monopolistic environment.

Detailed Grievances and Concerns

Grievance 1: Discriminatory Unfair Business Practices

- Page 7
- **Overview:** ABI Resources LLC has faced significant challenges due to inequitable Medicaid referral processes. Specific instances include a noticeable decrease in referrals compared to other providers, suggesting a biased distribution that disadvantages our clients and organization.
- **Proposed Solutions:** We advocate for a transparent, equitable referral system, periodic audits of referral practices, and a review of policies to ensure fair treatment of all service providers in the ABI Waiver Program.

Grievance 2: Service and Intervention Plans

- **Overview:** There have been instances where ABI Resources LLC did not receive essential service and intervention plans on time. This lack of timely information compromises our ability to provide effective care and maintain financial integrity.
- **Proposed Solutions:** Implementation of a streamlined, reliable process for the timely delivery of service and intervention plans, and clear communication channels between providers and program administrators.

Grievance 3: Concealment of Public Information

- **Overview:** The Medicaid ABI Waiver Program Directory of Providers has not been made adequately available, limiting the ability of individuals to make informed choices and affecting our visibility in the program.

- **Proposed Solutions:** Ensure the directory is publicly accessible, regularly updated, and transparent, allowing clients to make informed choices about their care providers.

Grievance 4: Unauthorized Care Management Services

- **Overview:** Concerns about unauthorized provision of care management consultation services in ABI Waiver Program 1, which may contravene established protocols.
- **Proposed Solutions:** Investigate and rectify instances of unauthorized services, and reinforce compliance with program guidelines and standards.

Grievance 5: Unethical Practices and Possible Kickback Schemes

- **Overview:** Alarming indications of conflicts of interest and unethical practices within the program, including potential kickback arrangements, have been observed.
- **Proposed Solutions:** Conduct a thorough investigation into these practices, establish stricter oversight mechanisms, and enforce ethical standards across the program.

Grievance 6: Rental Agreements in Medicaid ABI Waiver Program

- **Overview:** The current structure of rental agreements within the program restricts consumer choice and freedom, creating a monopolistic environment detrimental to clients and providers.
- **Proposed Solutions:** Review and revise rental agreement policies to promote fair competition and consumer choice, ensuring transparency and ethical practice in housing arrangements.

Call to Action and Recommendations

Immediate Actions Required

1. **Review of Referral Processes:** An immediate audit and review of the referral processes within the Connecticut Medicaid ABI Waiver Program to ensure fairness and transparency.
2. **Timely Delivery of Service Plans:** Establish protocols to guarantee the timely delivery of service and intervention plans to all providers.
3. **Accessibility of Provider Directory:** Immediate action to make the ABI Waiver Program's Provider Directory fully accessible and transparent to clients and providers.

Long-term Systemic Recommendations

1. **Policy Overhaul:** A comprehensive review and overhaul of policies governing referral processes, service plan distributions, and care management services.
2. **Enhanced Oversight and Accountability:** Implementing stricter oversight mechanisms and accountability measures to prevent unethical practices and potential conflicts of interest.
3. **Consumer Choice in Rental Agreements:** Reforming rental agreement policies to promote fair competition, consumer choice, and transparency within the program.

These actions and reforms are vital for maintaining the integrity of the Connecticut Medicaid ABI Waiver Program and ensuring equitable treatment and high-quality care for all clients.

Conclusion

This report, prepared by David Medeiros and ABI Resources LLC, comprehensively outlines several critical grievances faced within the Connecticut Medicaid ABI Waiver Program. These issues, ranging from discriminatory business practices to the concealment of public information, unauthorized services, and potential unethical practices, significantly impact the quality of care provided to individuals with acquired brain injuries and the operational integrity of service providers like ABI Resources LLC.

The call for action is clear and urgent. Immediate steps, as outlined in this report, are necessary to address these grievances, followed by a commitment to long-term systemic improvements. Only through transparent, fair, and ethical practices can the program truly fulfill its mission of supporting and rehabilitating individuals with acquired brain injuries.

We urge the responsible authorities to consider these grievances seriously and take prompt, effective action. The wellbeing of many individuals and the effectiveness of the ABI Waiver Program depend on these crucial improvements.



A.B.I. Resources LLC

39 Kings Highway, Suite C

Gales Ferry CT, 06335

Phone: (860) 942-0365

Fax: (860) 465-9591

<https://www.CTbrainINJURY.com>

10/31/2023

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

To: All pertinent departments within the state of Connecticut,

I trust this correspondence reaches you in excellent health and high spirits. My name is David Medeiros, and I am addressing you in my capacity as a concerned business owner, resident, and individual with a disability residing in the state of Connecticut. I have the honor of leading ABI Resources, a distinguished service provider within the Connecticut Medicaid Acquired Brain Injury (ABI) Waiver Program.

I find myself compelled to highlight and formally complain about a series of blatant and persistent inequities pertaining to discriminatory business practices occurring under the aegis of the aforementioned program. Despite my multiple, concerted efforts to engage in constructive dialogue with the Connecticut Department of Social Services, addressing these grave concerns has been met with a disconcerting lack of engagement and rectification. This situation has had a deleterious impact not only on the operations of ABI Resources but also on the well-being and quality of service accessible to the disabled individuals we are committed to serving.

Key Concerns and Grievances:

a) **Medicaid Referrals:**

b) **Paying Consumers / Financial Incentives Inducements / Medicaid Service Agency**

a) **Medicaid Referrals:**

There is a prevailing lack of transparency and an apparent bias in the Medicaid referral processes within the ABI Waiver Program. ABI Resources, despite an unwavering commitment to excellence in service delivery, has been unfairly marginalized, resulting in an unequal and unjust distribution of referrals.

Addressing issues of transparency, bias, and unfair marginalization in Medicaid referrals, particularly within the Acquired Brain Injury (ABI) Waiver Program, is crucial to ensuring equitable access to quality healthcare services for all eligible individuals. ABI Resources and similar service providers play a vital role in supporting individuals with acquired brain injuries, and it is essential that they are treated fairly in the referral process to continue their commitment to excellence in service delivery.

Potential Steps to Address the Issue:

Increase Transparency:

Implement a transparent referral process where criteria for referrals are clearly defined and made publicly available.

Establish a monitoring system to track and publish referral data, including the number of referrals made to each service provider and the reasons for referral decisions.

Conduct an Independent Audit:

Hire an independent entity to conduct a thorough review of the Medicaid referral processes within the ABI Waiver Program to identify any biases or unfair practices.

The audit should also evaluate the performance and quality of services provided by ABI Resources and other service providers to ensure that referrals are based on merit and the ability to meet the needs of individuals with acquired brain injuries.

Implement a Fair and Equitable Referral System:

Develop a standardized and objective referral system that ensures all service providers are evaluated based on the same criteria.

Consider incorporating a randomized component to the referral process to prevent bias and ensure a fair distribution of referrals.

Engage Stakeholders:

Create a platform for open dialogue between Medicaid officials, service providers, individuals with acquired brain injuries, and their families to discuss concerns related to the referral process.

Use feedback from stakeholders to continuously improve the referral system and address any emerging issues.

Provide Training and Education:

Offer training to Medicaid officials and other stakeholders involved in the referral process to raise awareness about potential biases and the importance of a fair and equitable system.

Educate service providers about the referral process, criteria for referrals, and steps they can take if they believe they have been treated unfairly.

Establish a Complaint and Appeal Process:

Create a clear and accessible complaint and appeal process for service providers who believe they have been unfairly marginalized in the referral process.

Ensure that complaints are thoroughly investigated and that corrective action is taken when warranted.

Promote Accountability:

Hold Medicaid officials and other stakeholders accountable for ensuring a fair and transparent referral process.

Implement consequences for individuals or entities found to be engaging in biased or unfair practices.

Regularly Review and Update Policies:

Conduct regular reviews of referral policies and procedures to ensure they remain up-to-date, fair, and transparent.

Update policies as needed to address any identified issues and to adapt to changing needs and circumstances.

Addressing the issues of transparency, bias, and unfair marginalization in Medicaid referrals within the ABI Waiver Program is essential to ensuring that all eligible individuals have equal access to high-quality services. It is imperative that service providers like ABI Resources are treated fairly and equitably in the referral process to uphold the integrity of the healthcare system and to foster trust among all stakeholders. Implementing the above steps could contribute significantly to creating a more transparent, fair, and equitable referral system, ultimately benefiting individuals with acquired brain injuries and the service providers dedicated to supporting them.

b) Paying Consumers / Financial Incentives Inducements / Medicaid Service Agency

Provider: A Medicaid service agency provider is offering financial incentives to consumers, leading to an imbalance in the competitive landscape. This kind of practice can indeed raise serious ethical, legal, and fairness concerns.

Ethical Concerns:

Conflicts of Interest: Financial incentives could create a conflict of interest, where the provider's financial gain takes precedence over the best interests of the consumer.

Bias and Unfairness: It could lead to bias in referrals, favoring certain providers over others irrespective of the quality of services they offer.

Erosion of Trust: Such practices can erode trust in the Medicaid system and healthcare providers, as consumers may question the motives behind the services they are being referred to.

Legal Concerns:

Violation of Anti-Kickback Statutes: Providing inducements to influence the referral of services covered by Medicaid can violate anti-kickback statutes, potentially leading to legal actions and penalties.

False Claims Act Violations: If such inducements lead to fraudulent billing or claims, it could result in violations of the False Claims Act.

Non-Compliance with Medicaid Regulations: Medicaid has strict guidelines and regulations to ensure fairness and prevent fraud, and engaging in such practices can result in non-compliance and potential debarment from the program.

Lack of Responsiveness to Complaints and Reports: Our persistent complaints and reports, meticulously documenting these issues, have been met with apathy. There is an alarming deficit in the investigation, redressal, and accountability mechanisms within the system.

Adverse Impacts on ABI Resources:

Financial Duress: The discriminatory practices and referral shortages have placed ABI Resources under significant financial duress, compromising our ability to maintain operational viability and deliver superior services to our clients.

Reputational Harm: The state's nonintervention and perceived partiality have led to an erosion of our reputation. This has resulted in ABI Resources being unjustly perceived as a less favorable service provider, regardless of our commitment to quality and excellence.

Demoralization of Workforce: The protracted nature of these issues has led to a pervasive sense of demoralization among our staff and stakeholders, adversely impacting the morale and efficacy of our organizational operations.

Addressing the Issue:

Regulatory Oversight: There should be strict oversight and monitoring by regulatory bodies to ensure that all Medicaid service agency providers are complying with laws and regulations.

Transparency: Increasing transparency in the referral process can help in ensuring that referrals are made based on the quality of services rather than financial incentives.

Whistleblower Protections: Encouraging whistleblowing and providing protections for whistleblowers can help in uncovering and addressing such unethical practices.

Penalties and Sanctions: Implementing strict penalties and sanctions for those found guilty of engaging in such practices can act as a deterrent.

Public Awareness: Educating consumers about the potential for such conflicts of interest and providing them with information on how to report suspicious activities can empower them to make informed decisions.

Addressing this issue is crucial for maintaining the integrity of the Medicaid program, ensuring that consumers receive the best possible care, and fostering a competitive and fair marketplace for healthcare services.

Call to Action:

I earnestly seek your prompt intervention and advocacy in ensuring this grievance is communicated to all pertinent departments within the state of Connecticut tasked with addressing such critical matters. The departments that ought to be immediately apprised of this situation include, but are not limited to:

Connecticut Department of Social Services

Connecticut Attorney General's Office

Connecticut Commission on Human Rights and Opportunities

Connecticut Office of the Healthcare Advocate

Connecticut Office of Policy and Management

I have proactively initiated complaints and have directly engaged with the Connecticut Department of Social Services. Rest assured, all communications have been meticulously documented, encompassing dates, times, and the identities of the individuals engaged in these discussions.

I place my trust in your unwavering commitment to justice and fairness, confident that you will accord this matter the urgency and gravitas it demands, ensuring a

comprehensive investigation and the implementation of corrective measures. The equitable treatment of all service providers operating under the Connecticut Medicaid ABI Waiver Program is of utmost importance, and I am optimistic that your intervention will usher in a just resolution.

I am grateful for your time and thoughtful consideration of this crucial matter.

Best regards,
David Medeiros
David Medeiros
ABI Resources, CEO, Director, Team Member





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11/13/2023

Subject: Formal Grievance Complaint Concerning Connecticut Medicaid ABI Waiver Program Service and Intervention Plans.

To: All pertinent departments within the state of Connecticut,

I am writing on behalf of ABI Resources, a dedicated provider of essential services to individuals with acquired brain injuries (ABI). This letter serves to formally raise a grievance and file a complaint concerning the serious issue of not receiving Medicaid Acquired Brain Injury (ABI) Waiver Program service and intervention plans from consumer-assigned care management consultants. This situation has gravely impacted the operational and financial integrity of ABI Resources.

As per the stipulations of the ABI Waiver Program, a "Service Plan" is an essential document that outlines the necessary medical and community-based services enabling individuals to live outside institutional settings. The provision of individualized service plans include measurable goals, objectives, and documentation of total service costs.

Additionally, "Intervention Plans," developed by cognitive behaviorists, are crucial in identifying and managing treatment goals and interventions for our

clients. However, despite our repeated efforts and adherence to the required protocols, we have not received these vital documents from care management. The lack of these plans has led to significant operational and financial difficulties for ABI Resources.

Sec. 17b-260a-6. Person-centered planning process (a) The service plan shall be developed based on a person-centered planning model, as described in 42 CFR 441.301(c), as amended from time to time. The individual shall lead the planning process where possible, and in accordance with section 17b-260a-11(a) of the Regulations of Connecticut State Agencies.

6) Prohibit providers of waiver services for the individual, or those who have an interest in or are employed by a provider of waiver services for the individual, from providing care management or participating in the development of the person-centered service plan;

Key Concerns and Grievances:

Non-Receipt of Essential Documents: Despite adherence to protocol, ABI Resources has not received the mandated individualized service and intervention plans, which include measurable goals and objectives for the consumers we serve. Furthermore, the necessary intervention plans developed by cognitive behaviorists, which outline treatment goals and interventions, have also not been provided by care management.

Concerns: Impact on Daily Support Staff and Program Consumers

In addition to the aforementioned issues, the absence of these critical Medicaid ABI Waiver Program plans has significantly affected our daily support staff and, consequently, the consumers of the program.

Impact on Daily Support Staff:

Lack of Clear Direction: Without structured plans, staff members struggle to provide focused and effective services, as they lack clear guidelines and objectives.

Increased Workload and Stress: The ambiguity surrounding treatment goals and methods has led to an increased workload and heightened stress levels among staff, impacting their well-being and job satisfaction.

Professional Inefficiency: Staff are unable to utilize their skills and training effectively, leading to professional dissatisfaction.

Difficulty in Tracking Progress: The absence of measurable goals makes it challenging for staff to track and report on client progress accurately.

Risk of Non-Compliance: Without proper guidelines, there is an increased risk of non-compliance with regulatory standards, potentially leading to legal and ethical issues.

Reduced Team Morale: The overall uncertainty and increased challenges have adversely affected team morale and cohesion.

Impact on Consumers of the Program:

Inconsistent Service Quality: Consumers face variability in the quality of care received, as staff members lack consistent plans to guide their services.

Slowed Progress: The absence of structured goals and interventions can slow down or hinder the progress and rehabilitation of consumers.

Reduced Confidence in Services: Consumers and their families may lose confidence in the quality and effectiveness of the services provided.

Increased Vulnerability: Consumers, particularly those with severe conditions, become more vulnerable due to the lack of tailored, goal-oriented care.

Potential for Unmet Needs: Without specific plans, some needs of consumers may remain unidentified and unaddressed, leading to gaps in care.

Emotional and Psychological Impact: The inconsistency and uncertainty in care can have adverse emotional and psychological effects on consumers.

These challenges not only make the daily responsibilities of our care providers more arduous but also critically undermine the quality of care and support we can offer to our consumers. It is imperative that these issues be addressed immediately to ensure the well-being of both our staff and the consumers who rely on our services.

Adverse Impacts on ABI Resources:

The cumulative effect of these issues has placed ABI Resources in a precarious financial and operational position.

Financial Losses: The absence of these critical documents has led to substantial financial losses, severely hampering our ability to function effectively.

Staffing Challenges: The lack of structured plans has created many challenges for our service providers and as a result, we have faced significant staffing issues, including layoffs and the challenges to maintain essential personnel.

Client Impact: Our capacity to offer consistent and high-quality services has been compromised, leading to a loss of clients and a tarnishing of our reputation.

Administrative Burden: The lack of structured plans has resulted in an increased administrative load, as we strive to manage without proper guidance.

Overall Business Impact: These compounded issues threaten the viability of ABI Resources and our mission to serve those in need.

Potential Steps to Address the Issue:

Immediate Investigation: We request a prompt investigation into this matter.

Provision of Required Plans: We urge for the immediate provision of the required service and intervention plans.

Compensation for Losses: Guidance on how to claim losses incurred due to this oversight and a discussion on potential compensatory measures are necessary.

Support and Guidance: Additional support to help navigate and rectify this situation would be invaluable.

Addressing the Issue:

We have initiated complaints and engaged directly with the Connecticut Department of Social Services. All communications have been thoroughly documented.

Call to Action:

I earnestly seek your prompt intervention and advocacy in ensuring this grievance is communicated to all pertinent departments within the state of Connecticut tasked with addressing such critical matters. The departments that ought to be immediately apprised of this situation include, but are not limited to:

Connecticut Department of Social Services

Connecticut Attorney General's Office

Connecticut Commission on Human Rights and Opportunities

Connecticut Office of the Healthcare Advocate

Connecticut Office of Policy and Management

I have proactively initiated complaints and have directly engaged with the Connecticut Department of Social Services. Rest assured, all communications have been meticulously documented, encompassing dates, times, and the identities of the individuals engaged in these discussions.

I place my trust in your unwavering commitment to justice and fairness, confident that you will accord this matter the urgency and gravitas it demands, ensuring a comprehensive investigation and the implementation of corrective measures. The

equitable treatment of all service providers operating under the Connecticut Medicaid ABI Waiver Program is of utmost importance, and I am optimistic that your intervention will usher in a just resolution.

I am grateful for your time and thoughtful consideration of this crucial matter.

Best regards,
David Medeiros
David Medeiros
ABI Resources, CEO, Director, Team Member



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11/15/2023

Subject: Formal Grievance and Complaint Regarding the Concealment of Public Information: Medicaid ABI Waiver Program Directory of Providers.

To: All pertinent departments within the state of Connecticut,

I am writing on behalf of ABI Resources to express our formal grievance and file a complaint regarding the handling of the Medicaid Acquired Brain Injury (ABI) Waiver Program by the Connecticut Department of Social Services (DSS). Specifically, our complaint centers on the apparent concealment of the Medicaid ABI Waiver Program Directory of Providers, a critical public resource.

Key Concerns and Grievances:

- a) Denial of Public Access to Information: The DSS managed Medicaid ABI Waiver Program Directory of Providers is public information, rightfully accessible to all. Its concealment not only violates the principles of transparency and public service but also directly impacts those in dire need of these services.
- b) Inaccessibility to Vulnerable Populations: The absence of accessible information severely restricts the ability of individuals with acquired brain



injuries, their families, and caregivers to make informed decisions regarding care and support. This lack of access is particularly detrimental, given the complex needs of this population.

- c) Increased Risk and Exploitation: Without knowledge of accredited and reputable providers, vulnerable individuals are at a heightened risk of exploitation and subpar services, which can lead to adverse health outcomes.
- d) Unnecessary Strain on Families and Caregivers: Families and caregivers, already burdened with care responsibilities, face additional challenges in finding appropriate services, contributing to increased stress and potential caregiving errors.
- e) Financial and Operational Impact on ABI Resources: As a provider, ABI Resources has suffered considerable financial losses due to decreased client engagement and an increased administrative burden. This situation stems directly from the unavailability of the provider directory, which hinders our ability to efficiently connect with potential clients.
- f) Administrative Burdens and Resource Diversion: The lack of a central, accessible directory has led to an excessive administrative load, diverting critical resources from our core mission of providing care.

Proposed Solutions and Steps to Address the Issue:

- 1) Immediate Disclosure and Accessibility: We request the immediate release of the Medicaid ABI Waiver Program Directory of Providers, ensuring it

is readily accessible to all stakeholders, particularly the public and vulnerable populations.

- 2) Commitment to Transparency: The DSS should commit to ongoing transparency in all aspects of the ABI Waiver Program, including regular updates and easy access to all program-related information.
- 3) Constructive Dialogue and Rectification: ABI Resources seeks to engage in a constructive dialogue with the DSS to discuss the implications of this concealment and explore potential avenues for rectifying the financial and operational impacts.

Addressing the Issue:

We have initiated complaints and engaged directly with the Connecticut Department of Social Services. All communications have been thoroughly documented.

Potential Steps to Address the Issue:

Immediate Investigation: We request a prompt investigation into this matter.

Provision of Required Plans: We urge for the immediate provision of the required service and intervention plans.

Compensation for Losses: Guidance on how to claim losses incurred due to this oversight and a discussion on potential compensatory measures are necessary.

Support and Guidance: Additional support to help navigate and rectify this situation would be invaluable.

Call to Action:

I earnestly seek your prompt intervention and advocacy in ensuring this grievance is communicated to all pertinent departments within the state of Connecticut tasked with addressing such critical matters. The departments that ought to be immediately apprised of this situation include, but are not limited to:

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Connecticut Commission on Human Rights and Opportunities

Connecticut Office of the Healthcare Advocate

Connecticut Office of Policy and Management

I have proactively initiated complaints and have directly engaged with the Connecticut Department of Social Services. Rest assured, all communications have been meticulously documented, encompassing dates, times, and the identities of the individuals engaged in these discussions.

We urge the Connecticut Department of Social Services, alongside the Attorney General's Office, the Commission on Human Rights and Opportunities, the Office of the Healthcare Advocate, and the Office of Policy and Management, to address this grievance promptly. The issue at hand not only affects ABI Resources but also speaks to the larger matter of public trust and the accessibility of crucial healthcare information.

We anticipate a constructive and swift response to this urgent matter, underscoring the importance of transparency and accessibility in public services, especially those catering to vulnerable populations.

I place my trust in your unwavering commitment to justice and fairness, confident that you will accord this matter the urgency and gravitas it demands, ensuring a comprehensive investigation and the implementation of corrective measures. The equitable treatment of all service providers operating under the Connecticut Medicaid ABI Waiver Program is of utmost importance, and I am optimistic that your intervention will usher in a just resolution.

I am grateful for your time and thoughtful consideration of this crucial matter.

Best regards,
David Medeiros
David Medeiros
ABI Resources, CEO, Director, Team Member



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11/16/2023

Subject: Formal Complaint and Request for Immediate Clarification on
Unauthorized Care Management Consultation Services in ABI Waiver Program 1.

To: All pertinent departments within the state of Connecticut,

Connecticut Department of Social Services and Relevant Oversight Bodies

I am writing on behalf of ABI Resources to express grave concerns and urgently seek detailed clarification on practices we have observed within the Medicaid Acquired Brain Injury (ABI) Waiver Program, particularly in ABI Waiver Program 1. Our complaint specifically focuses on what appears to be an unauthorized provision of care management consultation services in Program 1, a practice traditionally and explicitly designated for Program 2 under existing guidelines. This letter outlines our observations, the potential negative impacts on our business operations and our consumers, and our urgent requests for resolution

Key concerns and grievances:

1. Unauthorized Consultation Services: The core of our concern lies in the apparent provision of care management consultation services to consumers in ABI Waiver Program 1. This practice is not authorized under the current program guidelines and represents a significant breach of protocol,

raising serious concerns about compliance and oversight within the program.

2. Lack of Clarity and Transparency in Program Administration: The sudden and unexplained introduction of these services in Program 1 has created an atmosphere of confusion and uncertainty. We seek immediate and detailed clarification from the Department on whether there have been any recent changes to the scope or administration of ABI Waiver Program 1 that would authorize such services.
3. Improper Recommendations for Program Transitions: Additionally, we have noted instances where care managers are inappropriately advising Program 1 consumers to transition to Program 2. This advice, given without proper authority or assessment, potentially disrupts the tailored care plans crucial for the recovery of individuals with acquired brain injuries.

In-Depth Analysis of Impact on ABI Resources and Consumers:

1. Operational and Strategic Challenges: The introduction of potentially unauthorized services has disrupted our strategic planning and operational execution. It has forced us to reevaluate our service delivery models and resource allocation, potentially leading to inefficiencies and diminished care quality.
2. Risk to Consumer Trust and Quality of Care: The ambiguity surrounding these services risks damaging the trust that consumers and their families have in the system. It raises concerns about the appropriateness of care

provided, which is essential for effective recovery and rehabilitation in ABI cases.

3. Market Imbalance and Competitive Disadvantage: This situation creates an unfair market environment. Providers adhering to the guidelines may be at a disadvantage compared to those who are offering these additional, potentially unauthorized services. This not only affects our competitive position but also skews the overall market dynamics in ABI care services.

Specific Requests for Resolution and Enhanced Transparency:

1. Comprehensive Investigation and Clear Communication: We request an immediate, comprehensive investigation into the provision of care management consultation services in ABI Waiver Program 1, accompanied by clear communication on any policy adjustments.
2. Immediate Enforcement of Compliance: We urge the prompt enforcement of existing program guidelines and the cessation of any unauthorized practices.
3. Proactive Support and Guidance for All Stakeholders: We advocate for the development of support and guidance initiatives for both service providers and consumers to navigate these changes effectively, ensuring everyone is fully informed about their rights and the services available.
4. Corrective Measures for Non-Compliance: Implementation of corrective actions, including disciplinary measures, against entities found in violation of program rules, to maintain the integrity and effectiveness of the program.

Conclusion:

ABI Resources is deeply committed to providing high-quality care within the ABI Waiver Program framework. The current situation, marked by potential unauthorized practices, poses significant challenges to our operations and the well-being of our consumers. We trust that the Connecticut Department of Social Services and relevant oversight bodies will address these issues with the urgency and thoroughness they demand, ensuring the program's integrity and efficacy. We look forward to a swift, detailed, and transparent response to this critical issue.

Call to Action:

I earnestly seek your prompt intervention and advocacy in ensuring this grievance is communicated to all pertinent departments within the state of Connecticut tasked with addressing such critical matters. The departments that ought to be immediately apprised of this situation include, but are not limited to:

Connecticut Department of Social Services
Connecticut Attorney General's Office
Connecticut Commission on Human Rights and Opportunities
Connecticut Office of the Healthcare Advocate
Connecticut Office of Policy and Management

I have proactively initiated complaints and have directly engaged with the Connecticut Department of Social Services. Rest assured, all communications have been meticulously documented, encompassing dates, times, and the identities of the individuals engaged in these discussions.

We urge the Connecticut Department of Social Services, alongside the Attorney General's Office, the Commission on Human Rights and Opportunities, the Office of the Healthcare Advocate, and the Office of Policy and Management, to address this grievance promptly. The issue at hand not only affects ABI Resources but also speaks to the larger matter of public trust and the accessibility of crucial healthcare information.

We anticipate a constructive and swift response to this urgent matter, underscoring the importance of transparency and accessibility in public services, especially those catering to vulnerable populations.

I place my trust in your unwavering commitment to justice and fairness, confident that you will accord this matter the urgency and gravitas it demands, ensuring a comprehensive investigation and the implementation of corrective measures. The equitable treatment of all service providers operating under the Connecticut Medicaid ABI Waiver Program is of utmost importance, and I am optimistic that your intervention will usher in a just resolution.

I am grateful for your time and thoughtful consideration of this crucial matter.

Best regards,
David Medeiros
David Medeiros
ABI Resources, CEO, Director, Team Member



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11/16/2023

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

To: All pertinent departments within the state of Connecticut,

I am David Medeiros from ABI Resources, and I present this document to voice our serious concerns about certain activities within the Medicaid Acquired Brain Injury (ABI) Waiver program. These activities, which appear to breach ethical standards and potentially violate Medicaid regulations, require immediate scrutiny and action.

Examination of the ABI Waiver Program's Framework:

The ABI Waiver Program, established under sections 17b-260a-1 to 17b-260a-17 of the Connecticut State Agencies regulations, is designed to offer nonmedical, home, and community-based services to eligible individuals with an ABI. This program emphasizes the need for cost-effective services, personalized care, and adherence to strict qualifications for providers, ensuring that the services provided meet the highest ethical and professional standards.



Conflicts Arising from Service Provision:

Dual Service Conflict:

In the context of the ABI Waiver Program, a significant conflict has emerged due to an agency providing both Clinical Behavioral Therapy (CBT) and daily non-medical services to the same group of consumers. This situation raises several concerns:

Therapeutic Recommendations Overlapping with Financial Interests:

There is an apparent alignment of therapeutic recommendations with the agency's financial interests. The agency uses the platform of CBT sessions to recommend additional non-medical services that it also provides. This practice suggests a dual benefit for the agency, where it gains financially from both therapy sessions and the subsequent non-medical services.

Influence on Consumer Choice:

The dual role of the agency potentially influences consumer choice, where therapeutic sessions, which should be neutral and solely in the interest of the Consumer's health, may be used to steer consumers towards additional services provided by the same agency. This situation can lead to biased recommendations that may not always be in the best interest of the consumer.

Cycle of Service Provision and Financial Gain:

There is a creation of a cycle wherein the agency, through its provision of CBT, identifies or creates a need for additional services, fulfills these needs through its non-medical services arm, and consequently benefits financially. This cycle raises questions about the objectivity of the service recommendations and the potential for unnecessary or excessive services being provided.

Potential for Overutilization of Services:

This overlap in services could lead to overutilization, where consumers receive more services than are necessary, leading to increased costs for the Medicaid program.

Ethical Implications:

The practice blurs the lines between therapeutic need and financial gain, potentially compromising the ethical standards expected in healthcare and social service provision.

These concerns necessitate a thorough examination to ensure that services provided under the ABI Waiver Program are free from conflicts of interest, maintain the highest ethical standards, and truly serve the best interests of the consumers.

Manipulative Consumer Steering and Personnel Poaching:

Directing Consumer Choices:

The conduct of the agency's Clinical Behavioral Therapy (CBT) providers has raised significant concerns regarding the manipulation of Consumer choices. This issue manifests in several ways:

Targeted Referrals:

CBT providers are reportedly channeling consumers towards the agency's own non-medical services. This practice goes beyond the realm of impartial medical advice, as it systematically directs consumers to services that benefit the agency financially, rather than based on the unbiased assessment of Consumer needs.

Influence on Consumer Decision-Making:

This approach potentially undermines the autonomy of consumers in making informed decisions about their care. By directing consumers towards specific services, there's a risk that consumers are being provided a narrowed view of available options, influenced more by the agency's financial interests than by Consumer welfare.

Questionable Ethical Practices:

The behavior of these CBT providers raises ethical questions, particularly regarding the integrity of their recommendations. It potentially violates the principle of acting in the best interests of the Consumer, a cornerstone of healthcare and therapeutic professions.

Unfair Competitive Tactics:

The agency's practices extend beyond Consumer manipulation, affecting the broader operational dynamics within the industry:

Staff Poaching:

Reports indicate that the agency has engaged in poaching staff from other providers. This action not only disrupts the operations of other agencies but also indicates a strategic approach to weaken competition and consolidate the agency's position in the market.

Disruption of Industry Standards:

Such tactics contribute to an uneven playing field, where ethical providers adhering to fair hiring practices are disadvantaged. This behavior can lead to a destabilization of the market, with one agency gaining undue advantage and influence.

Impact on Service Quality:

The poaching of staff may lead to a shortage of skilled professionals in other agencies, potentially affecting the quality of care and services provided to consumers across the industry.

These practices of manipulative Consumer steering and personnel poaching call for an in-depth review to ensure that the ABI Waiver Program operates in a fair, ethical, and competitive environment, where Consumer welfare and industry standards are upheld.

Indicators of Potential Kickback Arrangements:

Referral for Incentives:

The relationships and interactions among the service provider, Clinical Behavioral Therapy (CBT) professionals, and care management consultants reveal possible mechanisms of kickback arrangements. This is characterized by:

Questionable Referral Patterns:

There appears to be a consistent pattern where CBT professionals and care management consultants funnel consumers to specific services offered by the agency. This pattern suggests a systematic approach to referrals that may not be solely based on Consumer needs but rather on underlying incentives.

Financial Incentives for Referrals:

The possibility that CBT professionals and care management consultants receive financial or other forms of incentives for directing consumers to the agency's services is a major concern. Such incentives could significantly compromise the

integrity of Consumer referrals, with decisions potentially driven by personal gain rather than Consumer welfare.

Cyclical Billing and Service Utilization:

The referral system seems to create a cyclical pattern of billing and service utilization, where Consumer needs are continuously identified and serviced within the same agency network, fostering an environment of repeated financial gain for the agency.

Impact on Medicaid Expenditures:

If these practices are occurring, they could lead to increased and potentially unnecessary Medicaid expenditures. Consumers may be receiving more services than medically necessary, or services that could be more effectively provided elsewhere, leading to inflated costs borne by the Medicaid program.

Ethical and Legal Implications:

Such kickback arrangements, if confirmed, would not only breach ethical standards but also could contravene legal statutes governing Medicaid and healthcare services. Kickbacks in healthcare are illegal and undermine the principle of fair competition and the integrity of patient care.

The existence of these indicators necessitates a thorough investigation to ascertain the presence of kickback arrangements and to evaluate their impact on the Medicaid program's ethical standards and financial integrity. It is imperative to ensure that all practices within the ABI Waiver Program align with legal and ethical guidelines, safeguarding the program's integrity and the wellbeing of its beneficiaries.

Impact on ABI Resources:

Revenue Reduction

Consumer Diversion Impact:

ABI Resources has experienced a significant downturn in revenue, which can be directly attributed to the diversion of consumers towards the agency in question. This diversion likely results from the alleged unethical steering and manipulative practices, leading to a reduced Consumer base for ABI Resources.

Financial Viability Threatened:

The reduction in revenue poses a threat to the financial viability and sustainability of ABI Resources, impacting our ability to provide quality care and services to our consumers.

Operational Cost Surge:

Increased Marketing Expenditures: In an effort to counteract the loss of consumers and to rebuild our Consumer base, ABI Resources has had to significantly increase our investment in marketing. These additional expenses are necessary to communicate our commitment to ethical practices and quality care to the community.

Legal and Consultation Fees:

Addressing these unethical practices and exploring legal avenues for recourse has led to increased spending on legal consultations and related services. These expenditures are essential for navigating the complexities of the situation and seeking justice, but they also divert resources from other operational areas.

Consumer Relationship Erosion:

Loss of Trust and Business: The most profound impact has been on our established Consumer relationships. The manipulative practices of the agency in question have led to a loss of trust among our consumers, as they are steered away from ABI Resources. This erosion of trust is deeply concerning, as it undermines the long-standing relationships we have built based on care, integrity, and ethical service provision.

Reputation Damage:

The wider implications of these practices in the industry have led to a tarnished reputation, not just for the agency in question, but for service providers in general, including ABI Resources. Restoring our reputation in the wake of these events is a significant challenge, requiring substantial effort and resources.

The cumulative effect of these impacts on ABI Resources is profound, affecting not just our financial stability but also our reputation and, most importantly, our ability to serve our consumers effectively. It is imperative that these issues are addressed comprehensively to restore the integrity of service provision within the ABI Waiver Program and to protect agencies like ours that are committed to ethical practices.

Formal Requests Thorough Examination and Compliance Review:

Comprehensive Investigation:

We formally request a complete and thorough examination of the outlined practices. This investigation should encompass all entities involved, including the service provider, CBT professionals, and care management consultants.

Medicaid Compliance Review:

A detailed review of Medicaid compliance is crucial to determine if these practices violate Medicaid regulations and standards.

Application of Corrective and Disciplinary Measures:

Immediate Corrective Action: Upon confirmation of these practices, we strongly advocate for swift implementation of corrective measures to address and rectify the identified issues.

Disciplinary Proceedings:

We also call for appropriate disciplinary actions against any parties found to be complicit in these unethical practices, in accordance with legal and regulatory guidelines.

Review and Revision of Policies and Oversight:

Policy Overhaul:

A comprehensive review and subsequent revision of existing policies within the ABI Waiver Program is necessary. This review should focus on closing loopholes that allow for such unethical practices and ensuring robust safeguards against future violations.

Enhanced Oversight Mechanisms:

We propose the establishment or enhancement of oversight mechanisms within the ABI Waiver Program to ensure ongoing compliance with ethical and legal standards.

In Closing:

The concerns we have raised in this document, if validated, point towards serious ethical lapses and potential legal infractions concerning Medicaid regulations. The very foundation of the ABI Waiver program, along with the trust placed in it by its beneficiaries, relies on prompt, effective, and transparent action from the Connecticut Department of Social Services.

We appreciate your attention to this urgent and significant matter and hope for a swift resolution that upholds the principles of justice and integrity.

Call to Action:

I earnestly seek your prompt intervention and advocacy in ensuring this grievance is communicated to all pertinent departments within the state of Connecticut tasked with addressing such critical matters. The departments that ought to be immediately apprised of this situation include, but are not limited to:

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We anticipate a constructive and swift response to this urgent matter, underscoring the importance of transparency and accessibility in public services, especially those catering to vulnerable populations.

I place my trust in your unwavering commitment to justice and fairness, confident that you will accord this matter the urgency and gravitas it demands, ensuring a comprehensive investigation and the implementation of corrective measures. The equitable treatment of all service providers operating under the Connecticut Medicaid ABI Waiver Program is of utmost importance, and I am optimistic that your intervention will usher in a just resolution.

I am grateful for your time and thoughtful consideration of this crucial matter.

Best regards,
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11/20/2023

Subject Complaint and Request for Clarity Regarding Rental Agreements in the Medicaid ABI Waiver Program 1 and 2.

To: All pertinent departments within the state of Connecticut,

As a stakeholder in the Medicaid Acquired Brain Injury (ABI) Waiver Program, we, David Medeiros and ABI Resources, wish to raise a serious concern and request clarity regarding a critical issue impacting consumers and service providers within the program.

Key Grievance and Request:

We have observed a growing trend where consumers of the ABI Waiver Program are being locked into rental agreements with agency service providers or their business partners. These arrangements appear to significantly restrict consumer choice and freedom, creating a monopolistic environment detrimental to both consumers and independent service providers like ABI Resources.

Concerns:

Restricted Consumer Choice: Consumers are often coerced into staying with a particular agency due to fears of losing their housing, and belongings, or causing



inconvenience to roommates. This undermines the fundamental principle of consumer choice and control in the ABI Waiver Program.

Fear of Repercussions:

Many consumers feel trapped, unable to voice concerns about neglect or abuse due to the fear of losing their housing or facing other retaliatory actions.

Isolation from Advocacy and Assistance:

These rental agreements may isolate consumers from external resources and advocacy groups, further reducing their ability to seek help or change service providers.

Monopolistic Practices:

Such arrangements foster a monopolistic marketplace, hindering the ability of independent providers like ABI Resources to compete fairly and offer services to consumers.

Financial Concerns:

These rental agreements often involve dual payments - for waiver program services and rent - potentially leading to financial improprieties, especially when both payments are sourced from state or federal funding.

Request for Action:

Investigation into Legal and Ethical Violations:

We request a thorough investigation into these practices for potential violations of consumer rights, anti-trust laws, and Medicaid regulations.

Transparency and Regulatory Oversight:

There is a need for greater transparency and oversight in how rental agreements are managed within the ABI Waiver Program to ensure they do not conflict with program objectives or consumer rights.

Guidance and Policy Review:

We seek clear guidance on acceptable practices regarding rental agreements and the integration of housing with service provision.

Support for Affected Service Providers:

We request consideration of the adverse impact these practices have on service providers like ABI Resources, who strive to offer competitive and consumer-focused services.

Your prompt attention to this matter is crucial for maintaining the integrity of the ABI Waiver Program and the well-being of its consumers.

Indicators of Potential Kickback Arrangements:

Referral for Incentives:

The relationships and interactions among the service provider, and care management consultants reveal possible mechanisms of kickback arrangements.

This is characterized by:

Questionable Referral Patterns:

There appears to be a consistent pattern where care management consultants funnel consumers to specific services offered by the agency. This pattern suggests a systematic approach to referrals that may not be solely based on Consumer needs but rather on underlying incentives.

Financial Incentives for Referrals:

The possibility that professionals and care management consultants receive financial or other forms of incentives for directing consumers to the agency's services is a major concern. Such incentives could significantly compromise the integrity of Consumer referrals, with decisions potentially driven by personal gain rather than Consumer welfare.

Cyclical Billing and Service Utilization:

The referral system seems to create a cyclical pattern of billing, service utilization, and rental arrangements where consumer needs are continuously identified and serviced within the same agency network, fostering an environment of repeated financial gain for the agency.

Impact on Medicaid Expenditures:

If these practices are occurring, they could lead to increased and potentially unnecessary Medicaid expenditures. Consumers may be receiving more services than medically necessary, or services that could be more effectively provided elsewhere, leading to inflated costs borne by the Medicaid program.

Ethical and Legal Implications:

Such kickback arrangements, if confirmed, would not only breach ethical standards but also could contravene legal statutes governing Medicaid and healthcare services. Kickbacks in healthcare are illegal and undermine the principle of fair competition and the integrity of patient care.

The existence of these indicators necessitates a thorough investigation to ascertain the presence of kickback arrangements and to evaluate their impact on the Medicaid program's ethical standards and financial integrity. It is imperative to ensure that all practices within the ABI Waiver Program align with legal and ethical guidelines, safeguarding the program's integrity and the wellbeing of its beneficiaries.

Impact on ABI Resources:

Revenue Reduction

Consumer Diversion Impact:

ABI Resources has experienced a significant downturn in revenue, which can be directly attributed to the diversion of consumers towards the agencies in question. This diversion likely results from the alleged unethical steering and manipulative practices, leading to a reduced Consumer base for ABI Resources.

Financial Viability Threatened:

The reduction in revenue poses a threat to the financial viability and sustainability of ABI Resources, impacting our ability to provide quality care and services to our consumers.

Operational Cost Surge:

Increased Marketing Expenditures:

In an effort to counteract the loss of consumers and to rebuild our Consumer base, ABI Resources has had to significantly increase our investment in

marketing. These additional expenses are necessary to communicate our commitment to ethical practices and quality care to the community.

Legal and Consultation Fees:

Addressing these unethical practices and exploring legal avenues for recourse has led to increased spending on legal consultations and related services. These expenditures are essential for navigating the complexities of the situation and seeking justice, but they also divert resources from other operational areas.

Consumer Relationship Erosion:

Loss of Trust and Business:

The most profound impact has been on our established Consumer relationships. The manipulative practices of the agency in question have led to a loss of trust among our consumers, as they are steered away from ABI Resources. This erosion of trust is deeply concerning, as it undermines the long-standing relationships we have built based on care, integrity, and ethical service provision.

Reputation Damage:

The wider implications of these practices in the industry have led to a tarnished reputation, not just for the agency in question, but for service providers in general, including ABI Resources. Restoring our reputation in the wake of these events is a significant challenge, requiring substantial effort and resources.

The cumulative effect of these impacts on ABI Resources is profound, affecting not just our financial stability but also our reputation and, most importantly, our ability to serve our consumers effectively. It is imperative that these issues are addressed comprehensively to restore the integrity of service provision within the

ABI Waiver Program and to protect agencies like ours that are committed to ethical practices.

Formal Requests Thorough Examination and Compliance Review:

Comprehensive Investigation:

We formally request a complete and thorough examination of the outlined practices. This investigation should encompass all entities involved, including the agency service provider and care management consultants.

Medicaid Compliance Review:

A detailed review of Medicaid compliance is crucial to determine if these practices violate Medicaid regulations and standards.

Review and Revision of Policies and Oversight:

Policy Overhaul:

A comprehensive review and subsequent revision of existing policies within the ABI Waiver Program is necessary. This review should focus on closing loopholes that allow for such unethical practices and ensuring robust safeguards against future violations.

Enhanced Oversight Mechanisms:

We propose the establishment or enhancement of oversight mechanisms within the ABI Waiver Program to ensure ongoing compliance with ethical and legal standards.

In Closing:

The concerns we have raised in this document, if validated, point towards serious ethical lapses and potential legal infractions concerning Medicaid regulations. The very foundation of the ABI Waiver program, along with the trust placed in it by its beneficiaries, relies on prompt, effective, and transparent action from the Connecticut Department of Social Services.

We appreciate your attention to this urgent and significant matter and hope for a swift resolution that upholds the principles of justice and integrity.

Call to Action:

I earnestly seek your prompt intervention and advocacy in ensuring this grievance is communicated to all pertinent departments within the state of Connecticut tasked with addressing such critical matters. The departments that ought to be immediately apprised of this situation include, but are not limited to:

Connecticut Department of Social Services

Connecticut Attorney General's Office

Connecticut Commission on Human Rights and Opportunities

Connecticut Office of the Healthcare Advocate

Connecticut Office of Policy and Management

I have proactively initiated complaints and have directly engaged with the Connecticut Department of Social Services. Rest assured, all communications

have been meticulously documented, encompassing dates, times, and the identities of the individuals engaged in these discussions.

We urge the Connecticut Department of Social Services, alongside the Attorney General's Office, the Commission on Human Rights and Opportunities, the Office of the Healthcare Advocate, and the Office of Policy and Management, to address this grievance promptly. The issue at hand not only affects ABI Resources but also speaks to the larger matter of public trust and the accessibility of crucial healthcare information.

We anticipate a constructive and swift response to this urgent matter, underscoring the importance of transparency and accessibility in public services, especially those catering to vulnerable populations.

I place my trust in your unwavering commitment to justice and fairness, confident that you will accord this matter the urgency and gravitas it demands, ensuring a comprehensive investigation and the implementation of corrective measures. The equitable treatment of all service providers operating under the Connecticut Medicaid ABI Waiver Program is of utmost importance, and I am optimistic that your intervention will usher in a just resolution.

I am grateful for your time and thoughtful consideration of this crucial matter.

Best regards,
David Medeiros
David Medeiros
ABI Resources, CEO, Director, Team Member





A.B.I. Resources LLC

39 Kings Highway, Suite C

Gales Ferry CT, 06335

Phone: (860) 942-0365

Fax: (860) 465-9591

<https://www.CTbrainINJURY.com>

Date: 12/23/2023

**Subject: Formal Complaint Regarding the Failure to Provide
Reasonable Accommodations by the Commission on Human Rights
and Opportunities (CHRO)**

**Call for Systemic Change: CHRO's Failure in ADA Accommodation
Compliance**

Dear Governor Ned Lamont and Esteemed Members of the
Connecticut Government,

I am writing to emphasize the importance of effective communication and the dissemination of updated information regarding disability accommodations within our federal and state departments.

As an advocate for individuals with disabilities, I understand the critical role that timely and accurate information plays in ensuring that appropriate accommodations are provided. To this end, I kindly request your assistance in ensuring that all Federal and State Department Executives, along with their associated staff, are kept fully informed and updated about the latest developments, policies, and best practices in disability accommodations.

Your support in this initiative is not only crucial for compliance with legal standards but also embodies our collective commitment to creating an inclusive and supportive environment for all individuals, regardless of their abilities.

This is a formal complaint against the Commission on Human Rights and

Opportunities (CHRO) for their failure to provide the necessary reasonable accommodations in line with the Americans with Disabilities Act (ADA). My experiences as a person living with a brain injury and a stroke survivor have been met with significant challenges in the CHRO's processes, which I believe violate my rights under the ADA.

Despite clear and repeated requests for specific accommodations to assist me in completing the CHRO requirements – namely, assistance in understanding and completing complex documentation and a preference for written communication – these requests have been either misunderstood, misinterpreted as seeking legal advice, or inadequately addressed.

The lack of appropriate accommodations has severely hindered my ability to engage effectively in the CHRO process and has added unnecessary complications to an already challenging situation. This not only impacts my individual case but also sets a concerning precedent for others in similar circumstances seeking fair treatment and support from the CHRO.

The response from the CHRO suggesting I seek assistance from Legal Aid or the UConn School of Law Legal Clinic fails to recognize the nature of my request, which is for administrative support to navigate their procedures due to my disability, and not for legal advice.

I am seeking the following actions to be taken in response to this complaint:

1. A thorough review of my interactions with the CHRO, specifically focusing on their responses (or lack thereof) to my requests for reasonable accommodations.
2. Implementation of measures to ensure that the CHRO staff are adequately trained in ADA compliance, particularly in understanding and providing reasonable accommodations to individuals with disabilities.
3. Provision of the necessary accommodations to allow me to complete the CHRO process effectively, as originally requested.

I believe these steps are essential not only for addressing my individual situation but also for ensuring that the CHRO upholds its responsibilities under

the ADA and provides an accessible and equitable process for all individuals, regardless of their abilities.

The legal case of David Medeiros v. State of CT, Department of Social Services, CHRO No. 2410220.'

- Whistleblower Report, Comprehensive Grievance Report and Request for Clarity. Addressing Issues within the Connecticut Medicaid Acquired Brain Injury (ABI) Waiver Program. Whistleblower Report Prepared by:
David Medeiros and ABI Resources LLC
Date: November 21, 2023
ABI Resources LLC
39 Kings Hwy STE C
Gales Ferry, CT. 06226
860 942-0365

These records are crucial for understanding the dynamics of interactions with these key figures in the context of disability rights and whistleblower protections.

Would you please ensure my request is provided to Federal and State Department Executives and Associated staff so they may ensure justice and stay completely updated and informed:

- Connecticut Department of Social Services Commissioner Andrea Barton Reeves
- U.S. Senators Richard Blumenthal and Chris Murphy
- U.S. House Representatives John Larson, Joe Courtney, Rosa DeLauro, Jim Himes, and Jahana Hayes
- Connecticut Governor Ned Lamont
- Lieutenant Governor Susan Bysiewicz
- Secretary of State Denise Merrill
- Attorney General William Tong
- State Treasurer Shawn Wooden
- State Comptroller Kevin Lembo

- State Auditors John Geragosian and Rob Kane
- U.S. Department of Health and Human Services (HHS) Secretary Xavier Becerra
- Centers for Medicare & Medicaid Services (CMS) Administrator Chiquita Brooks-LaSure
- U.S. Department of Justice (DOJ) Attorney General Merrick Garland
- U.S. Equal Employment Opportunity Commission (EEOC) Chair Charlotte A. Burrows
- Office of Special Counsel (OSC) Special Counsel Henry J. Kerner
- Office for Civil Rights (OCR) at HHS Acting Director Melanie Fontes Rainer
- The Department of Labor DOL
- Government Accountability Office GAO
- Connecticut General Assembly CGA

Follow-up Mechanism: I respectfully request a formal response to this complaint along with an action plan for addressing these concerns.

Call for External Review or Audit: I urge an independent audit of the CHRO's processes to ensure objective assessment and rectification.

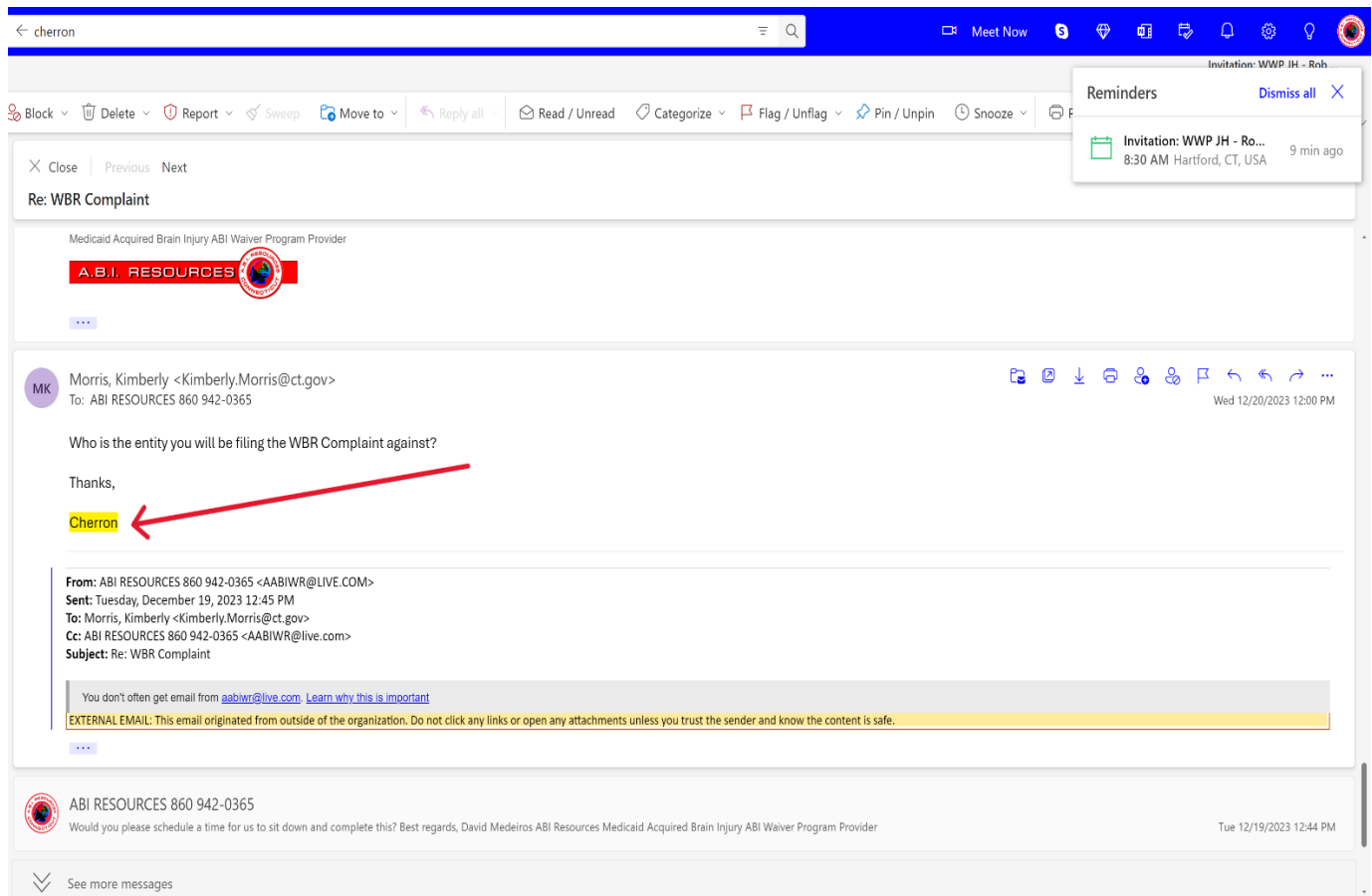
I trust that this matter will be addressed with the seriousness it warrants, not only for my case but for the benefit of all individuals with disabilities in Connecticut.

Thank you for your attention to this matter. I look forward to a prompt and constructive response that serves the greatest good.

Best regards,
David Medeiros
 David Medeiros
 ABI Resources, CEO, Director, Team Member
 Medicaid Acquired Brain Injury ABI Waiver Program Support Provider.



CHRO Judge Dr. Cherron Payne



After a comprehensive discovery process, it has been identified that Dr. Cherron Payne, from Farmington, Connecticut, has been appointed to a significant role within the Connecticut Commission on Human Rights and Opportunities (CHRO). Governor Ned Lamont announced the appointment of Dr. Payne, along with Jon FitzGerald of Bristol, to serve as administrative law judges for the CHRO. Furthermore, Dr. Payne has been designated as the chief human rights referee by Governor Lamont.

The following are new concerns and complaints.

- Judge Dr. Payne, along with Jon FitzGerald of Bristol, serve as administrative law judges for the CHRO but more importantly, Judge Dr. Cherron Payne is to ensure that my civil rights are adhered to. The communication from Judge Dr. Cherron Payne serves as several significant conflicts of interest.
- CHRO failed the Connecticut General Assembly CGA audit dated December 20, 2023. CT's state auditors provide independent and objective audits of the operations of state government and protection against waste, fraud, and abuse.
- CHRO continues to complicate communication challenges in my self-advocacy efforts.
- CHRO continues to request information that has already been submitted.

- CHRO is responsible for ensuring equity and opportunity for Connecticut small and minority business enterprises owned by women, ethnic minorities, and people with disabilities. CHRO is not ensuring equity and opportunity.

NOT THE COMMISSIONER



State of Connecticut
COMMISSION ON HUMAN RIGHTS AND OPPORTUNITIES
 Capitol Region Office ~ 450 Columbus Boulevard, Suite 2, Hartford, CT 06103
Promoting Equality and Justice for all People

December 15, 2023

NOT THE COMMISSIONER

Via email: deidre.gifford@ct.gov

Diedre S. Gifford, MD, MPH
 Commissioner
 Department of Social Services
 55 Farmington Avenue
 Hartford, CT 06105

RE: David Medeiros v. State of CT, Department of Social Services
CHRO No. 2410220
EEOC No. N/A

Dear Commissioner Gifford:

A complaint, referenced above, has been filed with the Commission on March 28, 2023, but due to an administrative error the service was delayed, the Commission apologizes about any inconvenience this may have the caused the Respondent. A copy of the complaint is attached.

The enclosed General Notice advises you of your rights, duties, and responsibilities. Please read carefully the information contained in the notice. The enclosed Notice Regarding Out of State Attorneys advises that all attorneys practicing before the Commission must be admitted to practice law in Connecticut and that it is the responsibility of all counsel to comply with Connecticut practice rules. Also enclosed is important information with respect to the no fault conciliation process. The Commission is available to assist you if you wish to pursue settlement of this complaint. If you wish to conciliate the complaint prior to providing an answer, you must notify the Commission within 10 days of receipt of the enclosed complaint.

You must file an answer to the complaint under oath with the Commission within 30 days of receipt of this complaint unless pre-answer conciliation has been requested. If you fail to answer the complaint within this time, you may be defaulted by the Commission. Parties are encouraged to submit all filings by email only without an additional hardcopy if possible. You must email a scanned copy of your signed and notarized Answer to chro.capitol@ct.gov and dedra.morris@ct.gov.

Main (860) 566-7710 ~ Fax (860) 566-1997
www.ct.gov/chro - Toll Free in Connecticut (800) 477-8737
 Affirmative Action/Equal Opportunity Employer

263 DAYS LATER



State of Connecticut
COMMISSION ON HUMAN RIGHTS AND OPPORTUNITIES

Capitol Region Office ~ 450 Columbus Boulevard, Suite 2, Hartford, CT 06103

Promoting Equality and Justice for all People

December 15, 2023

Via email: aabiwr@live.com

David Medeiros
215 Mountain Street
Willimantic, CT 06226

RE: David Medeiros v. State of CT, Department of Social Services
CHRO No. 2410220
EEOC No. N/A

Dear Mr. Medeiros:

This letter confirms that your complaint, referenced above, has been filed with the Commission on March 28, 2023, but due to an administrative error the service was delayed, the Commission apologizes for any inconvenience this may have caused you.

The enclosed General Notice advises you of your rights, duties, and responsibilities. **Please read carefully the information contained in the notice.**

You have a duty to respond timely to any information or assistance requested and to cooperate with the Commission at all times. It is your sole duty and responsibility to notify the Commission of your whereabouts at all times throughout the pendency of this complaint. In the event that your address, telephone number, or email address changes, it is your duty to notify the Commission immediately in writing. **Parties are encouraged to submit all filings by email only without an additional hardcopy if possible. Emailed filings with Capitol Region Office should be emailed to CHRO.Capitol@ct.gov.**

Also, you have a duty to certify to the Commission that you have provided the Respondent with copies of all documents you file with the Commission. For your convenience and use, the enclosed Certification Form is made available.

If I can be of further assistance, please do not hesitate to contact me.

NO NAME

Commission on Human Rights and Opportunities
Capitol Region Office
450 Columbus Boulevard, Suite 2
Hartford, CT 06103
860-541-3456

Main (860) 566-7710 ~ Fax (860) 566-1997
www.ct.gov/chro - Toll Free in Connecticut (800) 477-8737
Affirmative Action/Equal Opportunity Employer

Re: WBR Complaint

ABI RESOURCES 860 942-0365 <aabiwr@live.com>

Sat 12/23/2023 7:38 AM

To: Morris, Kimberly <Kimberly.Morris@ct.gov>

Cc: ABI RESOURCES 860 942-0365 <aabiwr@live.com>

12.23.2023

Clarification on Request for Accommodations in Filing Whistleblower Complaint

Dear Ms. Kimberly D. Morris,

I appreciate the clarity provided regarding the role of Dr. Payne and the communication protocols with the referees. I understand and respect the need to maintain fairness and impartiality in this process.

I would like to clarify that my request for assistance is specifically related to accommodations for my disability, in line with the Americans with Disabilities Act (ADA). As a person living with a brain injury and a stroke survivor, I face unique challenges in processing and completing complex tasks, such as understanding and filling out the whistleblower complaint form. This request is not for legal advice on the content of the complaint but rather for administrative assistance that accounts for my disability.

The suggestion to contact Legal Aid or the UConn School of Law Legal Clinic, while appreciated, does not address the core of my request. My need is for reasonable accommodations in the administrative process of filing the complaint, not for legal guidance on its substance.

To ensure my full and equitable participation in this process, I kindly request the following accommodations:

Administrative Assistance: Someone to guide me through the process, ensuring that I understand each step and that my responses are accurately recorded, given the cognitive challenges I face due to my disability.

Written Communication: Due to the difficulties I experience with phone communications, I request that our interactions continue via email or written messages, allowing me to better process and retain information.

I believe these accommodations are reasonable and necessary for me to engage effectively in this process, ensuring that my rights as an individual with a disability are respected and upheld.

I am committed to maintaining clear, respectful, and professional communication throughout this process. Your understanding and cooperation in providing these accommodations would be greatly appreciated.

Lastly, as per my previous request, could you please provide the contact information of your supervisors and our full chain of communications? This would aid in ensuring transparency and maintaining a record of our interactions.

Thank you for your attention to this important matter. I look forward to your guidance and support in providing these necessary accommodations.

Best regards,
David Medeiros
ABI Resources
Medicaid Acquired Brain Injury ABI Waiver Program Provider



From: Morris, Kimberly <Kimberly.Morris@ct.gov>
Sent: Friday, December 22, 2023 2:57 PM
To: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>
Subject: RE: WBR Complaint

Mr. Medeiros,

There has been no communication between you and Dr. Payne. The communication came from myself. The referees never contact the parties directly and you are not to contact the referees directly.

The whistleblower complaint form is self-explanatory. If you need assistance, you can contact Legal Aid or possibly the UConn School of Law Legal Clinic for help.

To ensure fairness and impartiality, OPH cannot assist with drafting the language for the actual complaint beyond reiterating the instructions that are on the whistleblower complaint form as well as the instructions that I've already given you.

Thank you.



www.ct.gov/chro



Kimberly D. Morris (she/her/hers)

Secretary II

Office of Public Hearings

Commission on Human Rights and Opportunities

450 Columbus Blvd., Suite 2

Hartford CT 06103 | AA/EOE

P: 860-418-8770 | F: 860-418-8780 | Direct: 860-541-4711 |

Kimberly.morris@ct.gov

From: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>

Sent: Friday, December 22, 2023 8:39 AM

To: Morris, Kimberly <Kimberly.Morris@ct.gov>

Cc: ABI RESOURCES 860 942-0365 <AABIWR@live.com>

Subject: Re: WBR Complaint

Importance: High

You don't often get email from aabiwr@live.com. [Learn why this is important](#)

EXTERNAL EMAIL: This email originated from outside of the organization. Do not click any links or open any attachments unless you trust the sender and know the content is safe.

12.22.2023 Subject: Request for Accommodations for Completing CHRO Requirements

Dear Ms. Morris and Dr. Cherron Payne,

I appreciate your response and the role of your office. However, I must express my concern regarding the recent interactions. I am not seeking legal advice, and it is important to clarify that my inquiries are not in that vein. My aim is to navigate the procedures and functions of your office effectively, without unnecessary complications.

I am concerned that your communication may be veering into areas that are not relevant to my needs or intentions. It is crucial that we maintain a focus on the guidance I am seeking. The continual suggestion that I am asking for legal advice, or the repeated prompting for additional questions from my end, is not only unnecessary but also adds layers of complexity to an already challenging process.

Let's streamline our communication to be as clear and direct as possible.

I am writing to request specific accommodations to assist me in completing the necessary documentation and notarizations for the CHRO requirements. As a person living with a brain injury and as a stroke survivor, I face certain challenges that require additional support in managing complex tasks.

I kindly request the opportunity to sit down with a person who can assist me in completing all the CHRO requirements, including documentation filings and notarizations. This support is crucial to ensure that my submissions are accurate and complete, given my disability.

I would like to clarify that I am not seeking legal advice through this request. My sole intention is to obtain the necessary administrative assistance to navigate the procedural aspects of the CHRO requirements effectively, considering my disability.

Your understanding and support in providing these accommodations would be greatly appreciated. This will not only aid me in fulfilling my responsibilities but also ensure that my rights and needs as an individual with a disability are respected and addressed appropriately.

As part of my ongoing commitment to effective and clear communication, I would like to express that phone call communications present significant challenges, both in terms of fully participating in the conversation and referencing the details at a later time. Due to the nature of my personal circumstances, including living with a brain injury and being a stroke survivor, I find that alternate forms of communication, such as email or written messages, are more conducive to my ability to engage fully and retain the information exchanged. These methods allow me to better process, understand, and refer back to the details of our interactions. I appreciate your understanding and accommodation in this matter, as it will greatly enhance our communication and collaboration.

Please let me know a convenient time for us to sit down and complete this matter further or to arrange the necessary assistance. Your guidance and support in this process are invaluable to me.

Lastly, would you please contact your supervisors and inform them that I am now requesting their support in navigating this challenge? Would you also please provide your supervisor's names and contact information as well as our full chain of communications?

Thank you for your attention to this important matter.

Best regards,

David Medeiros

ABI Resources

Medicaid Acquired Brain Injury ABI Waiver Program Provider



From: Morris, Kimberly <Kimberly.Morris@ct.gov>

Sent: Friday, December 22, 2023 7:56 AM

To: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>

Subject: RE: WBR Complaint

Good Morning,

The office cannot give out legal advice, if you have procedural questions, I will be able to help you with your questions. If you would like to discuss further with regard to procedures and functions of this office, you may contact me at 860-656-4385.

Thank you.



www.ct.gov/chro



Kimberly D. Morris (she/her/hers)

Secretary II

Office of Public Hearings

Commission on Human Rights and Opportunities

450 Columbus Blvd., Suite 2

Hartford CT 06103 | AA/EOE

P: 860-418-8770 | F: 860-418-8780 | Direct: 860-541-4711 |

Kimberly.morris@ct.gov

From: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>

Sent: Thursday, December 21, 2023 8:30 AM

To: Morris, Kimberly <Kimberly.Morris@ct.gov>

Cc: ABI RESOURCES 860 942-0365 <AABIWR@live.com>

Subject: Re: WBR Complaint

Importance: High

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12.21.2023

After a comprehensive discovery process, it has been identified that Dr. Cherron Payne, from Farmington, Connecticut, has been appointed to a significant role within the Connecticut Commission on Human Rights and Opportunities (CHRO). Governor Ned Lamont announced the appointment of Dr. Payne, along with Jon FitzGerald of Bristol, to serve as administrative law judges for the CHRO. Furthermore, Dr. Payne has been designated as the chief human rights referee by Governor Lamont.

The following are new concerns and complaints.

- Judge Dr. Payne, along with Jon FitzGerald of Bristol, serve as administrative law judges for the CHRO but more importantly, Judge Dr. Cherron Payne is to ensure that my civil rights are adhered to. The communication from Judge Dr. Cherron Payne serves as several significant conflicts of interest.
- CHRO failed the Connecticut General Assembly CGA audit dated December 20, 2023. CT's state auditors provide independent and objective audits of the operations of state government and protection against waste, fraud, and abuse.
- CHRO continues to complicate communication challenges in my self-advocacy efforts.
- CHRO continues to request information that has already been submitted.
- CHRO is responsible for ensuring equity and opportunity for Connecticut small and minority business enterprises owned by women, ethnic minorities, and people with disabilities. CHRO is not ensuring equity and opportunity.

Hello Cherron and Kimberly,

May I kindly ask for your complete name, title, and contact information? Your email was sent from Kimberly Morris kimberly.morris@ct.gov and I am confused as to who will be helping me.

I am writing to formally file a complaint of whistleblower retaliation and disability discrimination against the Connecticut Commission on Human Rights and Opportunities (CHRO) and the Connecticut Department of Social Services (DSS). As a person living with a recognized disability and a professional committed to ethical standards, I have encountered actions that I believe constitute a violation of my rights under relevant state and federal laws, including the Americans with Disabilities Act.

Specifically, this complaint addresses instances where I have been subjected to adverse actions and discriminatory treatment following my disclosure of unethical practices within both entities. These actions have not only impeded my professional duties but also have disregarded my rights and accommodations as an individual with a disability.

This complaint seeks to bring these issues to light, ensuring compliance with legal standards and promoting an environment that respects my rights and the rights and dignity of all individuals, regardless of their abilities. I am prepared to provide detailed information and evidence to support these claims and look forward to a thorough and fair investigation into these matters.

I trust that the CHRO and DSS will handle this complaint with the seriousness it deserves and will take appropriate actions to address the issues raised.

Thank you for your attention to this important matter.

Best regards,

David Medeiros

ABI Resources

Medicaid Acquired Brain Injury ABI Waiver Program Provider



From: Morris, Kimberly <Kimberly.Morris@ct.gov>

Sent: Wednesday, December 20, 2023 3:10 PM

To: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>

Subject: RE: WBR Complaint

Who is the entity you will be filing the WBR Complaint against?

Thank you.



www.ct.gov/chro



Kimberly D. Morris (she/her/hers)
Secretary II
Office of Public Hearings
Commission on Human Rights and Opportunities
450 Columbus Blvd., Suite 2
Hartford CT 06103 | AA/EOE
P: 860-418-8770 | F: 860-418-8780 | Direct: 860-541-4711 |
Kimberly.morris@ct.gov

From: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>
Sent: Tuesday, December 19, 2023 12:45 PM
To: Morris, Kimberly <Kimberly.Morris@ct.gov>
Cc: ABI RESOURCES 860 942-0365 <AABIWR@live.com>
Subject: Re: WBR Complaint

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EXTERNAL EMAIL: This email originated from outside of the organization. Do not click any links or open any attachments unless you trust the sender and know the content is safe.

Would you please schedule a time for us to sit down and complete this?

Best regards,
David Medeiros
ABI Resources
Medicaid Acquired Brain Injury ABI Waiver Program Provider



From: Morris, Kimberly <Kimberly.Morris@ct.gov>
Sent: Tuesday, December 19, 2023 12:36 PM
To: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>
Subject: RE: WBR Complaint

Please fill out each line item on the complaint and have the complaint notarized, you can go to a bank to have the complaint notarized.

If you have questions regarding the procedures if this office, I'm willing to answer questions you may have.

From: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>
Sent: Tuesday, December 19, 2023 12:24 PM
To: Morris, Kimberly <Kimberly.Morris@ct.gov>
Subject: Re: WBR Complaint
Importance: High

EXTERNAL EMAIL: This email originated from outside of the organization. Do not click any links or open any attachments unless you trust the sender and know the content is safe.

Assist me in completing all these documents and notarizing them.

Best regards,
David Medeiros
ABI Resources
Medicaid Aquired Brain Injury ABI Waiver Program Provider



From: Morris, Kimberly <Kimberly.Morris@ct.gov>
Sent: Tuesday, December 19, 2023 12:22 PM
To: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>
Subject: RE: WBR Complaint

What type of accommodations do you need?

From: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>
Sent: Tuesday, December 19, 2023 12:21 PM
To: Morris, Kimberly <Kimberly.Morris@ct.gov>
Cc: ABI RESOURCES 860 942-0365 <AABIWR@live.com>

Subject: Re: WBR Complaint**Importance:** High

You don't often get email from aabiwr@live.com. [Learn why this is important](#)

EXTERNAL EMAIL: This email originated from outside of the organization. Do not click any links or open any attachments unless you trust the sender and know the content is safe.

Hello Ms. Morris,

Thank you for informing me about the need to complete the Whistleblower Retaliation (WBR) Complaint forms and having everything notarized. I appreciate your guidance in this process.

I am contacting you to request accommodations to assist me in completing all these documents and notarizing them.

Would you kindly provide me assistance with this process?

Your support would be greatly appreciated.

Thank you for your understanding.

Best regards,

David Medeiros

ABI Resources

Medicaid Acquired a Brain Injury ABI Waiver Program Provider

A.B.I. RESOURCES



From: Morris, Kimberly <Kimberly.Morris@ct.gov>

Sent: Tuesday, December 19, 2023 9:56 AM

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

Subject: WBR Complaint

Good Morning,

It has come to our attention that you would like to file a WBR Complaint.
Please fill out the attached complaint form and have it notarized and sent back.

Thank you.



www.ct.gov/chro



Kimberly D. Morris (she/her/hers)

Secretary II

Office of Public Hearings

Commission on Human Rights and Opportunities

450 Columbus Blvd., Suite 2

Hartford CT 06103 | AA/EOE

P: 860-418-8770 | F: 860-418-8780 | Direct: 860-541-4711 |

Kimberly.morris@ct.gov



A.B.I. Resources LLC

39 Kings Highway, Suite C

Gales Ferry CT, 06335

Phone: (860) 942-0365

Fax: (860) 465-9591

<https://www.CTbrainINJURY.com>

Date: 12/23/2023

**Subject: Formal Complaint Regarding the Failure to Provide
Reasonable Accommodations by the Commission on Human Rights
and Opportunities (CHRO)**

**Call for Systemic Change: CHRO's Failure in ADA Accommodation
Compliance**

Dear Governor Ned Lamont and Esteemed Members of the
Connecticut Government,

I am writing to emphasize the importance of effective communication and the dissemination of updated information regarding disability accommodations within our federal and state departments.

As an advocate for individuals with disabilities, I understand the critical role that timely and accurate information plays in ensuring that appropriate accommodations are provided. To this end, I kindly request your assistance in ensuring that all Federal and State Department Executives, along with their associated staff, are kept fully informed and updated about the latest developments, policies, and best practices in disability accommodations.

Your support in this initiative is not only crucial for compliance with legal standards but also embodies our collective commitment to creating an inclusive and supportive environment for all individuals, regardless of their abilities.

This is a formal complaint against the Commission on Human Rights and

Opportunities (CHRO) for their failure to provide the necessary reasonable accommodations in line with the Americans with Disabilities Act (ADA). My experiences as a person living with a brain injury and a stroke survivor have been met with significant challenges in the CHRO's processes, which I believe violate my rights under the ADA.

Despite clear and repeated requests for specific accommodations to assist me in completing the CHRO requirements – namely, assistance in understanding and completing complex documentation and a preference for written communication – these requests have been either misunderstood, misinterpreted as seeking legal advice, or inadequately addressed.

The lack of appropriate accommodations has severely hindered my ability to engage effectively in the CHRO process and has added unnecessary complications to an already challenging situation. This not only impacts my individual case but also sets a concerning precedent for others in similar circumstances seeking fair treatment and support from the CHRO.

The response from the CHRO suggesting I seek assistance from Legal Aid or the UConn School of Law Legal Clinic fails to recognize the nature of my request, which is for administrative support to navigate their procedures due to my disability, and not for legal advice.

I am seeking the following actions to be taken in response to this complaint:

1. A thorough review of my interactions with the CHRO, specifically focusing on their responses (or lack thereof) to my requests for reasonable accommodations.
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The legal case of David Medeiros v. State of CT, Department of Social Services, CHRO No. 2410220.'

- Whistleblower Report, Comprehensive Grievance Report and Request for Clarity. Addressing Issues within the Connecticut Medicaid Acquired Brain Injury (ABI) Waiver Program. Whistleblower Report Prepared by:
David Medeiros and ABI Resources LLC
Date: November 21, 2023
ABI Resources LLC
39 Kings Hwy STE C
Gales Ferry, CT. 06226
860 942-0365

These records are crucial for understanding the dynamics of interactions with these key figures in the context of disability rights and whistleblower protections.

Would you please ensure my request is provided to Federal and State Department Executives and Associated staff so they may ensure justice and stay completely updated and informed:

- Connecticut Department of Social Services Commissioner Andrea Barton Reeves
- U.S. Senators Richard Blumenthal and Chris Murphy
- U.S. House Representatives John Larson, Joe Courtney, Rosa DeLauro, Jim Himes, and Jahana Hayes
- Connecticut Governor Ned Lamont
- Lieutenant Governor Susan Bysiewicz
- Secretary of State Denise Merrill
- Attorney General William Tong
- State Treasurer Shawn Wooden
- State Comptroller Kevin Lembo

- State Auditors John Geragosian and Rob Kane
- U.S. Department of Health and Human Services (HHS) Secretary Xavier Becerra
- Centers for Medicare & Medicaid Services (CMS) Administrator Chiquita Brooks-LaSure
- U.S. Department of Justice (DOJ) Attorney General Merrick Garland
- U.S. Equal Employment Opportunity Commission (EEOC) Chair Charlotte A. Burrows
- Office of Special Counsel (OSC) Special Counsel Henry J. Kerner
- Office for Civil Rights (OCR) at HHS Acting Director Melanie Fontes Rainer
- The Department of Labor DOL
- Government Accountability Office GAO
- Connecticut General Assembly CGA

Follow-up Mechanism: I respectfully request a formal response to this complaint along with an action plan for addressing these concerns.

Call for External Review or Audit: I urge an independent audit of the CHRO's processes to ensure objective assessment and rectification.

I trust that this matter will be addressed with the seriousness it warrants, not only for my case but for the benefit of all individuals with disabilities in Connecticut.

Thank you for your attention to this matter. I look forward to a prompt and constructive response that serves the greatest good.

Best regards,
David Medeiros
 David Medeiros
 ABI Resources, CEO, Director, Team Member
 Medicaid Acquired Brain Injury ABI Waiver Program Support Provider.





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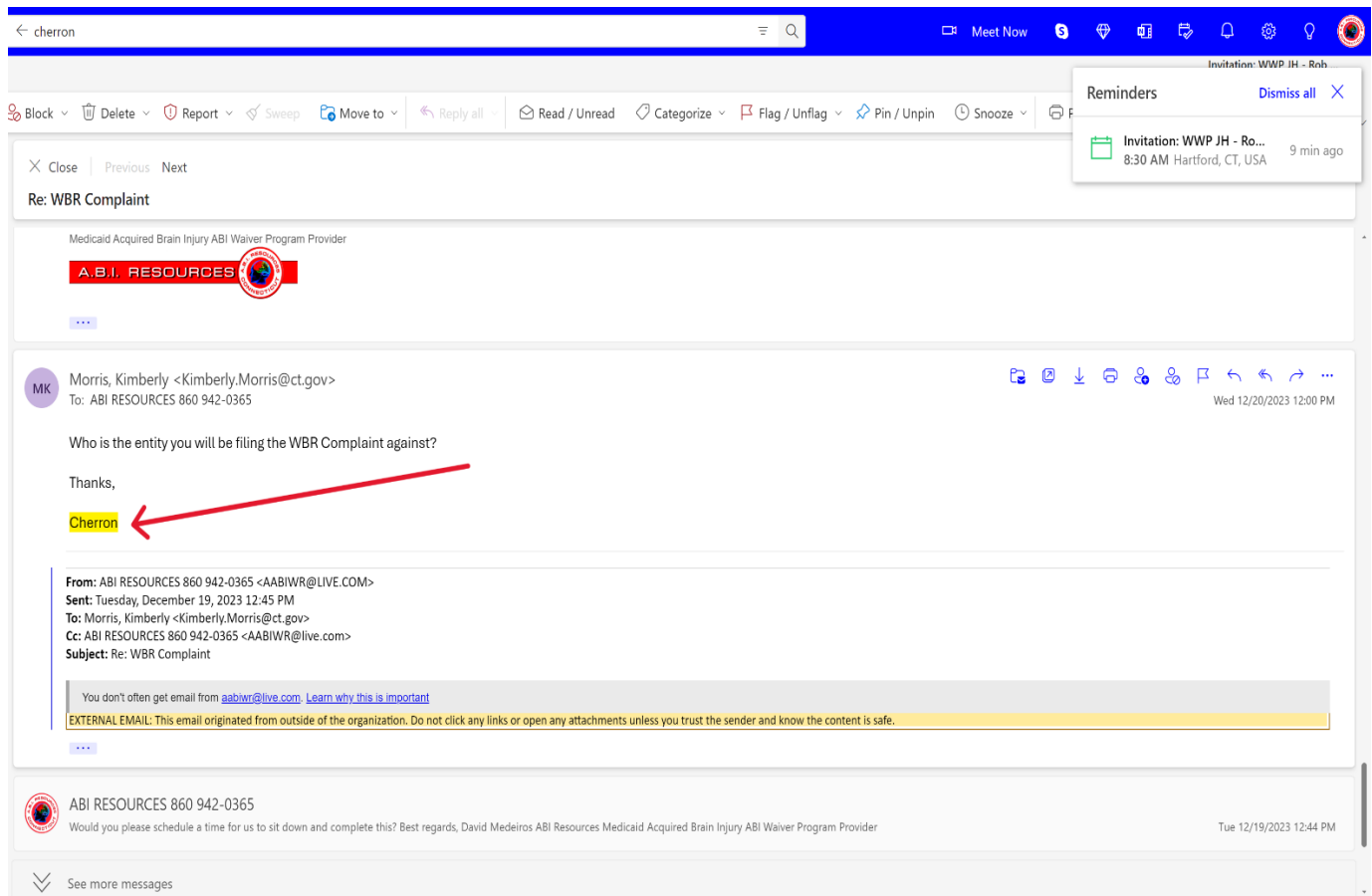
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Best regards,
David Medeiros
 David Medeiros
 ABI Resources, CEO, Director, Team Member
 Medicaid Acquired Brain Injury ABI Waiver Program Support Provider.



CHRO Judge Dr. Cherron Payne



After a comprehensive discovery process, it has been identified that Dr. Cherron Payne, from Farmington, Connecticut, has been appointed to a significant role within the Connecticut Commission on Human Rights and Opportunities (CHRO). Governor Ned Lamont announced the appointment of Dr. Payne, along with Jon FitzGerald of Bristol, to serve as administrative law judges for the CHRO. Furthermore, Dr. Payne has been designated as the chief human rights referee by Governor Lamont.

The following are new concerns and complaints.

- Judge Dr. Payne, along with Jon FitzGerald of Bristol, serve as administrative law judges for the CHRO but more importantly, Judge Dr. Cherron Payne is to ensure that my civil rights are adhered to. The communication from Judge Dr. Cherron Payne serves as several significant conflicts of interest.
- CHRO failed the Connecticut General Assembly CGA audit dated December 20, 2023. CT's state auditors provide independent and objective audits of the operations of state government and protection against waste, fraud, and abuse.
- CHRO continues to complicate communication challenges in my self-advocacy efforts.
- CHRO continues to request information that has already been submitted.

- CHRO is responsible for ensuring equity and opportunity for Connecticut small and minority business enterprises owned by women, ethnic minorities, and people with disabilities. CHRO is not ensuring equity and opportunity.

NOT THE COMMISSIONER



State of Connecticut
COMMISSION ON HUMAN RIGHTS AND OPPORTUNITIES
 Capitol Region Office ~ 450 Columbus Boulevard, Suite 2, Hartford, CT 06103
Promoting Equality and Justice for all People

December 15, 2023

NOT THE COMMISSIONER

Via email: deidre.gifford@ct.gov

Diedre S. Gifford, MD, MPH
 Commissioner
 Department of Social Services
 55 Farmington Avenue
 Hartford, CT 06105

RE: David Medeiros v. State of CT, Department of Social Services
CHRO No. 2410220
EEOC No. N/A

Dear Commissioner Gifford:

A complaint, referenced above, has been filed with the Commission on March 28, 2023, but due to an administrative error the service was delayed, the Commission apologizes about any inconvenience this may have the caused the Respondent. A copy of the complaint is attached.

The enclosed General Notice advises you of your rights, duties, and responsibilities. Please read carefully the information contained in the notice. The enclosed Notice Regarding Out of State Attorneys advises that all attorneys practicing before the Commission must be admitted to practice law in Connecticut and that it is the responsibility of all counsel to comply with Connecticut practice rules. Also enclosed is important information with respect to the no fault conciliation process. The Commission is available to assist you if you wish to pursue settlement of this complaint. If you wish to conciliate the complaint prior to providing an answer, you must notify the Commission within 10 days of receipt of the enclosed complaint.

You must file an answer to the complaint under oath with the Commission within 30 days of receipt of this complaint unless pre-answer conciliation has been requested. If you fail to answer the complaint within this time, you may be defaulted by the Commission. Parties are encouraged to submit all filings by email only without an additional hardcopy if possible. You must email a scanned copy of your signed and notarized Answer to chro.capitol@ct.gov and dedra.morris@ct.gov.

Main (860) 566-7710 ~ Fax (860) 566-1997
www.ct.gov/chro - Toll Free in Connecticut (800) 477-8737
 Affirmative Action/Equal Opportunity Employer

263 DAYS LATER



State of Connecticut
COMMISSION ON HUMAN RIGHTS AND OPPORTUNITIES

Capitol Region Office ~ 450 Columbus Boulevard, Suite 2, Hartford, CT 06103

Promoting Equality and Justice for all People

December 15, 2023

Via email: aabiwr@live.com

David Medeiros
215 Mountain Street
Willimantic, CT 06226

RE: David Medeiros v. State of CT, Department of Social Services
CHRO No. 2410220
EEOC No. N/A

Dear Mr. Medeiros:

This letter confirms that your complaint, referenced above, has been filed with the Commission on March 28, 2023, but due to an administrative error the service was delayed, the Commission apologizes for any inconvenience this may have caused you.

The enclosed General Notice advises you of your rights, duties, and responsibilities. **Please read carefully the information contained in the notice.**

You have a duty to respond timely to any information or assistance requested and to cooperate with the Commission at all times. It is your sole duty and responsibility to notify the Commission of your whereabouts at all times throughout the pendency of this complaint. In the event that your address, telephone number, or email address changes, it is your duty to notify the Commission immediately in writing. **Parties are encouraged to submit all filings by email only without an additional hardcopy if possible. Emailed filings with Capitol Region Office should be emailed to CHRO.Capitol@ct.gov.**

Also, you have a duty to certify to the Commission that you have provided the Respondent with copies of all documents you file with the Commission. For your convenience and use, the enclosed Certification Form is made available.

If I can be of further assistance, please do not hesitate to contact me.

NO NAME

Commission on Human Rights and Opportunities
Capitol Region Office
450 Columbus Boulevard, Suite 2
Hartford, CT 06103
860-541-3456

Main (860) 566-7710 ~ Fax (860) 566-1997
www.ct.gov/chro - Toll Free in Connecticut (800) 477-8737
Affirmative Action/Equal Opportunity Employer



December 20, 2023

Today, our office released the audit [report](#) and audit [summary](#) on the Commission on Human Rights and Opportunities (CHRO) for the fiscal years ended June 30, 2021 and 2022.

The report notes that in all 21 discrimination complaints reviewed, CHRO did not consistently adhere to statutory processing deadlines. In addition, our review of CHRO's CO-59 asset management reports determined the reports were unreliable, due in part, to a lack of complete physical inventory inspections and reconciliations.

If you would like additional information, or if we can be of further assistance, please do not hesitate to contact us.

Sincerely,

John C. Geragosian
State Auditor

Clark J. Chapin
State Auditor



AUDIT SUMMARY

Commission on Human Rights and Opportunities

Fiscal Years Ended June 30, 2021 and 2022

ABOUT THE AGENCY



The principal duty of the Commission on Human Rights and Opportunities (CHRO) is to enforce state laws prohibiting discrimination in employment, housing, credit, and public accommodations through civil and human rights law enforcement.

CHRO processes discrimination complaints through case assessment, review, mediation, investigation, conciliation, prosecution, and adjudication. As part of its mission, CHRO acts as an advocate and provides education and outreach. It also enforces affirmative action laws and state agency contract compliance.

ABOUT THE AUDIT

We have audited certain operations of the Commission on Human Rights and Opportunities in fulfillment of our duties under Section 2-90 of the Connecticut General Statutes. The scope of our audit included, but was not necessarily limited to, the fiscal years ended June 30, 2021 and 2022. The objectives of our audit were to evaluate the:

1. Commission's internal controls over significant management and financial functions;
2. Commission's compliance with policies and procedures internal to the department or promulgated by other state agencies, as well as certain legal provisions; and
3. Effectiveness, economy, and efficiency of certain management practices and operations, including certain financial transactions.

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

 **8 Findings**

Our audit identified internal control deficiencies; instances of noncompliance with laws, regulations, or policies; and a need for improvement in practices and procedures that warrant management's attention.

 **4 Repeat Finding**

NOTEWORTHY FINDINGS



Findings

1

In 21 of 21 discrimination complaints reviewed, CHRO did not consistently adhere to statutory processing deadlines.

2

Our review of CHRO's CO-59 asset management reports determined the reports were unreliable, due in part, to a lack of complete physical inventory inspections and reconciliations.

3

CHRO did not have sufficient information technology resources to effectively support its three areas of service in discrimination case management, contractor compliance, and affirmative action reporting.

4

CHRO was unable to document that it met statutorily required timelines for affirmative action plans submitted by contractors because it did not track the date that the plans were approved or disapproved.



Recommendations

CHRO should process discrimination complaints and determine reasonable cause within the statutory deadlines.

CHRO should work with the Department of Labor to ensure compliance with asset management requirements in Section 4-36 of the General Statutes and the State Property Control Manual.

CHRO should continue to pursue funding and obtain appropriate staffing resources to improve its information management capacity and agency efficiency. The commission should develop a strategy to upgrade its current information technology systems, provide training, and implement electronic processing of state agency and contractor affirmative action plans.

CHRO should improve monitoring over the review of contractor affirmative action plans to ensure that it meets statutory deadlines.



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Date: 12/23/2023

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Date: 12/28/2023

Complaint: Evaluating the Implications and Solutions for Equitable Referral Distribution in Connecticut's Disability Support Services for people and family programs managed by The Connecticut Department of Social Services.

When considering the recent update on care management practices, particularly in the context of the methodology for distributing referrals within the Department of Social Services provider network, there are several potential conflicts of interest that are concerning. Care management states:

“If a Client doesn't have a preferred provider, the Care Manager uses a specially designed, proprietary software system to ensure equitable randomization of referrals to a provider enrolled with the Department of Social Services that can render the required services.”

These conflicts can affect both service recipients (individuals and families) and service providers. There is no specific mention of a CMS-approved systematic electronic randomized referral program in the current documentation and resources available from HHS and CMS.

For Recipients and Families:

Lack of Choice Transparency: If clients are unaware of the full range of available providers, they might not be able to make a truly informed choice, potentially leading to a mismatch in services received and services needed.

Potential Bias in Software Algorithm: The proprietary software used for

randomizing referrals may have inherent biases or flaws that could skew referral distribution, possibly disadvantaging certain groups of recipients.

Limited Accountability: Without public access to the referral process, recipients and their families might have limited recourse to question or challenge referral decisions.

Perceived Inequity: Even if the system is fair in practice, the perception of inequity can undermine trust in the system and affect recipient satisfaction and engagement with services.

Conflict with Personal Preferences: The system might override personal preferences of recipients in favor of an algorithmic choice, which could lead to dissatisfaction or less effective services.

The implementation of a referral distribution using a proprietary software system, if not carefully managed, presents several risks that could negatively impact, discriminate, manipulate, mislead, and inadequately accommodate disabled people and their families. It's crucial to comprehensively understand these risks to ensure that the system is fair and equitable for all involved.

Risk of Inequitable Service Access

Discrimination in Algorithm: If the software algorithm isn't designed with an in-depth understanding of diverse needs, it could inadvertently favor certain groups over others, leading to systemic discrimination.

Geographical Disparities: The system might not adequately account for geographic distribution, leading to some areas being underserved.

Manipulation of Service Provision

Provider Gaming the System: Providers might find ways to manipulate the

system to receive more referrals, regardless of their suitability or quality of service.

Inaccurate Representation of Services: Providers could misrepresent their capabilities or specialize in certain areas to receive more referrals, potentially neglecting the broader needs of the disabled community.

Misleading Information to Recipients

Lack of Transparency: Without clear insight into how the referral system works, families may be misled into believing they are receiving the best possible match for services when this might not be the case.

Over-reliance on Software Decision: Families might assume that the software's choice is the most suitable without exploring other options that might better meet their specific needs.

Failure to Accommodate Specific Needs

One-Size-Fits-All Approach: A software-driven approach may not effectively account for the unique, individualized needs of each disabled person, leading to inadequate service provision.

Lack of Personalization: The algorithm may not consider the personal preferences, cultural needs, or specific circumstances of individuals and families.

Limited Recourse for Inadequate Service Matching

Difficulty in Revising Referrals: Once a referral is made, it might be challenging for families to seek a revision or a new provider if the match is not suitable.

Inadequate Complaint Resolution Mechanisms: If there aren't effective channels for addressing grievances, families may feel powerless to challenge or change unsatisfactory service arrangements.

Potential for Exploitation and Abuse

Vulnerability to Poor Service Quality: Disabled individuals, being a vulnerable population, might be subjected to lower-quality services if providers are not adequately vetted or monitored.

Risk of Fraud: There could be an increased risk of fraudulent activities, with unscrupulous entities exploiting the system for financial gain.

Social and Emotional Impacts

Erosion of Trust: A system perceived as unfair or opaque can erode trust among disabled individuals and their families, impacting their willingness to seek necessary services.

Stress and Anxiety: Dealing with an impersonal and potentially unsuitable referral system can add significant stress and anxiety to already challenging situations.

Wider Systemic Issues

Resource Misallocation: An inefficient referral system can lead to a misallocation of vital resources, affecting the overall quality and availability of services.

Barrier to Service Improvement: If feedback from recipients is not adequately captured and addressed, there will be little incentive for service improvement and innovation.

Legal and Ethical Implications

Non-Compliance with ADA: The system might inadvertently fail to comply with the Americans with Disabilities Act (ADA) and other legal mandates for equitable service provision.

Ethical Concerns: Ethical issues arise when a system does not fully respect the dignity, rights, and specific needs of disabled individuals.

Addressing these risks requires a robust, transparent, and flexible approach that prioritizes the diverse needs and preferences of disabled individuals and their families. Regular monitoring, stakeholder feedback, and a willingness to adjust the system based on real-world impacts are essential to ensuring it serves its intended purpose effectively and equitably.

For Service Providers:

Equitable Access to Referrals: There is a potential for unequal distribution of referrals, which can financially impact smaller providers or those new to the network.

Transparency in Selection Criteria: Lack of clarity about how providers are evaluated and chosen by the software can create distrust or a sense of unfair competition among providers.

Dependency on Algorithm for Business Growth: Providers may become overly dependent on the software for referrals, reducing their ability to grow and market their services independently.

Potential for Manipulation: If certain providers have more knowledge or influence over the system, they could potentially manipulate it to their advantage.

Market Monopolization: Larger providers or those with more resources could dominate the referral process, leading to a monopolistic situation and stifling competition.

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Overall Systemic Concerns:

Lack of Oversight and Regulation: Without external oversight, the system's internal checks and balances might be insufficient to prevent conflicts of interest.

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- Hector Arzeno - District 151, Democratic

Consider consultation with recognized esteemed organizations.

National and International Organizations:

- American Association of People with Disabilities (AAPD)
- The Consortium for Citizens with Disabilities (CCD)
- Disability Rights Education and Defense Fund (DREDF)
- Disabled in Action (DIA)
- Equip for Equality
- National Disability Rights Network (NDRN)
- National Council on Independent Living (NCIL)
- Disability Rights Advocates (DRA)

Please refer to the case of David Medeiros v. State of CT Department of Social Services (CHRO No. 2410220), in which I am directly involved. This case underlines the urgent need for transparency and accountability within state-managed disability support programs. Given the direct connection of this request to the following

- Whistleblower Report, Comprehensive Grievance Report and Request for Clarity. Addressing Issues within the Connecticut Medicaid Acquired Brain Injury (ABI) Waiver Program.
Whistleblower Report Prepared by: David Medeiros and ABI Resources LLC Date: November 21, 2023 ABI Resources LLC 39 Kings Hwy STE C Gales Ferry, CT. 06226 860 942-0365
- 12.23.2023 Letter - Governor Ned Lamont: Addressing Systemic Failure in ADA Compliance and Disability Discrimination in Connecticut – A Call to Action Against Whistleblower Retaliation and the Failure of CT DSS and CHRO to Uphold Disability Rights.

Thank you for your assistance and consideration.

Best regards,
David Medeiros
David Medeiros
ABI Resources, CEO, Director, Team Member
Medicaid Acquired Brain Injury ABI Waiver Program Support Provider.



**A.B.I. Resources LLC**

39 Kings Highway, Suite C

Gales Ferry CT, 06335

Phone: (860) 942-0365

Fax: (860) 465-9591

<https://www.CTbrainINJURY.com>

Date: 12/28/2023

Complaint: Evaluating the Implications and Solutions for Equitable Referral Distribution in Connecticut's Disability Support Services for people and family programs managed by The Connecticut Department of Social Services.

When considering the recent update on care management practices, particularly in the context of the methodology for distributing referrals within the Department of Social Services provider network, there are several potential conflicts of interest that are concerning. Care management states:

“If a Client doesn't have a preferred provider, the Care Manager uses a specially designed, proprietary software system to ensure equitable randomization of referrals to a provider enrolled with the Department of Social Services that can render the required services.”

These conflicts can affect both service recipients (individuals and families) and service providers. There is no specific mention of a CMS-approved systematic electronic randomized referral program in the current documentation and resources available from HHS and CMS.

For Recipients and Families:

Lack of Choice Transparency: If clients are unaware of the full range of available providers, they might not be able to make a truly informed choice, potentially leading to a mismatch in services received and services needed.

Potential Bias in Software Algorithm: The proprietary software used for

randomizing referrals may have inherent biases or flaws that could skew referral distribution, possibly disadvantaging certain groups of recipients.

Limited Accountability: Without public access to the referral process, recipients and their families might have limited recourse to question or challenge referral decisions.

Perceived Inequity: Even if the system is fair in practice, the perception of inequity can undermine trust in the system and affect recipient satisfaction and engagement with services.

Conflict with Personal Preferences: The system might override personal preferences of recipients in favor of an algorithmic choice, which could lead to dissatisfaction or less effective services.

The implementation of a referral distribution using a proprietary software system, if not carefully managed, presents several risks that could negatively impact, discriminate, manipulate, mislead, and inadequately accommodate disabled people and their families. It's crucial to comprehensively understand these risks to ensure that the system is fair and equitable for all involved.

Risk of Inequitable Service Access

Discrimination in Algorithm: If the software algorithm isn't designed with an in-depth understanding of diverse needs, it could inadvertently favor certain groups over others, leading to systemic discrimination.

Geographical Disparities: The system might not adequately account for geographic distribution, leading to some areas being underserved.

Manipulation of Service Provision

Provider Gaming the System: Providers might find ways to manipulate the

system to receive more referrals, regardless of their suitability or quality of service.

Inaccurate Representation of Services: Providers could misrepresent their capabilities or specialize in certain areas to receive more referrals, potentially neglecting the broader needs of the disabled community.

Misleading Information to Recipients

Lack of Transparency: Without clear insight into how the referral system works, families may be misled into believing they are receiving the best possible match for services when this might not be the case.

Over-reliance on Software Decision: Families might assume that the software's choice is the most suitable without exploring other options that might better meet their specific needs.

Failure to Accommodate Specific Needs

One-Size-Fits-All Approach: A software-driven approach may not effectively account for the unique, individualized needs of each disabled person, leading to inadequate service provision.

Lack of Personalization: The algorithm may not consider the personal preferences, cultural needs, or specific circumstances of individuals and families.

Limited Recourse for Inadequate Service Matching

Difficulty in Revising Referrals: Once a referral is made, it might be challenging for families to seek a revision or a new provider if the match is not suitable.

Inadequate Complaint Resolution Mechanisms: If there aren't effective channels for addressing grievances, families may feel powerless to challenge or change unsatisfactory service arrangements.

Potential for Exploitation and Abuse

Vulnerability to Poor Service Quality: Disabled individuals, being a vulnerable population, might be subjected to lower-quality services if providers are not adequately vetted or monitored.

Risk of Fraud: There could be an increased risk of fraudulent activities, with unscrupulous entities exploiting the system for financial gain.

Social and Emotional Impacts

Erosion of Trust: A system perceived as unfair or opaque can erode trust among disabled individuals and their families, impacting their willingness to seek necessary services.

Stress and Anxiety: Dealing with an impersonal and potentially unsuitable referral system can add significant stress and anxiety to already challenging situations.

Wider Systemic Issues

Resource Misallocation: An inefficient referral system can lead to a misallocation of vital resources, affecting the overall quality and availability of services.

Barrier to Service Improvement: If feedback from recipients is not adequately captured and addressed, there will be little incentive for service improvement and innovation.

Legal and Ethical Implications

Non-Compliance with ADA: The system might inadvertently fail to comply with the Americans with Disabilities Act (ADA) and other legal mandates for equitable service provision.

Ethical Concerns: Ethical issues arise when a system does not fully respect the dignity, rights, and specific needs of disabled individuals.

Addressing these risks requires a robust, transparent, and flexible approach that prioritizes the diverse needs and preferences of disabled individuals and their families. Regular monitoring, stakeholder feedback, and a willingness to adjust the system based on real-world impacts are essential to ensuring it serves its intended purpose effectively and equitably.

For Service Providers:

Equitable Access to Referrals: There is a potential for unequal distribution of referrals, which can financially impact smaller providers or those new to the network.

Transparency in Selection Criteria: Lack of clarity about how providers are evaluated and chosen by the software can create distrust or a sense of unfair competition among providers.

Dependency on Algorithm for Business Growth: Providers may become overly dependent on the software for referrals, reducing their ability to grow and market their services independently.

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- Melissa E. Osborne - District 16, Democratic
- Eleni Kavros DeGraw - District 17, Democratic
- Jillian Gilchrest - District 18, Democratic
- Tammy Exum - District 19, Democratic
- Kate Farrar - District 20, Democratic
- Mike Demicco - District 21, Democratic
- Francis Rexford Cooley - District 22, Republican
- Devin Carney - District 23, Republican
- Manny Sanchez - District 24, Democratic
- Bobby Sanchez - District 25, Democratic
- Peter Tercyak - District 26, Democratic
- Gary Turco - District 27, Democratic
- Amy Morrin Bello - District 28, Democratic
- Kerry Szeps Wood - District 29, Democratic
- Donna Veach - District 30, Republican
- Jill Barry - District 31, Democratic
- Christie Carpino - District 32, Republican
- Brandon Chafee - District 33, Democratic
- Irene Haines - District 34, Republican
- Chris Aniskovich - District 35, Republican
- Christine Palm - District 36, Democratic
- Holly Cheeseman - District 37, Republican

- Kathleen McCarty - District 38, Republican
- Anthony Nolan - District 39, Democratic
- Christine Conley - District 40, Democratic
- André Bumgardner - District 41, Democratic
- Keith Denning - District 42, Democratic
- Greg Howard - District 43, Republican
- Anne Dauphinais - District 44, Republican
- Brian Lanoue - District 45, Republican
- Derell Wilson - District 46, Democratic
- Doug Dubitsky - District 47, Republican
- Mark DeCaprio - District 48, Republican
- Susan Johnson - District 49, Democratic
- Pat Boyd - District 50, Democratic
- Ricky Hayes - District 51, Republican
- Kurt Vail - District 52, Republican
- Tammy Nuccio - District 53, Republican
- Gregory Haddad - District 54, Democratic
- Steve Weir - District 55, Republican
- Kevin Brown - District 56, Democratic
- Jaime Foster - District 57, Democratic
- Tom Arnone - District 58, Democratic
- Carol Hall - District 59, Republican
- Jane Garibay - District 60, Democratic
- Tami Zawistowski - District 61, Republican
- Mark Anderson - District 62, Republican
- Jay Case - District 63, Republican
- Maria Horn - District 64, Democratic
- Michelle Cook - District 65, Democratic
- Karen Reddington-Hughes - District 66, Republican
- William Buckbee - District 67, Republican
- Joe Polletta - District 68, Republican
- Cindy Harrison - District 69, Republican
- Seth Bronko - District 70, Republican
- William Pizzuto - District 71, Republican
- Larry Butler - District 72, Democratic
- Ronald Napoli Jr. - District 73, Democratic
- Michael DiGiovancarlo - District 74, Democratic
- Geraldo Reyes - District 75, Democratic
- John Piscopo - District 76, Republican
- Cara Pavalock-D'Amato - District 77, Republican
- Joe Hoxha - District 78, Republican
- Mary Fortier - District 79, Democratic
- Gale Mastrofrancesco - District 80, Republican
- Christopher Poulos - District 81, Democratic
- Michael Quinn - District 82, Democratic
- Jonathan Fazzino - District 83, Democratic
- Hilda Santiago - District 84, Democratic
- Mary Mushinsky - District 85, Democratic
- Vincent Candelora - District 86, Republican
- Dave Yaccarino Sr. - District 87, Republican
- Joshua Elliott - District 88, Democratic
- Lezlye Zupkus - District 89, Republican
- Craig Fishbein - District 90, Republican
- Michael D'Agostino - District 91, Democratic

- Patricia Dillon - District 92, Democratic
- Toni Walker - District 93, Democratic
- Robyn Porter - District 94, Democratic
- Juan Candelaria - District 95, Democratic
- Roland J. Lemar - District 96, Democratic
- Alphonse Paolillo - District 97, Democratic
- Moira Rader - District 98, Democratic
- Joseph Zullo - District 99, Republican
- Kai Juanna Belton - District 100, Democratic
- John-Michael Parker - District 101, Democratic
- Robin Comey - District 102, Democratic
- Liz Linehan - District 103, Democratic
- Kara Rochelle - District 104, Democratic
- Nicole Klarides-Ditria - District 105, Republican
- Mitch Bolinsky - District 106, Republican
- Marty Foncello - District 107, Republican
- Pat Callahan - District 108, Republican
- Farley Santos - District 109, Democratic
- Bob Godfrey - District 110, Democratic
- Aimee Berger-Girvalo - District 111, Democratic
- Tony Scott - District 112, Republican
- Jason Perillo - District 113, Republican
- Mary Welander - District 114, Democratic
- Vacant - District 115
- Treneé McGee - District 116, Democratic
- Charles Ferraro - District 117, Republican
- Frank Smith - District 118, Democratic
- Kathy Kennedy - District 119, Republican
- Laura Dancho - District 120, Republican
- Joe Gresko - District 121, Democratic
- Ben McGorty - District 122, Republican
- David Rutigliano - District 123, Republican
- Andre Baker - District 124, Democratic
- Tom O'Dea - District 125, Republican
- Fred Gee Jr. - District 126, Democratic
- Marcus Brown - District 127, Democratic
- Christopher Rosario - District 128, Democratic
- Steven Stafstrom - District 129, Democratic
- Antonio Felipe - District 130, Democratic
- David Labriola - District 131, Republican
- Jennifer Leeper - District 132, Democratic
- Cristin Vahey - District 133, Democratic
- Sarah Keitt - District 134, Democratic
- Anne Hughes - District 135, Democratic
- Jonathan Steinberg - District 136, Democratic
- Kadeem Roberts - District 137, Democratic
- Rachel Chaleski - District 138, Republican
- Kevin Ryan - District 139, Democratic
- Travis Simms - District 140, Democratic
- Tracy Marra - District 141, Republican
- Lucy Dathan - District 142, Democratic
- Dominique Johnson - District 143, Democratic
- Hubert Delany - District 144, Democratic
- Corey Paris - District 145, Democratic

- David Michel - District 146, Democratic
- Matt Blumenthal - District 147, Democratic
- Anabel Figueroa - District 148, Democratic
- Rachel Khanna - District 149, Democratic
- Steve Meskers - District 150, Democratic
- Hector Arzeno - District 151, Democratic

Consider consultation with recognized esteemed organizations.

National and International Organizations:

- American Association of People with Disabilities (AAPD)
- The Consortium for Citizens with Disabilities (CCD)
- Disability Rights Education and Defense Fund (DREDF)
- Disabled in Action (DIA)
- Equip for Equality
- National Disability Rights Network (NDRN)
- National Council on Independent Living (NCIL)
- Disability Rights Advocates (DRA)

Please refer to the case of David Medeiros v. State of CT Department of Social Services (CHRO No. 2410220), in which I am directly involved. This case underlines the urgent need for transparency and accountability within state-managed disability support programs. Given the direct connection of this request to the following

- Whistleblower Report, Comprehensive Grievance Report and Request for Clarity. Addressing Issues within the Connecticut Medicaid Acquired Brain Injury (ABI) Waiver Program.
Whistleblower Report Prepared by: David Medeiros and ABI Resources LLC Date: November 21, 2023 ABI Resources LLC 39 Kings Hwy STE C Gales Ferry, CT. 06226 860 942-0365
- 12.23.2023 Letter - Governor Ned Lamont: Addressing Systemic Failure in ADA Compliance and Disability Discrimination in Connecticut – A Call to Action Against Whistleblower Retaliation and the Failure of CT DSS and CHRO to Uphold Disability Rights.

Thank you for your assistance and consideration.

Best regards,
David Medeiros
David Medeiros
ABI Resources, CEO, Director, Team Member
Medicaid Acquired Brain Injury ABI Waiver Program Support Provider.





A.B.I. Resources LLC

39 Kings Highway, Suite C

Gales Ferry CT, 06335

Phone: (860) 942-0365

Fax: (860) 465-9591

<https://www.CTbrainINJURY.com>

Date: 12/23/2023

**Subject: Formal Complaint Regarding the Failure to Provide
Reasonable Accommodations by the Commission on Human Rights
and Opportunities (CHRO)**

**Call for Systemic Change: CHRO's Failure in ADA Accommodation
Compliance**

Dear Governor Ned Lamont and Esteemed Members of the
Connecticut Government,

I am writing to emphasize the importance of effective communication and the dissemination of updated information regarding disability accommodations within our federal and state departments.

As an advocate for individuals with disabilities, I understand the critical role that timely and accurate information plays in ensuring that appropriate accommodations are provided. To this end, I kindly request your assistance in ensuring that all Federal and State Department Executives, along with their associated staff, are kept fully informed and updated about the latest developments, policies, and best practices in disability accommodations.

Your support in this initiative is not only crucial for compliance with legal standards but also embodies our collective commitment to creating an inclusive and supportive environment for all individuals, regardless of their abilities.

This is a formal complaint against the Commission on Human Rights and

Opportunities (CHRO) for their failure to provide the necessary reasonable accommodations in line with the Americans with Disabilities Act (ADA). My experiences as a person living with a brain injury and a stroke survivor have been met with significant challenges in the CHRO's processes, which I believe violate my rights under the ADA.

Despite clear and repeated requests for specific accommodations to assist me in completing the CHRO requirements – namely, assistance in understanding and completing complex documentation and a preference for written communication – these requests have been either misunderstood, misinterpreted as seeking legal advice, or inadequately addressed.

The lack of appropriate accommodations has severely hindered my ability to engage effectively in the CHRO process and has added unnecessary complications to an already challenging situation. This not only impacts my individual case but also sets a concerning precedent for others in similar circumstances seeking fair treatment and support from the CHRO.

The response from the CHRO suggesting I seek assistance from Legal Aid or the UConn School of Law Legal Clinic fails to recognize the nature of my request, which is for administrative support to navigate their procedures due to my disability, and not for legal advice.

I am seeking the following actions to be taken in response to this complaint:

1. A thorough review of my interactions with the CHRO, specifically focusing on their responses (or lack thereof) to my requests for reasonable accommodations.
2. Implementation of measures to ensure that the CHRO staff are adequately trained in ADA compliance, particularly in understanding and providing reasonable accommodations to individuals with disabilities.
3. Provision of the necessary accommodations to allow me to complete the CHRO process effectively, as originally requested.

I believe these steps are essential not only for addressing my individual situation but also for ensuring that the CHRO upholds its responsibilities under

the ADA and provides an accessible and equitable process for all individuals, regardless of their abilities.

The legal case of David Medeiros v. State of CT, Department of Social Services, CHRO No. 2410220.'

- Whistleblower Report, Comprehensive Grievance Report and Request for Clarity. Addressing Issues within the Connecticut Medicaid Acquired Brain Injury (ABI) Waiver Program. Whistleblower Report Prepared by:
David Medeiros and ABI Resources LLC
Date: November 21, 2023
ABI Resources LLC
39 Kings Hwy STE C
Gales Ferry, CT. 06226
860 942-0365

These records are crucial for understanding the dynamics of interactions with these key figures in the context of disability rights and whistleblower protections.

Would you please ensure my request is provided to Federal and State Department Executives and Associated staff so they may ensure justice and stay completely updated and informed:

- Connecticut Department of Social Services Commissioner Andrea Barton Reeves
- U.S. Senators Richard Blumenthal and Chris Murphy
- U.S. House Representatives John Larson, Joe Courtney, Rosa DeLauro, Jim Himes, and Jahana Hayes
- Connecticut Governor Ned Lamont
- Lieutenant Governor Susan Bysiewicz
- Secretary of State Denise Merrill
- Attorney General William Tong
- State Treasurer Shawn Wooden
- State Comptroller Kevin Lembo

- State Auditors John Geragosian and Rob Kane
- U.S. Department of Health and Human Services (HHS) Secretary Xavier Becerra
- Centers for Medicare & Medicaid Services (CMS) Administrator Chiquita Brooks-LaSure
- U.S. Department of Justice (DOJ) Attorney General Merrick Garland
- U.S. Equal Employment Opportunity Commission (EEOC) Chair Charlotte A. Burrows
- Office of Special Counsel (OSC) Special Counsel Henry J. Kerner
- Office for Civil Rights (OCR) at HHS Acting Director Melanie Fontes Rainer
- The Department of Labor DOL
- Government Accountability Office GAO
- Connecticut General Assembly CGA

Follow-up Mechanism: I respectfully request a formal response to this complaint along with an action plan for addressing these concerns.

Call for External Review or Audit: I urge an independent audit of the CHRO's processes to ensure objective assessment and rectification.

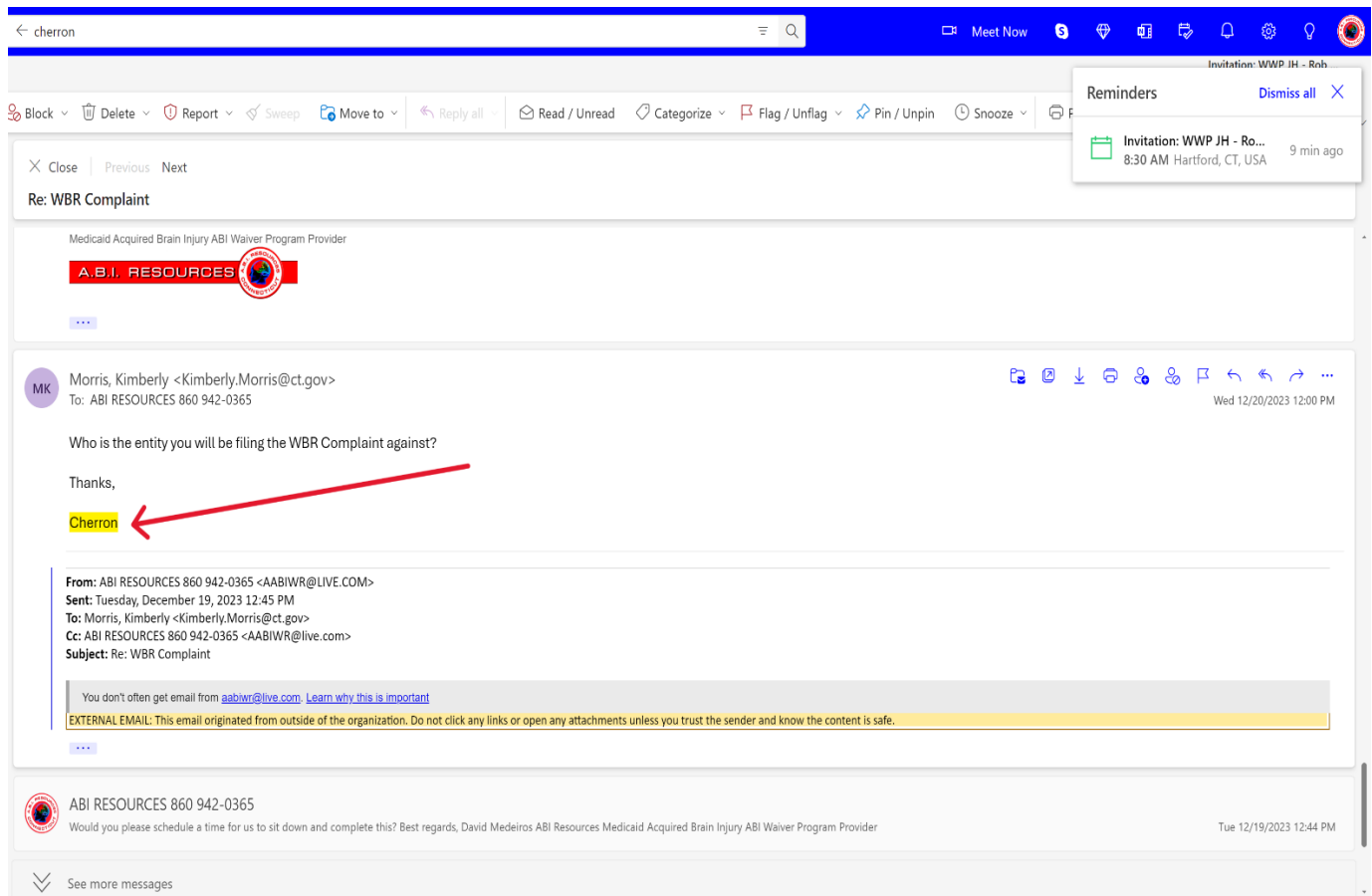
I trust that this matter will be addressed with the seriousness it warrants, not only for my case but for the benefit of all individuals with disabilities in Connecticut.

Thank you for your attention to this matter. I look forward to a prompt and constructive response that serves the greatest good.

Best regards,
David Medeiros
 David Medeiros
 ABI Resources, CEO, Director, Team Member
 Medicaid Acquired Brain Injury ABI Waiver Program Support Provider.



CHRO Judge Dr. Cherron Payne



After a comprehensive discovery process, it has been identified that Dr. Cherron Payne, from Farmington, Connecticut, has been appointed to a significant role within the Connecticut Commission on Human Rights and Opportunities (CHRO). Governor Ned Lamont announced the appointment of Dr. Payne, along with Jon FitzGerald of Bristol, to serve as administrative law judges for the CHRO. Furthermore, Dr. Payne has been designated as the chief human rights referee by Governor Lamont.

The following are new concerns and complaints.

- Judge Dr. Payne, along with Jon FitzGerald of Bristol, serve as administrative law judges for the CHRO but more importantly, Judge Dr. Cherron Payne is to ensure that my civil rights are adhered to. The communication from Judge Dr. Cherron Payne serves as several significant conflicts of interest.
- CHRO failed the Connecticut General Assembly CGA audit dated December 20, 2023. CT's state auditors provide independent and objective audits of the operations of state government and protection against waste, fraud, and abuse.
- CHRO continues to complicate communication challenges in my self-advocacy efforts.
- CHRO continues to request information that has already been submitted.

- CHRO is responsible for ensuring equity and opportunity for Connecticut small and minority business enterprises owned by women, ethnic minorities, and people with disabilities. CHRO is not ensuring equity and opportunity.

NOT THE COMMISSIONER



State of Connecticut
COMMISSION ON HUMAN RIGHTS AND OPPORTUNITIES
 Capitol Region Office ~ 450 Columbus Boulevard, Suite 2, Hartford, CT 06103
Promoting Equality and Justice for all People

December 15, 2023

NOT THE COMMISSIONER

Via email: deidre.gifford@ct.gov

Diedre S. Gifford, MD, MPH
 Commissioner
 Department of Social Services
 55 Farmington Avenue
 Hartford, CT 06105

RE: David Medeiros v. State of CT, Department of Social Services
CHRO No. 2410220
EEOC No. N/A

Dear Commissioner Gifford:

A complaint, referenced above, has been filed with the Commission on March 28, 2023, but due to an administrative error the service was delayed, the Commission apologizes about any inconvenience this may have the caused the Respondent. A copy of the complaint is attached.

The enclosed General Notice advises you of your rights, duties, and responsibilities. Please read carefully the information contained in the notice. The enclosed Notice Regarding Out of State Attorneys advises that all attorneys practicing before the Commission must be admitted to practice law in Connecticut and that it is the responsibility of all counsel to comply with Connecticut practice rules. Also enclosed is important information with respect to the no fault conciliation process. The Commission is available to assist you if you wish to pursue settlement of this complaint. If you wish to conciliate the complaint prior to providing an answer, you must notify the Commission within 10 days of receipt of the enclosed complaint.

You must file an answer to the complaint under oath with the Commission within 30 days of receipt of this complaint unless pre-answer conciliation has been requested. If you fail to answer the complaint within this time, you may be defaulted by the Commission. Parties are encouraged to submit all filings by email only without an additional hardcopy if possible. You must email a scanned copy of your signed and notarized Answer to chro.capitol@ct.gov and dedra.morris@ct.gov.

Main (860) 566-7710 ~ Fax (860) 566-1997
www.ct.gov/chro - Toll Free in Connecticut (800) 477-8737
 Affirmative Action/Equal Opportunity Employer

263 DAYS LATER



State of Connecticut
COMMISSION ON HUMAN RIGHTS AND OPPORTUNITIES

Capitol Region Office ~ 450 Columbus Boulevard, Suite 2, Hartford, CT 06103

Promoting Equality and Justice for all People

December 15, 2023

Via email: aabiwr@live.com

David Medeiros
215 Mountain Street
Willimantic, CT 06226

RE: David Medeiros v. State of CT, Department of Social Services
CHRO No. 2410220
EEOC No. N/A

Dear Mr. Medeiros:

This letter confirms that your complaint, referenced above, has been filed with the Commission on March 28, 2023, but due to an administrative error the service was delayed, the Commission apologizes for any inconvenience this may have caused you.

The enclosed General Notice advises you of your rights, duties, and responsibilities. **Please read carefully the information contained in the notice.**

You have a duty to respond timely to any information or assistance requested and to cooperate with the Commission at all times. It is your sole duty and responsibility to notify the Commission of your whereabouts at all times throughout the pendency of this complaint. In the event that your address, telephone number, or email address changes, it is your duty to notify the Commission immediately in writing. **Parties are encouraged to submit all filings by email only without an additional hardcopy if possible. Emailed filings with Capitol Region Office should be emailed to CHRO.Capitol@ct.gov.**

Also, you have a duty to certify to the Commission that you have provided the Respondent with copies of all documents you file with the Commission. For your convenience and use, the enclosed Certification Form is made available.

If I can be of further assistance, please do not hesitate to contact me.

NO NAME

Commission on Human Rights and Opportunities
Capitol Region Office
450 Columbus Boulevard, Suite 2
Hartford, CT 06103
860-541-3456

Main (860) 566-7710 ~ Fax (860) 566-1997
www.ct.gov/chro - Toll Free in Connecticut (800) 477-8737
Affirmative Action/Equal Opportunity Employer

Re: WBR Complaint

ABI RESOURCES 860 942-0365 <aabiwr@live.com>

Sat 12/23/2023 7:38 AM

To: Morris, Kimberly <Kimberly.Morris@ct.gov>

Cc: ABI RESOURCES 860 942-0365 <aabiwr@live.com>

12.23.2023

Clarification on Request for Accommodations in Filing Whistleblower Complaint

Dear Ms. Kimberly D. Morris,

I appreciate the clarity provided regarding the role of Dr. Payne and the communication protocols with the referees. I understand and respect the need to maintain fairness and impartiality in this process.

I would like to clarify that my request for assistance is specifically related to accommodations for my disability, in line with the Americans with Disabilities Act (ADA). As a person living with a brain injury and a stroke survivor, I face unique challenges in processing and completing complex tasks, such as understanding and filling out the whistleblower complaint form. This request is not for legal advice on the content of the complaint but rather for administrative assistance that accounts for my disability.

The suggestion to contact Legal Aid or the UConn School of Law Legal Clinic, while appreciated, does not address the core of my request. My need is for reasonable accommodations in the administrative process of filing the complaint, not for legal guidance on its substance.

To ensure my full and equitable participation in this process, I kindly request the following accommodations:

Administrative Assistance: Someone to guide me through the process, ensuring that I understand each step and that my responses are accurately recorded, given the cognitive challenges I face due to my disability.

Written Communication: Due to the difficulties I experience with phone communications, I request that our interactions continue via email or written messages, allowing me to better process and retain information.

I believe these accommodations are reasonable and necessary for me to engage effectively in this process, ensuring that my rights as an individual with a disability are respected and upheld.

I am committed to maintaining clear, respectful, and professional communication throughout this process. Your understanding and cooperation in providing these accommodations would be greatly appreciated.

Lastly, as per my previous request, could you please provide the contact information of your supervisors and our full chain of communications? This would aid in ensuring transparency and maintaining a record of our interactions.

Thank you for your attention to this important matter. I look forward to your guidance and support in providing these necessary accommodations.

Best regards,
David Medeiros
ABI Resources
Medicaid Acquired Brain Injury ABI Waiver Program Provider



From: Morris, Kimberly <Kimberly.Morris@ct.gov>
Sent: Friday, December 22, 2023 2:57 PM
To: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>
Subject: RE: WBR Complaint

Mr. Medeiros,

There has been no communication between you and Dr. Payne. The communication came from myself. The referees never contact the parties directly and you are not to contact the referees directly.

The whistleblower complaint form is self-explanatory. If you need assistance, you can contact Legal Aid or possibly the UConn School of Law Legal Clinic for help.

To ensure fairness and impartiality, OPH cannot assist with drafting the language for the actual complaint beyond reiterating the instructions that are on the whistleblower complaint form as well as the instructions that I've already given you.

Thank you.



www.ct.gov/chro



Kimberly D. Morris (she/her/hers)

Secretary II

Office of Public Hearings

Commission on Human Rights and Opportunities

450 Columbus Blvd., Suite 2

Hartford CT 06103 | AA/EOE

P: 860-418-8770 | F: 860-418-8780 | Direct: 860-541-4711 |

Kimberly.morris@ct.gov

From: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>

Sent: Friday, December 22, 2023 8:39 AM

To: Morris, Kimberly <Kimberly.Morris@ct.gov>

Cc: ABI RESOURCES 860 942-0365 <AABIWR@live.com>

Subject: Re: WBR Complaint

Importance: High

You don't often get email from aabiwr@live.com. [Learn why this is important](#)

EXTERNAL EMAIL: This email originated from outside of the organization. Do not click any links or open any attachments unless you trust the sender and know the content is safe.

12.22.2023 Subject: Request for Accommodations for Completing CHRO Requirements

Dear Ms. Morris and Dr. Cherron Payne,

I appreciate your response and the role of your office. However, I must express my concern regarding the recent interactions. I am not seeking legal advice, and it is important to clarify that my inquiries are not in that vein. My aim is to navigate the procedures and functions of your office effectively, without unnecessary complications.

I am concerned that your communication may be veering into areas that are not relevant to my needs or intentions. It is crucial that we maintain a focus on the guidance I am seeking. The continual suggestion that I am asking for legal advice, or the repeated prompting for additional questions from my end, is not only unnecessary but also adds layers of complexity to an already challenging process.

Let's streamline our communication to be as clear and direct as possible.

I am writing to request specific accommodations to assist me in completing the necessary documentation and notarizations for the CHRO requirements. As a person living with a brain injury and as a stroke survivor, I face certain challenges that require additional support in managing complex tasks.

I kindly request the opportunity to sit down with a person who can assist me in completing all the CHRO requirements, including documentation filings and notarizations. This support is crucial to ensure that my submissions are accurate and complete, given my disability.

I would like to clarify that I am not seeking legal advice through this request. My sole intention is to obtain the necessary administrative assistance to navigate the procedural aspects of the CHRO requirements effectively, considering my disability.

Your understanding and support in providing these accommodations would be greatly appreciated. This will not only aid me in fulfilling my responsibilities but also ensure that my rights and needs as an individual with a disability are respected and addressed appropriately.

As part of my ongoing commitment to effective and clear communication, I would like to express that phone call communications present significant challenges, both in terms of fully participating in the conversation and referencing the details at a later time. Due to the nature of my personal circumstances, including living with a brain injury and being a stroke survivor, I find that alternate forms of communication, such as email or written messages, are more conducive to my ability to engage fully and retain the information exchanged. These methods allow me to better process, understand, and refer back to the details of our interactions. I appreciate your understanding and accommodation in this matter, as it will greatly enhance our communication and collaboration.

Please let me know a convenient time for us to sit down and complete this matter further or to arrange the necessary assistance. Your guidance and support in this process are invaluable to me.

Lastly, would you please contact your supervisors and inform them that I am now requesting their support in navigating this challenge? Would you also please provide your supervisor's names and contact information as well as our full chain of communications?

Thank you for your attention to this important matter.

Best regards,

David Medeiros

ABI Resources

Medicaid Acquired Brain Injury ABI Waiver Program Provider



From: Morris, Kimberly <Kimberly.Morris@ct.gov>

Sent: Friday, December 22, 2023 7:56 AM

To: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>

Subject: RE: WBR Complaint

Good Morning,

The office cannot give out legal advice, if you have procedural questions, I will be able to help you with your questions. If you would like to discuss further with regard to procedures and functions of this office, you may contact me at 860-656-4385.

Thank you.



www.ct.gov/chro



Kimberly D. Morris (she/her/hers)

Secretary II

Office of Public Hearings

Commission on Human Rights and Opportunities

450 Columbus Blvd., Suite 2

Hartford CT 06103 | AA/EOE

P: 860-418-8770 | F: 860-418-8780 | Direct: 860-541-4711 |

Kimberly.morris@ct.gov

From: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>

Sent: Thursday, December 21, 2023 8:30 AM

To: Morris, Kimberly <Kimberly.Morris@ct.gov>

Cc: ABI RESOURCES 860 942-0365 <AABIWR@live.com>

Subject: Re: WBR Complaint

Importance: High

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12.21.2023

After a comprehensive discovery process, it has been identified that Dr. Cherron Payne, from Farmington, Connecticut, has been appointed to a significant role within the Connecticut Commission on Human Rights and Opportunities (CHRO). Governor Ned Lamont announced the appointment of Dr. Payne, along with Jon FitzGerald of Bristol, to serve as administrative law judges for the CHRO. Furthermore, Dr. Payne has been designated as the chief human rights referee by Governor Lamont.

The following are new concerns and complaints.

- Judge Dr. Payne, along with Jon FitzGerald of Bristol, serve as administrative law judges for the CHRO but more importantly, Judge Dr. Cherron Payne is to ensure that my civil rights are adhered to. The communication from Judge Dr. Cherron Payne serves as several significant conflicts of interest.
- CHRO failed the Connecticut General Assembly CGA audit dated December 20, 2023. CT's state auditors provide independent and objective audits of the operations of state government and protection against waste, fraud, and abuse.
- CHRO continues to complicate communication challenges in my self-advocacy efforts.
- CHRO continues to request information that has already been submitted.
- CHRO is responsible for ensuring equity and opportunity for Connecticut small and minority business enterprises owned by women, ethnic minorities, and people with disabilities. CHRO is not ensuring equity and opportunity.

Hello Cherron and Kimberly,

May I kindly ask for your complete name, title, and contact information? Your email was sent from Kimberly Morris kimberly.morris@ct.gov and I am confused as to who will be helping me.

I am writing to formally file a complaint of whistleblower retaliation and disability discrimination against the Connecticut Commission on Human Rights and Opportunities (CHRO) and the Connecticut Department of Social Services (DSS). As a person living with a recognized disability and a professional committed to ethical standards, I have encountered actions that I believe constitute a violation of my rights under relevant state and federal laws, including the Americans with Disabilities Act.

Specifically, this complaint addresses instances where I have been subjected to adverse actions and discriminatory treatment following my disclosure of unethical practices within both entities. These actions have not only impeded my professional duties but also have disregarded my rights and accommodations as an individual with a disability.

This complaint seeks to bring these issues to light, ensuring compliance with legal standards and promoting an environment that respects my rights and the rights and dignity of all individuals, regardless of their abilities. I am prepared to provide detailed information and evidence to support these claims and look forward to a thorough and fair investigation into these matters.

I trust that the CHRO and DSS will handle this complaint with the seriousness it deserves and will take appropriate actions to address the issues raised.

Thank you for your attention to this important matter.

Best regards,

David Medeiros

ABI Resources

Medicaid Acquired Brain Injury ABI Waiver Program Provider



From: Morris, Kimberly <Kimberly.Morris@ct.gov>

Sent: Wednesday, December 20, 2023 3:10 PM

To: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>

Subject: RE: WBR Complaint

Who is the entity you will be filing the WBR Complaint against?

Thank you.



www.ct.gov/chro



Kimberly D. Morris (she/her/hers)
Secretary II
Office of Public Hearings
Commission on Human Rights and Opportunities
450 Columbus Blvd., Suite 2
Hartford CT 06103 | AA/EOE
P: 860-418-8770 | F: 860-418-8780 | Direct: 860-541-4711 |
Kimberly.morris@ct.gov

From: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>
Sent: Tuesday, December 19, 2023 12:45 PM
To: Morris, Kimberly <Kimberly.Morris@ct.gov>
Cc: ABI RESOURCES 860 942-0365 <AABIWR@live.com>
Subject: Re: WBR Complaint

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EXTERNAL EMAIL: This email originated from outside of the organization. Do not click any links or open any attachments unless you trust the sender and know the content is safe.

Would you please schedule a time for us to sit down and complete this?

Best regards,
David Medeiros
ABI Resources
Medicaid Acquired Brain Injury ABI Waiver Program Provider



From: Morris, Kimberly <Kimberly.Morris@ct.gov>
Sent: Tuesday, December 19, 2023 12:36 PM
To: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>
Subject: RE: WBR Complaint

Please fill out each line item on the complaint and have the complaint notarized, you can go to a bank to have the complaint notarized.

If you have questions regarding the procedures if this office, I'm willing to answer questions you may have.

From: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>
Sent: Tuesday, December 19, 2023 12:24 PM
To: Morris, Kimberly <Kimberly.Morris@ct.gov>
Subject: Re: WBR Complaint
Importance: High

EXTERNAL EMAIL: This email originated from outside of the organization. Do not click any links or open any attachments unless you trust the sender and know the content is safe.

Assist me in completing all these documents and notarizing them.

Best regards,
David Medeiros
ABI Resources
Medicaid Aquired Brain Injury ABI Waiver Program Provider



From: Morris, Kimberly <Kimberly.Morris@ct.gov>
Sent: Tuesday, December 19, 2023 12:22 PM
To: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>
Subject: RE: WBR Complaint

What type of accommodations do you need?

From: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>
Sent: Tuesday, December 19, 2023 12:21 PM
To: Morris, Kimberly <Kimberly.Morris@ct.gov>
Cc: ABI RESOURCES 860 942-0365 <AABIWR@live.com>

Subject: Re: WBR Complaint**Importance:** High

You don't often get email from aabiwr@live.com. [Learn why this is important](#)

EXTERNAL EMAIL: This email originated from outside of the organization. Do not click any links or open any attachments unless you trust the sender and know the content is safe.

Hello Ms. Morris,

Thank you for informing me about the need to complete the Whistleblower Retaliation (WBR) Complaint forms and having everything notarized. I appreciate your guidance in this process.

I am contacting you to request accommodations to assist me in completing all these documents and notarizing them.

Would you kindly provide me assistance with this process?

Your support would be greatly appreciated.

Thank you for your understanding.

Best regards,

David Medeiros

ABI Resources

Medicaid Acquired a Brain Injury ABI Waiver Program Provider

A.B.I. RESOURCES



From: Morris, Kimberly <Kimberly.Morris@ct.gov>

Sent: Tuesday, December 19, 2023 9:56 AM

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

Subject: WBR Complaint

Good Morning,

It has come to our attention that you would like to file a WBR Complaint.
Please fill out the attached complaint form and have it notarized and sent back.

Thank you.



www.ct.gov/chro



Kimberly D. Morris (she/her/hers)

Secretary II

Office of Public Hearings

Commission on Human Rights and Opportunities

450 Columbus Blvd., Suite 2

Hartford CT 06103 | AA/EOE

P: 860-418-8770 | F: 860-418-8780 | Direct: 860-541-4711 |

Kimberly.morris@ct.gov



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Fax: (860) 465-9591

<https://www.CTbrainINJURY.com>

10/31/2023

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

To: All pertinent departments within the state of Connecticut,

I trust this correspondence reaches you in excellent health and high spirits. My name is David Medeiros, and I am addressing you in my capacity as a concerned business owner, resident, and individual with a disability residing in the state of Connecticut. I have the honor of leading ABI Resources, a distinguished service provider within the Connecticut Medicaid Acquired Brain Injury (ABI) Waiver Program.

I find myself compelled to highlight and formally complain about a series of blatant and persistent inequities pertaining to discriminatory business practices occurring under the aegis of the aforementioned program. Despite my multiple, concerted efforts to engage in constructive dialogue with the Connecticut Department of Social Services, addressing these grave concerns has been met with a disconcerting lack of engagement and rectification. This situation has had a deleterious impact not only on the operations of ABI Resources but also on the well-being and quality of service accessible to the disabled individuals we are committed to serving.

Key Concerns and Grievances:

a) **Medicaid Referrals:**

b) **Paying Consumers / Financial Incentives Inducements / Medicaid Service Agency**

a) **Medicaid Referrals:**

There is a prevailing lack of transparency and an apparent bias in the Medicaid referral processes within the ABI Waiver Program. ABI Resources, despite an unwavering commitment to excellence in service delivery, has been unfairly marginalized, resulting in an unequal and unjust distribution of referrals.

Addressing issues of transparency, bias, and unfair marginalization in Medicaid referrals, particularly within the Acquired Brain Injury (ABI) Waiver Program, is crucial to ensuring equitable access to quality healthcare services for all eligible individuals. ABI Resources and similar service providers play a vital role in supporting individuals with acquired brain injuries, and it is essential that they are treated fairly in the referral process to continue their commitment to excellence in service delivery.

Potential Steps to Address the Issue:

Increase Transparency:

Implement a transparent referral process where criteria for referrals are clearly defined and made publicly available.

Establish a monitoring system to track and publish referral data, including the number of referrals made to each service provider and the reasons for referral decisions.

Conduct an Independent Audit:

Hire an independent entity to conduct a thorough review of the Medicaid referral processes within the ABI Waiver Program to identify any biases or unfair practices.

The audit should also evaluate the performance and quality of services provided by ABI Resources and other service providers to ensure that referrals are based on merit and the ability to meet the needs of individuals with acquired brain injuries.

Implement a Fair and Equitable Referral System:

Develop a standardized and objective referral system that ensures all service providers are evaluated based on the same criteria.

Consider incorporating a randomized component to the referral process to prevent bias and ensure a fair distribution of referrals.

Engage Stakeholders:

Create a platform for open dialogue between Medicaid officials, service providers, individuals with acquired brain injuries, and their families to discuss concerns related to the referral process.

Use feedback from stakeholders to continuously improve the referral system and address any emerging issues.

Provide Training and Education:

Offer training to Medicaid officials and other stakeholders involved in the referral process to raise awareness about potential biases and the importance of a fair and equitable system.

Educate service providers about the referral process, criteria for referrals, and steps they can take if they believe they have been treated unfairly.

Establish a Complaint and Appeal Process:

Create a clear and accessible complaint and appeal process for service providers who believe they have been unfairly marginalized in the referral process.

Ensure that complaints are thoroughly investigated and that corrective action is taken when warranted.

Promote Accountability:

Hold Medicaid officials and other stakeholders accountable for ensuring a fair and transparent referral process.

Implement consequences for individuals or entities found to be engaging in biased or unfair practices.

Regularly Review and Update Policies:

Conduct regular reviews of referral policies and procedures to ensure they remain up-to-date, fair, and transparent.

Update policies as needed to address any identified issues and to adapt to changing needs and circumstances.

Addressing the issues of transparency, bias, and unfair marginalization in Medicaid referrals within the ABI Waiver Program is essential to ensuring that all eligible individuals have equal access to high-quality services. It is imperative that service providers like ABI Resources are treated fairly and equitably in the referral process to uphold the integrity of the healthcare system and to foster trust among all stakeholders. Implementing the above steps could contribute significantly to creating a more transparent, fair, and equitable referral system, ultimately benefiting individuals with acquired brain injuries and the service providers dedicated to supporting them.

b) Paying Consumers / Financial Incentives Inducements / Medicaid Service Agency

Provider: A Medicaid service agency provider is offering financial incentives to consumers, leading to an imbalance in the competitive landscape. This kind of practice can indeed raise serious ethical, legal, and fairness concerns.

Ethical Concerns:

Conflicts of Interest: Financial incentives could create a conflict of interest, where the provider's financial gain takes precedence over the best interests of the consumer.

Bias and Unfairness: It could lead to bias in referrals, favoring certain providers over others irrespective of the quality of services they offer.

Erosion of Trust: Such practices can erode trust in the Medicaid system and healthcare providers, as consumers may question the motives behind the services they are being referred to.

Legal Concerns:

Violation of Anti-Kickback Statutes: Providing inducements to influence the referral of services covered by Medicaid can violate anti-kickback statutes, potentially leading to legal actions and penalties.

False Claims Act Violations: If such inducements lead to fraudulent billing or claims, it could result in violations of the False Claims Act.

Non-Compliance with Medicaid Regulations: Medicaid has strict guidelines and regulations to ensure fairness and prevent fraud, and engaging in such practices can result in non-compliance and potential debarment from the program.

Lack of Responsiveness to Complaints and Reports: Our persistent complaints and reports, meticulously documenting these issues, have been met with apathy. There is an alarming deficit in the investigation, redressal, and accountability mechanisms within the system.

Adverse Impacts on ABI Resources:

Financial Duress: The discriminatory practices and referral shortages have placed ABI Resources under significant financial duress, compromising our ability to maintain operational viability and deliver superior services to our clients.

Reputational Harm: The state's nonintervention and perceived partiality have led to an erosion of our reputation. This has resulted in ABI Resources being unjustly perceived as a less favorable service provider, regardless of our commitment to quality and excellence.

Demoralization of Workforce: The protracted nature of these issues has led to a pervasive sense of demoralization among our staff and stakeholders, adversely impacting the morale and efficacy of our organizational operations.

Addressing the Issue:

Regulatory Oversight: There should be strict oversight and monitoring by regulatory bodies to ensure that all Medicaid service agency providers are complying with laws and regulations.

Transparency: Increasing transparency in the referral process can help in ensuring that referrals are made based on the quality of services rather than financial incentives.

Whistleblower Protections: Encouraging whistleblowing and providing protections for whistleblowers can help in uncovering and addressing such unethical practices.

Penalties and Sanctions: Implementing strict penalties and sanctions for those found guilty of engaging in such practices can act as a deterrent.

Public Awareness: Educating consumers about the potential for such conflicts of interest and providing them with information on how to report suspicious activities can empower them to make informed decisions.

Addressing this issue is crucial for maintaining the integrity of the Medicaid program, ensuring that consumers receive the best possible care, and fostering a competitive and fair marketplace for healthcare services.

Call to Action:

I earnestly seek your prompt intervention and advocacy in ensuring this grievance is communicated to all pertinent departments within the state of Connecticut tasked with addressing such critical matters. The departments that ought to be immediately apprised of this situation include, but are not limited to:

Connecticut Department of Social Services

Connecticut Attorney General's Office

Connecticut Commission on Human Rights and Opportunities

Connecticut Office of the Healthcare Advocate

Connecticut Office of Policy and Management

I have proactively initiated complaints and have directly engaged with the Connecticut Department of Social Services. Rest assured, all communications have been meticulously documented, encompassing dates, times, and the identities of the individuals engaged in these discussions.

I place my trust in your unwavering commitment to justice and fairness, confident that you will accord this matter the urgency and gravitas it demands, ensuring a

comprehensive investigation and the implementation of corrective measures. The equitable treatment of all service providers operating under the Connecticut Medicaid ABI Waiver Program is of utmost importance, and I am optimistic that your intervention will usher in a just resolution.

I am grateful for your time and thoughtful consideration of this crucial matter.

Sincerely,

David Medeiros

Best regards,

David Medeiros

David Medeiros
Founder, CEO, Director, Team Member
ABI Resources, LLC



A.B.I. Resources LLC

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11/13/2023

Subject: Formal Grievance Complaint Concerning Connecticut Medicaid ABI Waiver Program Service and Intervention Plans.

To: All pertinent departments within the state of Connecticut,

I am writing on behalf of ABI Resources, a dedicated provider of essential services to individuals with acquired brain injuries (ABI). This letter serves to formally raise a grievance and file a complaint concerning the serious issue of not receiving Medicaid Acquired Brain Injury (ABI) Waiver Program service and intervention plans from consumer-assigned care management consultants. This situation has gravely impacted the operational and financial integrity of ABI Resources.

As per the stipulations of the ABI Waiver Program, a "Service Plan" is an essential document that outlines the necessary medical and community-based services enabling individuals to live outside institutional settings. The provision of individualized service plans include measurable goals, objectives, and documentation of total service costs.

Additionally, "Intervention Plans," developed by cognitive behaviorists, are crucial in identifying and managing treatment goals and interventions for our



clients. However, despite our repeated efforts and adherence to the required protocols, we have not received these vital documents from care management. The lack of these plans has led to significant operational and financial difficulties for ABI Resources.

Sec. 17b-260a-6. Person-centered planning process (a) The service plan shall be developed based on a person-centered planning model, as described in 42 CFR 441.301(c), as amended from time to time. The individual shall lead the planning process where possible, and in accordance with section 17b-260a-11(a) of the Regulations of Connecticut State Agencies.

6) Prohibit providers of waiver services for the individual, or those who have an interest in or are employed by a provider of waiver services for the individual, from providing care management or participating in the development of the person-centered service plan;

Key Concerns and Grievances:

Non-Receipt of Essential Documents: Despite adherence to protocol, ABI Resources has not received the mandated individualized service and intervention plans, which include measurable goals and objectives for the consumers we serve. Furthermore, the necessary intervention plans developed by cognitive behaviorists, which outline treatment goals and interventions, have also not been provided by care management.

Concerns: Impact on Daily Support Staff and Program Consumers

In addition to the aforementioned issues, the absence of these critical Medicaid ABI Waiver Program plans has significantly affected our daily support staff and, consequently, the consumers of the program.

Impact on Daily Support Staff:

Lack of Clear Direction: Without structured plans, staff members struggle to provide focused and effective services, as they lack clear guidelines and objectives.

Increased Workload and Stress: The ambiguity surrounding treatment goals and methods has led to an increased workload and heightened stress levels among staff, impacting their well-being and job satisfaction.

Professional Inefficiency: Staff are unable to utilize their skills and training effectively, leading to professional dissatisfaction.

Difficulty in Tracking Progress: The absence of measurable goals makes it challenging for staff to track and report on client progress accurately.

Risk of Non-Compliance: Without proper guidelines, there is an increased risk of non-compliance with regulatory standards, potentially leading to legal and ethical issues.

Reduced Team Morale: The overall uncertainty and increased challenges have adversely affected team morale and cohesion.

Impact on Consumers of the Program:

Inconsistent Service Quality: Consumers face variability in the quality of care received, as staff members lack consistent plans to guide their services.

Slowed Progress: The absence of structured goals and interventions can slow down or hinder the progress and rehabilitation of consumers.

Reduced Confidence in Services: Consumers and their families may lose confidence in the quality and effectiveness of the services provided.

Increased Vulnerability: Consumers, particularly those with severe conditions, become more vulnerable due to the lack of tailored, goal-oriented care.

Potential for Unmet Needs: Without specific plans, some needs of consumers may remain unidentified and unaddressed, leading to gaps in care.

Emotional and Psychological Impact: The inconsistency and uncertainty in care can have adverse emotional and psychological effects on consumers.

These challenges not only make the daily responsibilities of our care providers more arduous but also critically undermine the quality of care and support we can offer to our consumers. It is imperative that these issues be addressed immediately to ensure the well-being of both our staff and the consumers who rely on our services.

Adverse Impacts on ABI Resources:

The cumulative effect of these issues has placed ABI Resources in a precarious financial and operational position.

Financial Losses: The absence of these critical documents has led to substantial financial losses, severely hampering our ability to function effectively.

Staffing Challenges: The lack of structured plans has created many challenges for our service providers and as a result, we have faced significant staffing issues, including layoffs and the challenges to maintain essential personnel.

Client Impact: Our capacity to offer consistent and high-quality services has been compromised, leading to a loss of clients and a tarnishing of our reputation.

Administrative Burden: The lack of structured plans has resulted in an increased administrative load, as we strive to manage without proper guidance.

Overall Business Impact: These compounded issues threaten the viability of ABI Resources and our mission to serve those in need.

Potential Steps to Address the Issue:

Immediate Investigation: We request a prompt investigation into this matter.

Provision of Required Plans: We urge for the immediate provision of the required service and intervention plans.

Compensation for Losses: Guidance on how to claim losses incurred due to this oversight and a discussion on potential compensatory measures are necessary.

Support and Guidance: Additional support to help navigate and rectify this situation would be invaluable.

Addressing the Issue:

We have initiated complaints and engaged directly with the Connecticut Department of Social Services. All communications have been thoroughly documented.

Call to Action:

I earnestly seek your prompt intervention and advocacy in ensuring this grievance is communicated to all pertinent departments within the state of Connecticut tasked with addressing such critical matters. The departments that ought to be immediately apprised of this situation include, but are not limited to:

Connecticut Department of Social Services

Connecticut Attorney General's Office

Connecticut Commission on Human Rights and Opportunities

Connecticut Office of the Healthcare Advocate

Connecticut Office of Policy and Management

I have proactively initiated complaints and have directly engaged with the Connecticut Department of Social Services. Rest assured, all communications have been meticulously documented, encompassing dates, times, and the identities of the individuals engaged in these discussions.

I place my trust in your unwavering commitment to justice and fairness, confident that you will accord this matter the urgency and gravitas it demands, ensuring a comprehensive investigation and the implementation of corrective measures. The

equitable treatment of all service providers operating under the Connecticut Medicaid ABI Waiver Program is of utmost importance, and I am optimistic that your intervention will usher in a just resolution.

I am grateful for your time and thoughtful consideration of this crucial matter.

Best regards,

David Medeiros

David Medeiros

ABI Resources

Founder, CEO, Director, Team Member

ABI Resources



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11/15/2023

Subject: Formal Grievance and Complaint Regarding the Concealment of Public Information: Medicaid ABI Waiver Program Directory of Providers.

To: All pertinent departments within the state of Connecticut,

I am writing on behalf of ABI Resources to express our formal grievance and file a complaint regarding the handling of the Medicaid Acquired Brain Injury (ABI) Waiver Program by the Connecticut Department of Social Services (DSS). Specifically, our complaint centers on the apparent concealment of the Medicaid ABI Waiver Program Directory of Providers, a critical public resource.

Key Concerns and Grievances:

- a) Denial of Public Access to Information: The DSS managed Medicaid ABI Waiver Program Directory of Providers is public information, rightfully accessible to all. Its concealment not only violates the principles of transparency and public service but also directly impacts those in dire need of these services.
- b) Inaccessibility to Vulnerable Populations: The absence of accessible information severely restricts the ability of individuals with acquired brain

injuries, their families, and caregivers to make informed decisions regarding care and support. This lack of access is particularly detrimental, given the complex needs of this population.

- c) Increased Risk and Exploitation: Without knowledge of accredited and reputable providers, vulnerable individuals are at a heightened risk of exploitation and subpar services, which can lead to adverse health outcomes.
- d) Unnecessary Strain on Families and Caregivers: Families and caregivers, already burdened with care responsibilities, face additional challenges in finding appropriate services, contributing to increased stress and potential caregiving errors.
- e) Financial and Operational Impact on ABI Resources: As a provider, ABI Resources has suffered considerable financial losses due to decreased client engagement and an increased administrative burden. This situation stems directly from the unavailability of the provider directory, which hinders our ability to efficiently connect with potential clients.
- f) Administrative Burdens and Resource Diversion: The lack of a central, accessible directory has led to an excessive administrative load, diverting critical resources from our core mission of providing care.

Proposed Solutions and Steps to Address the Issue:

- 1) Immediate Disclosure and Accessibility: We request the immediate release of the Medicaid ABI Waiver Program Directory of Providers, ensuring it

is readily accessible to all stakeholders, particularly the public and vulnerable populations.

- 2) Commitment to Transparency: The DSS should commit to ongoing transparency in all aspects of the ABI Waiver Program, including regular updates and easy access to all program-related information.
- 3) Constructive Dialogue and Rectification: ABI Resources seeks to engage in a constructive dialogue with the DSS to discuss the implications of this concealment and explore potential avenues for rectifying the financial and operational impacts.

Addressing the Issue:

We have initiated complaints and engaged directly with the Connecticut Department of Social Services. All communications have been thoroughly documented.

Potential Steps to Address the Issue:

Immediate Investigation: We request a prompt investigation into this matter.

Provision of Required Plans: We urge for the immediate provision of the required service and intervention plans.

Compensation for Losses: Guidance on how to claim losses incurred due to this oversight and a discussion on potential compensatory measures are necessary.

Support and Guidance: Additional support to help navigate and rectify this situation would be invaluable.

Call to Action:

I earnestly seek your prompt intervention and advocacy in ensuring this grievance is communicated to all pertinent departments within the state of Connecticut tasked with addressing such critical matters. The departments that ought to be immediately apprised of this situation include, but are not limited to:

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Connecticut Attorney General's Office

Connecticut Commission on Human Rights and Opportunities

Connecticut Office of the Healthcare Advocate

Connecticut Office of Policy and Management

I have proactively initiated complaints and have directly engaged with the Connecticut Department of Social Services. Rest assured, all communications have been meticulously documented, encompassing dates, times, and the identities of the individuals engaged in these discussions.

We urge the Connecticut Department of Social Services, alongside the Attorney General's Office, the Commission on Human Rights and Opportunities, the Office of the Healthcare Advocate, and the Office of Policy and Management, to address this grievance promptly. The issue at hand not only affects ABI Resources but also speaks to the larger matter of public trust and the accessibility of crucial healthcare information.

We anticipate a constructive and swift response to this urgent matter, underscoring the importance of transparency and accessibility in public services, especially those catering to vulnerable populations.

I place my trust in your unwavering commitment to justice and fairness, confident that you will accord this matter the urgency and gravitas it demands, ensuring a comprehensive investigation and the implementation of corrective measures. The equitable treatment of all service providers operating under the Connecticut Medicaid ABI Waiver Program is of utmost importance, and I am optimistic that your intervention will usher in a just resolution.

I am grateful for your time and thoughtful consideration of this crucial matter.

Best regards,

David Medeiros

David Medeiros

ABI Resources

Founder, CEO, Director, Team Member

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11/16/2023

Subject: Formal Complaint and Request for Immediate Clarification on
Unauthorized Care Management Consultation Services in ABI Waiver Program 1.

To: All pertinent departments within the state of Connecticut,

Connecticut Department of Social Services and Relevant Oversight Bodies

I am writing on behalf of ABI Resources to express grave concerns and urgently seek detailed clarification on practices we have observed within the Medicaid Acquired Brain Injury (ABI) Waiver Program, particularly in ABI Waiver Program 1. Our complaint specifically focuses on what appears to be an unauthorized provision of care management consultation services in Program 1, a practice traditionally and explicitly designated for Program 2 under existing guidelines. This letter outlines our observations, the potential negative impacts on our business operations and our consumers, and our urgent requests for resolution

Key concerns and grievances:

1. Unauthorized Consultation Services: The core of our concern lies in the apparent provision of care management consultation services to consumers in ABI Waiver Program 1. This practice is not authorized under the current program guidelines and represents a significant breach of protocol,



raising serious concerns about compliance and oversight within the program.

2. Lack of Clarity and Transparency in Program Administration: The sudden and unexplained introduction of these services in Program 1 has created an atmosphere of confusion and uncertainty. We seek immediate and detailed clarification from the Department on whether there have been any recent changes to the scope or administration of ABI Waiver Program 1 that would authorize such services.
3. Improper Recommendations for Program Transitions: Additionally, we have noted instances where care managers are inappropriately advising Program 1 consumers to transition to Program 2. This advice, given without proper authority or assessment, potentially disrupts the tailored care plans crucial for the recovery of individuals with acquired brain injuries.

In-Depth Analysis of Impact on ABI Resources and Consumers:

1. Operational and Strategic Challenges: The introduction of potentially unauthorized services has disrupted our strategic planning and operational execution. It has forced us to reevaluate our service delivery models and resource allocation, potentially leading to inefficiencies and diminished care quality.
2. Risk to Consumer Trust and Quality of Care: The ambiguity surrounding these services risks damaging the trust that consumers and their families have in the system. It raises concerns about the appropriateness of care

provided, which is essential for effective recovery and rehabilitation in ABI cases.

3. Market Imbalance and Competitive Disadvantage: This situation creates an unfair market environment. Providers adhering to the guidelines may be at a disadvantage compared to those who are offering these additional, potentially unauthorized services. This not only affects our competitive position but also skews the overall market dynamics in ABI care services.

Specific Requests for Resolution and Enhanced Transparency:

1. Comprehensive Investigation and Clear Communication: We request an immediate, comprehensive investigation into the provision of care management consultation services in ABI Waiver Program 1, accompanied by clear communication on any policy adjustments.
2. Immediate Enforcement of Compliance: We urge the prompt enforcement of existing program guidelines and the cessation of any unauthorized practices.
3. Proactive Support and Guidance for All Stakeholders: We advocate for the development of support and guidance initiatives for both service providers and consumers to navigate these changes effectively, ensuring everyone is fully informed about their rights and the services available.
4. Corrective Measures for Non-Compliance: Implementation of corrective actions, including disciplinary measures, against entities found in violation of program rules, to maintain the integrity and effectiveness of the program.

Conclusion:

ABI Resources is deeply committed to providing high-quality care within the ABI Waiver Program framework. The current situation, marked by potential unauthorized practices, poses significant challenges to our operations and the well-being of our consumers. We trust that the Connecticut Department of Social Services and relevant oversight bodies will address these issues with the urgency and thoroughness they demand, ensuring the program's integrity and efficacy. We look forward to a swift, detailed, and transparent response to this critical issue.

Call to Action:

I earnestly seek your prompt intervention and advocacy in ensuring this grievance is communicated to all pertinent departments within the state of Connecticut tasked with addressing such critical matters. The departments that ought to be immediately apprised of this situation include, but are not limited to:

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Connecticut Attorney General's Office

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Connecticut Office of the Healthcare Advocate

Connecticut Office of Policy and Management

I have proactively initiated complaints and have directly engaged with the Connecticut Department of Social Services. Rest assured, all communications have been meticulously documented, encompassing dates, times, and the identities of the individuals engaged in these discussions.

We urge the Connecticut Department of Social Services, alongside the Attorney General's Office, the Commission on Human Rights and Opportunities, the Office of the Healthcare Advocate, and the Office of Policy and Management, to address this grievance promptly. The issue at hand not only affects ABI Resources but also speaks to the larger matter of public trust and the accessibility of crucial healthcare information.

We anticipate a constructive and swift response to this urgent matter, underscoring the importance of transparency and accessibility in public services, especially those catering to vulnerable populations.

I place my trust in your unwavering commitment to justice and fairness, confident that you will accord this matter the urgency and gravitas it demands, ensuring a comprehensive investigation and the implementation of corrective measures. The equitable treatment of all service providers operating under the Connecticut Medicaid ABI Waiver Program is of utmost importance, and I am optimistic that your intervention will usher in a just resolution.

I am grateful for your time and thoughtful consideration of this crucial matter.

Best regards,

David Medeiros

David Medeiros

ABI Resources , CEO, Director, Team Member

ABI Resources





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11/16/2023

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

To: All pertinent departments within the state of Connecticut,

I am David Medeiros from ABI Resources, and I present this document to voice our serious concerns about certain activities within the Medicaid Acquired Brain Injury (ABI) Waiver program. These activities, which appear to breach ethical standards and potentially violate Medicaid regulations, require immediate scrutiny and action.

Examination of the ABI Waiver Program's Framework:

The ABI Waiver Program, established under sections 17b-260a-1 to 17b-260a-17 of the Connecticut State Agencies regulations, is designed to offer nonmedical, home, and community-based services to eligible individuals with an ABI. This program emphasizes the need for cost-effective services, personalized care, and adherence to strict qualifications for providers, ensuring that the services provided meet the highest ethical and professional standards.

Conflicts Arising from Service Provision:

Dual Service Conflict:

In the context of the ABI Waiver Program, a significant conflict has emerged due to an agency providing both Clinical Behavioral Therapy (CBT) and daily non-medical services to the same group of consumers. This situation raises several concerns:

Therapeutic Recommendations Overlapping with Financial Interests:

There is an apparent alignment of therapeutic recommendations with the agency's financial interests. The agency uses the platform of CBT sessions to recommend additional non-medical services that it also provides. This practice suggests a dual benefit for the agency, where it gains financially from both therapy sessions and the subsequent non-medical services.

Influence on Consumer Choice:

The dual role of the agency potentially influences consumer choice, where therapeutic sessions, which should be neutral and solely in the interest of the Consumer's health, may be used to steer consumers towards additional services provided by the same agency. This situation can lead to biased recommendations that may not always be in the best interest of the consumer.

Cycle of Service Provision and Financial Gain:

There is a creation of a cycle wherein the agency, through its provision of CBT, identifies or creates a need for additional services, fulfills these needs through its non-medical services arm, and consequently benefits financially. This cycle raises questions about the objectivity of the service recommendations and the potential for unnecessary or excessive services being provided.

Potential for Overutilization of Services:

This overlap in services could lead to overutilization, where consumers receive more services than are necessary, leading to increased costs for the Medicaid program.

Ethical Implications:

The practice blurs the lines between therapeutic need and financial gain, potentially compromising the ethical standards expected in healthcare and social service provision.

These concerns necessitate a thorough examination to ensure that services provided under the ABI Waiver Program are free from conflicts of interest, maintain the highest ethical standards, and truly serve the best interests of the consumers.

Manipulative Consumer Steering and Personnel Poaching:

Directing Consumer Choices:

The conduct of the agency's Clinical Behavioral Therapy (CBT) providers has raised significant concerns regarding the manipulation of Consumer choices. This issue manifests in several ways:

Targeted Referrals:

CBT providers are reportedly channeling consumers towards the agency's own non-medical services. This practice goes beyond the realm of impartial medical advice, as it systematically directs consumers to services that benefit the agency financially, rather than based on the unbiased assessment of Consumer needs.

Influence on Consumer Decision-Making:

This approach potentially undermines the autonomy of consumers in making informed decisions about their care. By directing consumers towards specific services, there's a risk that consumers are being provided a narrowed view of available options, influenced more by the agency's financial interests than by Consumer welfare.

Questionable Ethical Practices:

The behavior of these CBT providers raises ethical questions, particularly regarding the integrity of their recommendations. It potentially violates the principle of acting in the best interests of the Consumer, a cornerstone of healthcare and therapeutic professions.

Unfair Competitive Tactics:

The agency's practices extend beyond Consumer manipulation, affecting the broader operational dynamics within the industry:

Staff Poaching:

Reports indicate that the agency has engaged in poaching staff from other providers. This action not only disrupts the operations of other agencies but also indicates a strategic approach to weaken competition and consolidate the agency's position in the market.

Disruption of Industry Standards:

Such tactics contribute to an uneven playing field, where ethical providers adhering to fair hiring practices are disadvantaged. This behavior can lead to a destabilization of the market, with one agency gaining undue advantage and influence.

Impact on Service Quality:

The poaching of staff may lead to a shortage of skilled professionals in other agencies, potentially affecting the quality of care and services provided to consumers across the industry.

These practices of manipulative Consumer steering and personnel poaching call for an in-depth review to ensure that the ABI Waiver Program operates in a fair, ethical, and competitive environment, where Consumer welfare and industry standards are upheld.

Indicators of Potential Kickback Arrangements:

Referral for Incentives:

The relationships and interactions among the service provider, Clinical Behavioral Therapy (CBT) professionals, and care management consultants reveal possible mechanisms of kickback arrangements. This is characterized by:

Questionable Referral Patterns:

There appears to be a consistent pattern where CBT professionals and care management consultants funnel consumers to specific services offered by the agency. This pattern suggests a systematic approach to referrals that may not be solely based on Consumer needs but rather on underlying incentives.

Financial Incentives for Referrals:

The possibility that CBT professionals and care management consultants receive financial or other forms of incentives for directing consumers to the agency's services is a major concern. Such incentives could significantly compromise the

integrity of Consumer referrals, with decisions potentially driven by personal gain rather than Consumer welfare.

Cyclical Billing and Service Utilization:

The referral system seems to create a cyclical pattern of billing and service utilization, where Consumer needs are continuously identified and serviced within the same agency network, fostering an environment of repeated financial gain for the agency.

Impact on Medicaid Expenditures:

If these practices are occurring, they could lead to increased and potentially unnecessary Medicaid expenditures. Consumers may be receiving more services than medically necessary, or services that could be more effectively provided elsewhere, leading to inflated costs borne by the Medicaid program.

Ethical and Legal Implications:

Such kickback arrangements, if confirmed, would not only breach ethical standards but also could contravene legal statutes governing Medicaid and healthcare services. Kickbacks in healthcare are illegal and undermine the principle of fair competition and the integrity of patient care.

The existence of these indicators necessitates a thorough investigation to ascertain the presence of kickback arrangements and to evaluate their impact on the Medicaid program's ethical standards and financial integrity. It is imperative to ensure that all practices within the ABI Waiver Program align with legal and ethical guidelines, safeguarding the program's integrity and the wellbeing of its beneficiaries.

Impact on ABI Resources:

Revenue Reduction

Consumer Diversion Impact:

ABI Resources has experienced a significant downturn in revenue, which can be directly attributed to the diversion of consumers towards the agency in question. This diversion likely results from the alleged unethical steering and manipulative practices, leading to a reduced Consumer base for ABI Resources.

Financial Viability Threatened:

The reduction in revenue poses a threat to the financial viability and sustainability of ABI Resources, impacting our ability to provide quality care and services to our consumers.

Operational Cost Surge:

Increased Marketing Expenditures: In an effort to counteract the loss of consumers and to rebuild our Consumer base, ABI Resources has had to significantly increase our investment in marketing. These additional expenses are necessary to communicate our commitment to ethical practices and quality care to the community.

Legal and Consultation Fees:

Addressing these unethical practices and exploring legal avenues for recourse has led to increased spending on legal consultations and related services. These expenditures are essential for navigating the complexities of the situation and seeking justice, but they also divert resources from other operational areas.

Consumer Relationship Erosion:

Loss of Trust and Business: The most profound impact has been on our established Consumer relationships. The manipulative practices of the agency in question have led to a loss of trust among our consumers, as they are steered away from ABI Resources. This erosion of trust is deeply concerning, as it undermines the long-standing relationships we have built based on care, integrity, and ethical service provision.

Reputation Damage:

The wider implications of these practices in the industry have led to a tarnished reputation, not just for the agency in question, but for service providers in general, including ABI Resources. Restoring our reputation in the wake of these events is a significant challenge, requiring substantial effort and resources.

The cumulative effect of these impacts on ABI Resources is profound, affecting not just our financial stability but also our reputation and, most importantly, our ability to serve our consumers effectively. It is imperative that these issues are addressed comprehensively to restore the integrity of service provision within the ABI Waiver Program and to protect agencies like ours that are committed to ethical practices.

Formal Requests Thorough Examination and Compliance Review:

Comprehensive Investigation:

We formally request a complete and thorough examination of the outlined practices. This investigation should encompass all entities involved, including the service provider, CBT professionals, and care management consultants.

Medicaid Compliance Review:

A detailed review of Medicaid compliance is crucial to determine if these practices violate Medicaid regulations and standards.

Application of Corrective and Disciplinary Measures:

Immediate Corrective Action: Upon confirmation of these practices, we strongly advocate for swift implementation of corrective measures to address and rectify the identified issues.

Disciplinary Proceedings:

We also call for appropriate disciplinary actions against any parties found to be complicit in these unethical practices, in accordance with legal and regulatory guidelines.

Review and Revision of Policies and Oversight:

Policy Overhaul:

A comprehensive review and subsequent revision of existing policies within the ABI Waiver Program is necessary. This review should focus on closing loopholes that allow for such unethical practices and ensuring robust safeguards against future violations.

Enhanced Oversight Mechanisms:

We propose the establishment or enhancement of oversight mechanisms within the ABI Waiver Program to ensure ongoing compliance with ethical and legal standards.

In Closing:

The concerns we have raised in this document, if validated, point towards serious ethical lapses and potential legal infractions concerning Medicaid regulations. The very foundation of the ABI Waiver program, along with the trust placed in it by its beneficiaries, relies on prompt, effective, and transparent action from the Connecticut Department of Social Services.

We appreciate your attention to this urgent and significant matter and hope for a swift resolution that upholds the principles of justice and integrity.

Call to Action:

I earnestly seek your prompt intervention and advocacy in ensuring this grievance is communicated to all pertinent departments within the state of Connecticut tasked with addressing such critical matters. The departments that ought to be immediately apprised of this situation include, but are not limited to:

Connecticut Department of Social Services

Connecticut Attorney General's Office

Connecticut Commission on Human Rights and Opportunities

Connecticut Office of the Healthcare Advocate

Connecticut Office of Policy and Management

I have proactively initiated complaints and have directly engaged with the Connecticut Department of Social Services. Rest assured, all communications have been meticulously documented, encompassing dates, times, and the identities of the individuals engaged in these discussions.

We urge the Connecticut Department of Social Services, alongside the Attorney General's Office, the Commission on Human Rights and Opportunities, the Office of the Healthcare Advocate, and the Office of Policy and Management, to address this grievance promptly. The issue at hand not only affects ABI Resources but also speaks to the larger matter of public trust and the accessibility of crucial healthcare information.

We anticipate a constructive and swift response to this urgent matter, underscoring the importance of transparency and accessibility in public services, especially those catering to vulnerable populations.

I place my trust in your unwavering commitment to justice and fairness, confident that you will accord this matter the urgency and gravitas it demands, ensuring a comprehensive investigation and the implementation of corrective measures. The equitable treatment of all service providers operating under the Connecticut Medicaid ABI Waiver Program is of utmost importance, and I am optimistic that your intervention will usher in a just resolution.

I am grateful for your time and thoughtful consideration of this crucial matter.

Best regards,

David Medeiros

David Medeiros

ABI Resources , CEO, Director, Team Member

ABI Resources



Comprehensive Grievance Report and Request for Clarity.

**Addressing Issues within the Connecticut Medicaid
Acquired Brain Injury (ABI) Waiver Program.**



Whistleblower Report Prepared by:

David Medeiros and ABI Resources LLC

Date: November 21, 2023

**ABI Resources LLC
39 Kings Hwy STE C
Gales Ferry, CT. 06226
860 942-0365**

Introduction

Title: Comprehensive Grievance Report and Request for Clarity / Whistleblower Report, ABI Resources LLC

Date: November 21, 2023

Prepared by: David Medeiros and ABI Resources LLC

Overview of ABI Resources LLC:

ABI Resources LLC, a dedicated service provider within the Connecticut Medicaid Acquired Brain Injury (ABI) Waiver Program, is committed to delivering exceptional care to individuals with acquired brain injuries. Our mission is to ensure effective rehabilitation and community reintegration for our clients through specialized programs.

Purpose of the Document:

This report is a formal consolidation of grievances faced by ABI Resources LLC within the Connecticut Medicaid ABI Waiver Program. It aims to address these concerns with the relevant authorities, advocating for change and improvement.

Summary of Grievances

1. **Discriminatory Business Practices**: ABI Resources LLC has faced inequities in Medicaid referrals, experiencing marginalization and an unfair distribution of referrals.
2. **Service and Intervention Plans**: Concerns about non-receipt of essential service and intervention plans, impacting operational and financial integrity.
3. **Concealment of Public Information**: The Medicaid ABI Waiver Program Directory of Providers has been concealed, affecting the ability of individuals to make informed decisions and impacting ABI Resources.
4. **Unauthorized Care Management Services**: Issues regarding unauthorized provision of care management consultation services in ABI Waiver Program 1.
5. **Unethical Practices and Possible Kickback Schemes**: Concerns about conflicts of interest and unethical practices, including potential kickback arrangements.
6. **Rental Agreements in Medicaid ABI Waiver Program**: Issues regarding rental agreements that restrict consumer choice and freedom, creating a monopolistic environment.

Detailed Grievances and Concerns

Grievance 1: Discriminatory Unfair Business Practices

- Page 7
- **Overview:** ABI Resources LLC has faced significant challenges due to inequitable Medicaid referral processes. Specific instances include a noticeable decrease in referrals compared to other providers, suggesting a biased distribution that disadvantages our clients and organization.
- **Proposed Solutions:** We advocate for a transparent, equitable referral system, periodic audits of referral practices, and a review of policies to ensure fair treatment of all service providers in the ABI Waiver Program.

Grievance 2: Service and Intervention Plans

- **Overview:** There have been instances where ABI Resources LLC did not receive essential service and intervention plans on time. This lack of timely information compromises our ability to provide effective care and maintain financial integrity.
- **Proposed Solutions:** Implementation of a streamlined, reliable process for the timely delivery of service and intervention plans, and clear communication channels between providers and program administrators.

Grievance 3: Concealment of Public Information

- **Overview:** The Medicaid ABI Waiver Program Directory of Providers has not been made adequately available, limiting the ability of individuals to make informed choices and affecting our visibility in the program.

- **Proposed Solutions:** Ensure the directory is publicly accessible, regularly updated, and transparent, allowing clients to make informed choices about their care providers.

Grievance 4: Unauthorized Care Management Services

- **Overview:** Concerns about unauthorized provision of care management consultation services in ABI Waiver Program 1, which may contravene established protocols.
- **Proposed Solutions:** Investigate and rectify instances of unauthorized services, and reinforce compliance with program guidelines and standards.

Grievance 5: Unethical Practices and Possible Kickback Schemes

- **Overview:** Alarming indications of conflicts of interest and unethical practices within the program, including potential kickback arrangements, have been observed.
- **Proposed Solutions:** Conduct a thorough investigation into these practices, establish stricter oversight mechanisms, and enforce ethical standards across the program.

Grievance 6: Rental Agreements in Medicaid ABI Waiver Program

- **Overview:** The current structure of rental agreements within the program restricts consumer choice and freedom, creating a monopolistic environment detrimental to clients and providers.
- **Proposed Solutions:** Review and revise rental agreement policies to promote fair competition and consumer choice, ensuring transparency and ethical practice in housing arrangements.

Call to Action and Recommendations

Immediate Actions Required

1. **Review of Referral Processes:** An immediate audit and review of the referral processes within the Connecticut Medicaid ABI Waiver Program to ensure fairness and transparency.
2. **Timely Delivery of Service Plans:** Establish protocols to guarantee the timely delivery of service and intervention plans to all providers.
3. **Accessibility of Provider Directory:** Immediate action to make the ABI Waiver Program's Provider Directory fully accessible and transparent to clients and providers.

Long-term Systemic Recommendations

1. **Policy Overhaul:** A comprehensive review and overhaul of policies governing referral processes, service plan distributions, and care management services.
2. **Enhanced Oversight and Accountability:** Implementing stricter oversight mechanisms and accountability measures to prevent unethical practices and potential conflicts of interest.
3. **Consumer Choice in Rental Agreements:** Reforming rental agreement policies to promote fair competition, consumer choice, and transparency within the program.

These actions and reforms are vital for maintaining the integrity of the Connecticut Medicaid ABI Waiver Program and ensuring equitable treatment and high-quality care for all clients.

Conclusion

This report, prepared by David Medeiros and ABI Resources LLC, comprehensively outlines several critical grievances faced within the Connecticut Medicaid ABI Waiver Program. These issues, ranging from discriminatory business practices to the concealment of public information, unauthorized services, and potential unethical practices, significantly impact the quality of care provided to individuals with acquired brain injuries and the operational integrity of service providers like ABI Resources LLC.

The call for action is clear and urgent. Immediate steps, as outlined in this report, are necessary to address these grievances, followed by a commitment to long-term systemic improvements. Only through transparent, fair, and ethical practices can the program truly fulfill its mission of supporting and rehabilitating individuals with acquired brain injuries.

We urge the responsible authorities to consider these grievances seriously and take prompt, effective action. The wellbeing of many individuals and the effectiveness of the ABI Waiver Program depend on these crucial improvements.



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10/31/2023

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

To: All pertinent departments within the state of Connecticut,

I trust this correspondence reaches you in excellent health and high spirits. My name is David Medeiros, and I am addressing you in my capacity as a concerned business owner, resident, and individual with a disability residing in the state of Connecticut. I have the honor of leading ABI Resources, a distinguished service provider within the Connecticut Medicaid Acquired Brain Injury (ABI) Waiver Program.

I find myself compelled to highlight and formally complain about a series of blatant and persistent inequities pertaining to discriminatory business practices occurring under the aegis of the aforementioned program. Despite my multiple, concerted efforts to engage in constructive dialogue with the Connecticut Department of Social Services, addressing these grave concerns has been met with a disconcerting lack of engagement and rectification. This situation has had a deleterious impact not only on the operations of ABI Resources but also on the well-being and quality of service accessible to the disabled individuals we are committed to serving.

Key Concerns and Grievances:

a) **Medicaid Referrals:**

b) **Paying Consumers / Financial Incentives Inducements / Medicaid Service Agency**

a) **Medicaid Referrals:**

There is a prevailing lack of transparency and an apparent bias in the Medicaid referral processes within the ABI Waiver Program. ABI Resources, despite an unwavering commitment to excellence in service delivery, has been unfairly marginalized, resulting in an unequal and unjust distribution of referrals.

Addressing issues of transparency, bias, and unfair marginalization in Medicaid referrals, particularly within the Acquired Brain Injury (ABI) Waiver Program, is crucial to ensuring equitable access to quality healthcare services for all eligible individuals. ABI Resources and similar service providers play a vital role in supporting individuals with acquired brain injuries, and it is essential that they are treated fairly in the referral process to continue their commitment to excellence in service delivery.

Potential Steps to Address the Issue:

Increase Transparency:

Implement a transparent referral process where criteria for referrals are clearly defined and made publicly available.

Establish a monitoring system to track and publish referral data, including the number of referrals made to each service provider and the reasons for referral decisions.

Conduct an Independent Audit:

Hire an independent entity to conduct a thorough review of the Medicaid referral processes within the ABI Waiver Program to identify any biases or unfair practices.

The audit should also evaluate the performance and quality of services provided by ABI Resources and other service providers to ensure that referrals are based on merit and the ability to meet the needs of individuals with acquired brain injuries.

Implement a Fair and Equitable Referral System:

Develop a standardized and objective referral system that ensures all service providers are evaluated based on the same criteria.

Consider incorporating a randomized component to the referral process to prevent bias and ensure a fair distribution of referrals.

Engage Stakeholders:

Create a platform for open dialogue between Medicaid officials, service providers, individuals with acquired brain injuries, and their families to discuss concerns related to the referral process.

Use feedback from stakeholders to continuously improve the referral system and address any emerging issues.

Provide Training and Education:

Offer training to Medicaid officials and other stakeholders involved in the referral process to raise awareness about potential biases and the importance of a fair and equitable system.

Educate service providers about the referral process, criteria for referrals, and steps they can take if they believe they have been treated unfairly.

Establish a Complaint and Appeal Process:

Create a clear and accessible complaint and appeal process for service providers who believe they have been unfairly marginalized in the referral process.

Ensure that complaints are thoroughly investigated and that corrective action is taken when warranted.

Promote Accountability:

Hold Medicaid officials and other stakeholders accountable for ensuring a fair and transparent referral process.

Implement consequences for individuals or entities found to be engaging in biased or unfair practices.

Regularly Review and Update Policies:

Conduct regular reviews of referral policies and procedures to ensure they remain up-to-date, fair, and transparent.

Update policies as needed to address any identified issues and to adapt to changing needs and circumstances.

Addressing the issues of transparency, bias, and unfair marginalization in Medicaid referrals within the ABI Waiver Program is essential to ensuring that all eligible individuals have equal access to high-quality services. It is imperative that service providers like ABI Resources are treated fairly and equitably in the referral process to uphold the integrity of the healthcare system and to foster trust among all stakeholders. Implementing the above steps could contribute significantly to creating a more transparent, fair, and equitable referral system, ultimately benefiting individuals with acquired brain injuries and the service providers dedicated to supporting them.

b) Paying Consumers / Financial Incentives Inducements / Medicaid Service Agency

Provider: A Medicaid service agency provider is offering financial incentives to consumers, leading to an imbalance in the competitive landscape. This kind of practice can indeed raise serious ethical, legal, and fairness concerns.

Ethical Concerns:

Conflicts of Interest: Financial incentives could create a conflict of interest, where the provider's financial gain takes precedence over the best interests of the consumer.

Bias and Unfairness: It could lead to bias in referrals, favoring certain providers over others irrespective of the quality of services they offer.

Erosion of Trust: Such practices can erode trust in the Medicaid system and healthcare providers, as consumers may question the motives behind the services they are being referred to.

Legal Concerns:

Violation of Anti-Kickback Statutes: Providing inducements to influence the referral of services covered by Medicaid can violate anti-kickback statutes, potentially leading to legal actions and penalties.

False Claims Act Violations: If such inducements lead to fraudulent billing or claims, it could result in violations of the False Claims Act.

Non-Compliance with Medicaid Regulations: Medicaid has strict guidelines and regulations to ensure fairness and prevent fraud, and engaging in such practices can result in non-compliance and potential debarment from the program.

Lack of Responsiveness to Complaints and Reports: Our persistent complaints and reports, meticulously documenting these issues, have been met with apathy. There is an alarming deficit in the investigation, redressal, and accountability mechanisms within the system.

Adverse Impacts on ABI Resources:

Financial Duress: The discriminatory practices and referral shortages have placed ABI Resources under significant financial duress, compromising our ability to maintain operational viability and deliver superior services to our clients.

Reputational Harm: The state's nonintervention and perceived partiality have led to an erosion of our reputation. This has resulted in ABI Resources being unjustly perceived as a less favorable service provider, regardless of our commitment to quality and excellence.

Demoralization of Workforce: The protracted nature of these issues has led to a pervasive sense of demoralization among our staff and stakeholders, adversely impacting the morale and efficacy of our organizational operations.

Addressing the Issue:

Regulatory Oversight: There should be strict oversight and monitoring by regulatory bodies to ensure that all Medicaid service agency providers are complying with laws and regulations.

Transparency: Increasing transparency in the referral process can help in ensuring that referrals are made based on the quality of services rather than financial incentives.

Whistleblower Protections: Encouraging whistleblowing and providing protections for whistleblowers can help in uncovering and addressing such unethical practices.

Penalties and Sanctions: Implementing strict penalties and sanctions for those found guilty of engaging in such practices can act as a deterrent.

Public Awareness: Educating consumers about the potential for such conflicts of interest and providing them with information on how to report suspicious activities can empower them to make informed decisions.

Addressing this issue is crucial for maintaining the integrity of the Medicaid program, ensuring that consumers receive the best possible care, and fostering a competitive and fair marketplace for healthcare services.

Call to Action:

I earnestly seek your prompt intervention and advocacy in ensuring this grievance is communicated to all pertinent departments within the state of Connecticut tasked with addressing such critical matters. The departments that ought to be immediately apprised of this situation include, but are not limited to:

Connecticut Department of Social Services

Connecticut Attorney General's Office

Connecticut Commission on Human Rights and Opportunities

Connecticut Office of the Healthcare Advocate

Connecticut Office of Policy and Management

I have proactively initiated complaints and have directly engaged with the Connecticut Department of Social Services. Rest assured, all communications have been meticulously documented, encompassing dates, times, and the identities of the individuals engaged in these discussions.

I place my trust in your unwavering commitment to justice and fairness, confident that you will accord this matter the urgency and gravitas it demands, ensuring a

comprehensive investigation and the implementation of corrective measures. The equitable treatment of all service providers operating under the Connecticut Medicaid ABI Waiver Program is of utmost importance, and I am optimistic that your intervention will usher in a just resolution.

I am grateful for your time and thoughtful consideration of this crucial matter.

Best regards,
David Medeiros
David Medeiros
ABI Resources, CEO, Director, Team Member





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11/13/2023

Subject: Formal Grievance Complaint Concerning Connecticut Medicaid ABI Waiver Program Service and Intervention Plans.

To: All pertinent departments within the state of Connecticut,

I am writing on behalf of ABI Resources, a dedicated provider of essential services to individuals with acquired brain injuries (ABI). This letter serves to formally raise a grievance and file a complaint concerning the serious issue of not receiving Medicaid Acquired Brain Injury (ABI) Waiver Program service and intervention plans from consumer-assigned care management consultants. This situation has gravely impacted the operational and financial integrity of ABI Resources.

As per the stipulations of the ABI Waiver Program, a "Service Plan" is an essential document that outlines the necessary medical and community-based services enabling individuals to live outside institutional settings. The provision of individualized service plans include measurable goals, objectives, and documentation of total service costs.

Additionally, "Intervention Plans," developed by cognitive behaviorists, are crucial in identifying and managing treatment goals and interventions for our

clients. However, despite our repeated efforts and adherence to the required protocols, we have not received these vital documents from care management. The lack of these plans has led to significant operational and financial difficulties for ABI Resources.

Sec. 17b-260a-6. Person-centered planning process (a) The service plan shall be developed based on a person-centered planning model, as described in 42 CFR 441.301(c), as amended from time to time. The individual shall lead the planning process where possible, and in accordance with section 17b-260a-11(a) of the Regulations of Connecticut State Agencies.

6) Prohibit providers of waiver services for the individual, or those who have an interest in or are employed by a provider of waiver services for the individual, from providing care management or participating in the development of the person-centered service plan;

Key Concerns and Grievances:

Non-Receipt of Essential Documents: Despite adherence to protocol, ABI Resources has not received the mandated individualized service and intervention plans, which include measurable goals and objectives for the consumers we serve. Furthermore, the necessary intervention plans developed by cognitive behaviorists, which outline treatment goals and interventions, have also not been provided by care management.

Concerns: Impact on Daily Support Staff and Program Consumers

In addition to the aforementioned issues, the absence of these critical Medicaid ABI Waiver Program plans has significantly affected our daily support staff and, consequently, the consumers of the program.

Impact on Daily Support Staff:

Lack of Clear Direction: Without structured plans, staff members struggle to provide focused and effective services, as they lack clear guidelines and objectives.

Increased Workload and Stress: The ambiguity surrounding treatment goals and methods has led to an increased workload and heightened stress levels among staff, impacting their well-being and job satisfaction.

Professional Inefficiency: Staff are unable to utilize their skills and training effectively, leading to professional dissatisfaction.

Difficulty in Tracking Progress: The absence of measurable goals makes it challenging for staff to track and report on client progress accurately.

Risk of Non-Compliance: Without proper guidelines, there is an increased risk of non-compliance with regulatory standards, potentially leading to legal and ethical issues.

Reduced Team Morale: The overall uncertainty and increased challenges have adversely affected team morale and cohesion.

Impact on Consumers of the Program:

Inconsistent Service Quality: Consumers face variability in the quality of care received, as staff members lack consistent plans to guide their services.

Slowed Progress: The absence of structured goals and interventions can slow down or hinder the progress and rehabilitation of consumers.

Reduced Confidence in Services: Consumers and their families may lose confidence in the quality and effectiveness of the services provided.

Increased Vulnerability: Consumers, particularly those with severe conditions, become more vulnerable due to the lack of tailored, goal-oriented care.

Potential for Unmet Needs: Without specific plans, some needs of consumers may remain unidentified and unaddressed, leading to gaps in care.

Emotional and Psychological Impact: The inconsistency and uncertainty in care can have adverse emotional and psychological effects on consumers.

These challenges not only make the daily responsibilities of our care providers more arduous but also critically undermine the quality of care and support we can offer to our consumers. It is imperative that these issues be addressed immediately to ensure the well-being of both our staff and the consumers who rely on our services.

Adverse Impacts on ABI Resources:

The cumulative effect of these issues has placed ABI Resources in a precarious financial and operational position.

Financial Losses: The absence of these critical documents has led to substantial financial losses, severely hampering our ability to function effectively.

Staffing Challenges: The lack of structured plans has created many challenges for our service providers and as a result, we have faced significant staffing issues, including layoffs and the challenges to maintain essential personnel.

Client Impact: Our capacity to offer consistent and high-quality services has been compromised, leading to a loss of clients and a tarnishing of our reputation.

Administrative Burden: The lack of structured plans has resulted in an increased administrative load, as we strive to manage without proper guidance.

Overall Business Impact: These compounded issues threaten the viability of ABI Resources and our mission to serve those in need.

Potential Steps to Address the Issue:

Immediate Investigation: We request a prompt investigation into this matter.

Provision of Required Plans: We urge for the immediate provision of the required service and intervention plans.

Compensation for Losses: Guidance on how to claim losses incurred due to this oversight and a discussion on potential compensatory measures are necessary.

Support and Guidance: Additional support to help navigate and rectify this situation would be invaluable.

Addressing the Issue:

We have initiated complaints and engaged directly with the Connecticut Department of Social Services. All communications have been thoroughly documented.

Call to Action:

I earnestly seek your prompt intervention and advocacy in ensuring this grievance is communicated to all pertinent departments within the state of Connecticut tasked with addressing such critical matters. The departments that ought to be immediately apprised of this situation include, but are not limited to:

Connecticut Department of Social Services

Connecticut Attorney General's Office

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Connecticut Office of the Healthcare Advocate

Connecticut Office of Policy and Management

I have proactively initiated complaints and have directly engaged with the Connecticut Department of Social Services. Rest assured, all communications have been meticulously documented, encompassing dates, times, and the identities of the individuals engaged in these discussions.

I place my trust in your unwavering commitment to justice and fairness, confident that you will accord this matter the urgency and gravitas it demands, ensuring a comprehensive investigation and the implementation of corrective measures. The

equitable treatment of all service providers operating under the Connecticut Medicaid ABI Waiver Program is of utmost importance, and I am optimistic that your intervention will usher in a just resolution.

I am grateful for your time and thoughtful consideration of this crucial matter.

Best regards,
David Medeiros
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11/15/2023

Subject: Formal Grievance and Complaint Regarding the Concealment of Public Information: Medicaid ABI Waiver Program Directory of Providers.

To: All pertinent departments within the state of Connecticut,

I am writing on behalf of ABI Resources to express our formal grievance and file a complaint regarding the handling of the Medicaid Acquired Brain Injury (ABI) Waiver Program by the Connecticut Department of Social Services (DSS). Specifically, our complaint centers on the apparent concealment of the Medicaid ABI Waiver Program Directory of Providers, a critical public resource.

Key Concerns and Grievances:

- a) Denial of Public Access to Information: The DSS managed Medicaid ABI Waiver Program Directory of Providers is public information, rightfully accessible to all. Its concealment not only violates the principles of transparency and public service but also directly impacts those in dire need of these services.
- b) Inaccessibility to Vulnerable Populations: The absence of accessible information severely restricts the ability of individuals with acquired brain



injuries, their families, and caregivers to make informed decisions regarding care and support. This lack of access is particularly detrimental, given the complex needs of this population.

- c) Increased Risk and Exploitation: Without knowledge of accredited and reputable providers, vulnerable individuals are at a heightened risk of exploitation and subpar services, which can lead to adverse health outcomes.
- d) Unnecessary Strain on Families and Caregivers: Families and caregivers, already burdened with care responsibilities, face additional challenges in finding appropriate services, contributing to increased stress and potential caregiving errors.
- e) Financial and Operational Impact on ABI Resources: As a provider, ABI Resources has suffered considerable financial losses due to decreased client engagement and an increased administrative burden. This situation stems directly from the unavailability of the provider directory, which hinders our ability to efficiently connect with potential clients.
- f) Administrative Burdens and Resource Diversion: The lack of a central, accessible directory has led to an excessive administrative load, diverting critical resources from our core mission of providing care.

Proposed Solutions and Steps to Address the Issue:

- 1) Immediate Disclosure and Accessibility: We request the immediate release of the Medicaid ABI Waiver Program Directory of Providers, ensuring it

is readily accessible to all stakeholders, particularly the public and vulnerable populations.

- 2) Commitment to Transparency: The DSS should commit to ongoing transparency in all aspects of the ABI Waiver Program, including regular updates and easy access to all program-related information.
- 3) Constructive Dialogue and Rectification: ABI Resources seeks to engage in a constructive dialogue with the DSS to discuss the implications of this concealment and explore potential avenues for rectifying the financial and operational impacts.

Addressing the Issue:

We have initiated complaints and engaged directly with the Connecticut Department of Social Services. All communications have been thoroughly documented.

Potential Steps to Address the Issue:

Immediate Investigation: We request a prompt investigation into this matter.

Provision of Required Plans: We urge for the immediate provision of the required service and intervention plans.

Compensation for Losses: Guidance on how to claim losses incurred due to this oversight and a discussion on potential compensatory measures are necessary.

Support and Guidance: Additional support to help navigate and rectify this situation would be invaluable.

Call to Action:

I earnestly seek your prompt intervention and advocacy in ensuring this grievance is communicated to all pertinent departments within the state of Connecticut tasked with addressing such critical matters. The departments that ought to be immediately apprised of this situation include, but are not limited to:

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I have proactively initiated complaints and have directly engaged with the Connecticut Department of Social Services. Rest assured, all communications have been meticulously documented, encompassing dates, times, and the identities of the individuals engaged in these discussions.

We urge the Connecticut Department of Social Services, alongside the Attorney General's Office, the Commission on Human Rights and Opportunities, the Office of the Healthcare Advocate, and the Office of Policy and Management, to address this grievance promptly. The issue at hand not only affects ABI Resources but also speaks to the larger matter of public trust and the accessibility of crucial healthcare information.

We anticipate a constructive and swift response to this urgent matter, underscoring the importance of transparency and accessibility in public services, especially those catering to vulnerable populations.

I place my trust in your unwavering commitment to justice and fairness, confident that you will accord this matter the urgency and gravitas it demands, ensuring a comprehensive investigation and the implementation of corrective measures. The equitable treatment of all service providers operating under the Connecticut Medicaid ABI Waiver Program is of utmost importance, and I am optimistic that your intervention will usher in a just resolution.

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11/16/2023

Subject: Formal Complaint and Request for Immediate Clarification on
Unauthorized Care Management Consultation Services in ABI Waiver Program 1.

To: All pertinent departments within the state of Connecticut,

Connecticut Department of Social Services and Relevant Oversight Bodies

I am writing on behalf of ABI Resources to express grave concerns and urgently seek detailed clarification on practices we have observed within the Medicaid Acquired Brain Injury (ABI) Waiver Program, particularly in ABI Waiver Program 1. Our complaint specifically focuses on what appears to be an unauthorized provision of care management consultation services in Program 1, a practice traditionally and explicitly designated for Program 2 under existing guidelines. This letter outlines our observations, the potential negative impacts on our business operations and our consumers, and our urgent requests for resolution

Key concerns and grievances:

1. Unauthorized Consultation Services: The core of our concern lies in the apparent provision of care management consultation services to consumers in ABI Waiver Program 1. This practice is not authorized under the current program guidelines and represents a significant breach of protocol,

raising serious concerns about compliance and oversight within the program.

2. Lack of Clarity and Transparency in Program Administration: The sudden and unexplained introduction of these services in Program 1 has created an atmosphere of confusion and uncertainty. We seek immediate and detailed clarification from the Department on whether there have been any recent changes to the scope or administration of ABI Waiver Program 1 that would authorize such services.
3. Improper Recommendations for Program Transitions: Additionally, we have noted instances where care managers are inappropriately advising Program 1 consumers to transition to Program 2. This advice, given without proper authority or assessment, potentially disrupts the tailored care plans crucial for the recovery of individuals with acquired brain injuries.

In-Depth Analysis of Impact on ABI Resources and Consumers:

1. Operational and Strategic Challenges: The introduction of potentially unauthorized services has disrupted our strategic planning and operational execution. It has forced us to reevaluate our service delivery models and resource allocation, potentially leading to inefficiencies and diminished care quality.
2. Risk to Consumer Trust and Quality of Care: The ambiguity surrounding these services risks damaging the trust that consumers and their families have in the system. It raises concerns about the appropriateness of care

provided, which is essential for effective recovery and rehabilitation in ABI cases.

3. Market Imbalance and Competitive Disadvantage: This situation creates an unfair market environment. Providers adhering to the guidelines may be at a disadvantage compared to those who are offering these additional, potentially unauthorized services. This not only affects our competitive position but also skews the overall market dynamics in ABI care services.

Specific Requests for Resolution and Enhanced Transparency:

1. Comprehensive Investigation and Clear Communication: We request an immediate, comprehensive investigation into the provision of care management consultation services in ABI Waiver Program 1, accompanied by clear communication on any policy adjustments.
2. Immediate Enforcement of Compliance: We urge the prompt enforcement of existing program guidelines and the cessation of any unauthorized practices.
3. Proactive Support and Guidance for All Stakeholders: We advocate for the development of support and guidance initiatives for both service providers and consumers to navigate these changes effectively, ensuring everyone is fully informed about their rights and the services available.
4. Corrective Measures for Non-Compliance: Implementation of corrective actions, including disciplinary measures, against entities found in violation of program rules, to maintain the integrity and effectiveness of the program.

Conclusion:

ABI Resources is deeply committed to providing high-quality care within the ABI Waiver Program framework. The current situation, marked by potential unauthorized practices, poses significant challenges to our operations and the well-being of our consumers. We trust that the Connecticut Department of Social Services and relevant oversight bodies will address these issues with the urgency and thoroughness they demand, ensuring the program's integrity and efficacy. We look forward to a swift, detailed, and transparent response to this critical issue.

Call to Action:

I earnestly seek your prompt intervention and advocacy in ensuring this grievance is communicated to all pertinent departments within the state of Connecticut tasked with addressing such critical matters. The departments that ought to be immediately apprised of this situation include, but are not limited to:

Connecticut Department of Social Services
Connecticut Attorney General's Office
Connecticut Commission on Human Rights and Opportunities
Connecticut Office of the Healthcare Advocate
Connecticut Office of Policy and Management

I have proactively initiated complaints and have directly engaged with the Connecticut Department of Social Services. Rest assured, all communications have been meticulously documented, encompassing dates, times, and the identities of the individuals engaged in these discussions.

We urge the Connecticut Department of Social Services, alongside the Attorney General's Office, the Commission on Human Rights and Opportunities, the Office of the Healthcare Advocate, and the Office of Policy and Management, to address this grievance promptly. The issue at hand not only affects ABI Resources but also speaks to the larger matter of public trust and the accessibility of crucial healthcare information.

We anticipate a constructive and swift response to this urgent matter, underscoring the importance of transparency and accessibility in public services, especially those catering to vulnerable populations.

I place my trust in your unwavering commitment to justice and fairness, confident that you will accord this matter the urgency and gravitas it demands, ensuring a comprehensive investigation and the implementation of corrective measures. The equitable treatment of all service providers operating under the Connecticut Medicaid ABI Waiver Program is of utmost importance, and I am optimistic that your intervention will usher in a just resolution.

I am grateful for your time and thoughtful consideration of this crucial matter.

Best regards,
David Medeiros
David Medeiros
ABI Resources, CEO, Director, Team Member



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11/16/2023

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

To: All pertinent departments within the state of Connecticut,

I am David Medeiros from ABI Resources, and I present this document to voice our serious concerns about certain activities within the Medicaid Acquired Brain Injury (ABI) Waiver program. These activities, which appear to breach ethical standards and potentially violate Medicaid regulations, require immediate scrutiny and action.

Examination of the ABI Waiver Program's Framework:

The ABI Waiver Program, established under sections 17b-260a-1 to 17b-260a-17 of the Connecticut State Agencies regulations, is designed to offer nonmedical, home, and community-based services to eligible individuals with an ABI. This program emphasizes the need for cost-effective services, personalized care, and adherence to strict qualifications for providers, ensuring that the services provided meet the highest ethical and professional standards.



Conflicts Arising from Service Provision:

Dual Service Conflict:

In the context of the ABI Waiver Program, a significant conflict has emerged due to an agency providing both Clinical Behavioral Therapy (CBT) and daily non-medical services to the same group of consumers. This situation raises several concerns:

Therapeutic Recommendations Overlapping with Financial Interests:

There is an apparent alignment of therapeutic recommendations with the agency's financial interests. The agency uses the platform of CBT sessions to recommend additional non-medical services that it also provides. This practice suggests a dual benefit for the agency, where it gains financially from both therapy sessions and the subsequent non-medical services.

Influence on Consumer Choice:

The dual role of the agency potentially influences consumer choice, where therapeutic sessions, which should be neutral and solely in the interest of the Consumer's health, may be used to steer consumers towards additional services provided by the same agency. This situation can lead to biased recommendations that may not always be in the best interest of the consumer.

Cycle of Service Provision and Financial Gain:

There is a creation of a cycle wherein the agency, through its provision of CBT, identifies or creates a need for additional services, fulfills these needs through its non-medical services arm, and consequently benefits financially. This cycle raises questions about the objectivity of the service recommendations and the potential for unnecessary or excessive services being provided.

Potential for Overutilization of Services:

This overlap in services could lead to overutilization, where consumers receive more services than are necessary, leading to increased costs for the Medicaid program.

Ethical Implications:

The practice blurs the lines between therapeutic need and financial gain, potentially compromising the ethical standards expected in healthcare and social service provision.

These concerns necessitate a thorough examination to ensure that services provided under the ABI Waiver Program are free from conflicts of interest, maintain the highest ethical standards, and truly serve the best interests of the consumers.

Manipulative Consumer Steering and Personnel Poaching:

Directing Consumer Choices:

The conduct of the agency's Clinical Behavioral Therapy (CBT) providers has raised significant concerns regarding the manipulation of Consumer choices. This issue manifests in several ways:

Targeted Referrals:

CBT providers are reportedly channeling consumers towards the agency's own non-medical services. This practice goes beyond the realm of impartial medical advice, as it systematically directs consumers to services that benefit the agency financially, rather than based on the unbiased assessment of Consumer needs.

Influence on Consumer Decision-Making:

This approach potentially undermines the autonomy of consumers in making informed decisions about their care. By directing consumers towards specific services, there's a risk that consumers are being provided a narrowed view of available options, influenced more by the agency's financial interests than by Consumer welfare.

Questionable Ethical Practices:

The behavior of these CBT providers raises ethical questions, particularly regarding the integrity of their recommendations. It potentially violates the principle of acting in the best interests of the Consumer, a cornerstone of healthcare and therapeutic professions.

Unfair Competitive Tactics:

The agency's practices extend beyond Consumer manipulation, affecting the broader operational dynamics within the industry:

Staff Poaching:

Reports indicate that the agency has engaged in poaching staff from other providers. This action not only disrupts the operations of other agencies but also indicates a strategic approach to weaken competition and consolidate the agency's position in the market.

Disruption of Industry Standards:

Such tactics contribute to an uneven playing field, where ethical providers adhering to fair hiring practices are disadvantaged. This behavior can lead to a destabilization of the market, with one agency gaining undue advantage and influence.

Impact on Service Quality:

The poaching of staff may lead to a shortage of skilled professionals in other agencies, potentially affecting the quality of care and services provided to consumers across the industry.

These practices of manipulative Consumer steering and personnel poaching call for an in-depth review to ensure that the ABI Waiver Program operates in a fair, ethical, and competitive environment, where Consumer welfare and industry standards are upheld.

Indicators of Potential Kickback Arrangements:

Referral for Incentives:

The relationships and interactions among the service provider, Clinical Behavioral Therapy (CBT) professionals, and care management consultants reveal possible mechanisms of kickback arrangements. This is characterized by:

Questionable Referral Patterns:

There appears to be a consistent pattern where CBT professionals and care management consultants funnel consumers to specific services offered by the agency. This pattern suggests a systematic approach to referrals that may not be solely based on Consumer needs but rather on underlying incentives.

Financial Incentives for Referrals:

The possibility that CBT professionals and care management consultants receive financial or other forms of incentives for directing consumers to the agency's services is a major concern. Such incentives could significantly compromise the

integrity of Consumer referrals, with decisions potentially driven by personal gain rather than Consumer welfare.

Cyclical Billing and Service Utilization:

The referral system seems to create a cyclical pattern of billing and service utilization, where Consumer needs are continuously identified and serviced within the same agency network, fostering an environment of repeated financial gain for the agency.

Impact on Medicaid Expenditures:

If these practices are occurring, they could lead to increased and potentially unnecessary Medicaid expenditures. Consumers may be receiving more services than medically necessary, or services that could be more effectively provided elsewhere, leading to inflated costs borne by the Medicaid program.

Ethical and Legal Implications:

Such kickback arrangements, if confirmed, would not only breach ethical standards but also could contravene legal statutes governing Medicaid and healthcare services. Kickbacks in healthcare are illegal and undermine the principle of fair competition and the integrity of patient care.

The existence of these indicators necessitates a thorough investigation to ascertain the presence of kickback arrangements and to evaluate their impact on the Medicaid program's ethical standards and financial integrity. It is imperative to ensure that all practices within the ABI Waiver Program align with legal and ethical guidelines, safeguarding the program's integrity and the wellbeing of its beneficiaries.

Impact on ABI Resources:

Revenue Reduction

Consumer Diversion Impact:

ABI Resources has experienced a significant downturn in revenue, which can be directly attributed to the diversion of consumers towards the agency in question. This diversion likely results from the alleged unethical steering and manipulative practices, leading to a reduced Consumer base for ABI Resources.

Financial Viability Threatened:

The reduction in revenue poses a threat to the financial viability and sustainability of ABI Resources, impacting our ability to provide quality care and services to our consumers.

Operational Cost Surge:

Increased Marketing Expenditures: In an effort to counteract the loss of consumers and to rebuild our Consumer base, ABI Resources has had to significantly increase our investment in marketing. These additional expenses are necessary to communicate our commitment to ethical practices and quality care to the community.

Legal and Consultation Fees:

Addressing these unethical practices and exploring legal avenues for recourse has led to increased spending on legal consultations and related services. These expenditures are essential for navigating the complexities of the situation and seeking justice, but they also divert resources from other operational areas.

Consumer Relationship Erosion:

Loss of Trust and Business: The most profound impact has been on our established Consumer relationships. The manipulative practices of the agency in question have led to a loss of trust among our consumers, as they are steered away from ABI Resources. This erosion of trust is deeply concerning, as it undermines the long-standing relationships we have built based on care, integrity, and ethical service provision.

Reputation Damage:

The wider implications of these practices in the industry have led to a tarnished reputation, not just for the agency in question, but for service providers in general, including ABI Resources. Restoring our reputation in the wake of these events is a significant challenge, requiring substantial effort and resources.

The cumulative effect of these impacts on ABI Resources is profound, affecting not just our financial stability but also our reputation and, most importantly, our ability to serve our consumers effectively. It is imperative that these issues are addressed comprehensively to restore the integrity of service provision within the ABI Waiver Program and to protect agencies like ours that are committed to ethical practices.

Formal Requests Thorough Examination and Compliance Review:

Comprehensive Investigation:

We formally request a complete and thorough examination of the outlined practices. This investigation should encompass all entities involved, including the service provider, CBT professionals, and care management consultants.

Medicaid Compliance Review:

A detailed review of Medicaid compliance is crucial to determine if these practices violate Medicaid regulations and standards.

Application of Corrective and Disciplinary Measures:

Immediate Corrective Action: Upon confirmation of these practices, we strongly advocate for swift implementation of corrective measures to address and rectify the identified issues.

Disciplinary Proceedings:

We also call for appropriate disciplinary actions against any parties found to be complicit in these unethical practices, in accordance with legal and regulatory guidelines.

Review and Revision of Policies and Oversight:

Policy Overhaul:

A comprehensive review and subsequent revision of existing policies within the ABI Waiver Program is necessary. This review should focus on closing loopholes that allow for such unethical practices and ensuring robust safeguards against future violations.

Enhanced Oversight Mechanisms:

We propose the establishment or enhancement of oversight mechanisms within the ABI Waiver Program to ensure ongoing compliance with ethical and legal standards.

In Closing:

The concerns we have raised in this document, if validated, point towards serious ethical lapses and potential legal infractions concerning Medicaid regulations. The very foundation of the ABI Waiver program, along with the trust placed in it by its beneficiaries, relies on prompt, effective, and transparent action from the Connecticut Department of Social Services.

We appreciate your attention to this urgent and significant matter and hope for a swift resolution that upholds the principles of justice and integrity.

Call to Action:

I earnestly seek your prompt intervention and advocacy in ensuring this grievance is communicated to all pertinent departments within the state of Connecticut tasked with addressing such critical matters. The departments that ought to be immediately apprised of this situation include, but are not limited to:

Connecticut Department of Social Services

Connecticut Attorney General's Office

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We anticipate a constructive and swift response to this urgent matter, underscoring the importance of transparency and accessibility in public services, especially those catering to vulnerable populations.

I place my trust in your unwavering commitment to justice and fairness, confident that you will accord this matter the urgency and gravitas it demands, ensuring a comprehensive investigation and the implementation of corrective measures. The equitable treatment of all service providers operating under the Connecticut Medicaid ABI Waiver Program is of utmost importance, and I am optimistic that your intervention will usher in a just resolution.

I am grateful for your time and thoughtful consideration of this crucial matter.

Best regards,
David Medeiros
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11/20/2023

Subject Complaint and Request for Clarity Regarding Rental Agreements in the Medicaid ABI Waiver Program 1 and 2.

To: All pertinent departments within the state of Connecticut,

As a stakeholder in the Medicaid Acquired Brain Injury (ABI) Waiver Program, we, David Medeiros and ABI Resources, wish to raise a serious concern and request clarity regarding a critical issue impacting consumers and service providers within the program.

Key Grievance and Request:

We have observed a growing trend where consumers of the ABI Waiver Program are being locked into rental agreements with agency service providers or their business partners. These arrangements appear to significantly restrict consumer choice and freedom, creating a monopolistic environment detrimental to both consumers and independent service providers like ABI Resources.

Concerns:

Restricted Consumer Choice: Consumers are often coerced into staying with a particular agency due to fears of losing their housing, and belongings, or causing



inconvenience to roommates. This undermines the fundamental principle of consumer choice and control in the ABI Waiver Program.

Fear of Repercussions:

Many consumers feel trapped, unable to voice concerns about neglect or abuse due to the fear of losing their housing or facing other retaliatory actions.

Isolation from Advocacy and Assistance:

These rental agreements may isolate consumers from external resources and advocacy groups, further reducing their ability to seek help or change service providers.

Monopolistic Practices:

Such arrangements foster a monopolistic marketplace, hindering the ability of independent providers like ABI Resources to compete fairly and offer services to consumers.

Financial Concerns:

These rental agreements often involve dual payments - for waiver program services and rent - potentially leading to financial improprieties, especially when both payments are sourced from state or federal funding.

Request for Action:

Investigation into Legal and Ethical Violations:

We request a thorough investigation into these practices for potential violations of consumer rights, anti-trust laws, and Medicaid regulations.

Transparency and Regulatory Oversight:

There is a need for greater transparency and oversight in how rental agreements are managed within the ABI Waiver Program to ensure they do not conflict with program objectives or consumer rights.

Guidance and Policy Review:

We seek clear guidance on acceptable practices regarding rental agreements and the integration of housing with service provision.

Support for Affected Service Providers:

We request consideration of the adverse impact these practices have on service providers like ABI Resources, who strive to offer competitive and consumer-focused services.

Your prompt attention to this matter is crucial for maintaining the integrity of the ABI Waiver Program and the well-being of its consumers.

Indicators of Potential Kickback Arrangements:

Referral for Incentives:

The relationships and interactions among the service provider, and care management consultants reveal possible mechanisms of kickback arrangements.

This is characterized by:

Questionable Referral Patterns:

There appears to be a consistent pattern where care management consultants funnel consumers to specific services offered by the agency. This pattern suggests a systematic approach to referrals that may not be solely based on Consumer needs but rather on underlying incentives.

Financial Incentives for Referrals:

The possibility that professionals and care management consultants receive financial or other forms of incentives for directing consumers to the agency's services is a major concern. Such incentives could significantly compromise the integrity of Consumer referrals, with decisions potentially driven by personal gain rather than Consumer welfare.

Cyclical Billing and Service Utilization:

The referral system seems to create a cyclical pattern of billing, service utilization, and rental arrangements where consumer needs are continuously identified and serviced within the same agency network, fostering an environment of repeated financial gain for the agency.

Impact on Medicaid Expenditures:

If these practices are occurring, they could lead to increased and potentially unnecessary Medicaid expenditures. Consumers may be receiving more services than medically necessary, or services that could be more effectively provided elsewhere, leading to inflated costs borne by the Medicaid program.

Ethical and Legal Implications:

Such kickback arrangements, if confirmed, would not only breach ethical standards but also could contravene legal statutes governing Medicaid and healthcare services. Kickbacks in healthcare are illegal and undermine the principle of fair competition and the integrity of patient care.

The existence of these indicators necessitates a thorough investigation to ascertain the presence of kickback arrangements and to evaluate their impact on the Medicaid program's ethical standards and financial integrity. It is imperative to ensure that all practices within the ABI Waiver Program align with legal and ethical guidelines, safeguarding the program's integrity and the wellbeing of its beneficiaries.

Impact on ABI Resources:

Revenue Reduction

Consumer Diversion Impact:

ABI Resources has experienced a significant downturn in revenue, which can be directly attributed to the diversion of consumers towards the agencies in question. This diversion likely results from the alleged unethical steering and manipulative practices, leading to a reduced Consumer base for ABI Resources.

Financial Viability Threatened:

The reduction in revenue poses a threat to the financial viability and sustainability of ABI Resources, impacting our ability to provide quality care and services to our consumers.

Operational Cost Surge:

Increased Marketing Expenditures:

In an effort to counteract the loss of consumers and to rebuild our Consumer base, ABI Resources has had to significantly increase our investment in

marketing. These additional expenses are necessary to communicate our commitment to ethical practices and quality care to the community.

Legal and Consultation Fees:

Addressing these unethical practices and exploring legal avenues for recourse has led to increased spending on legal consultations and related services. These expenditures are essential for navigating the complexities of the situation and seeking justice, but they also divert resources from other operational areas.

Consumer Relationship Erosion:

Loss of Trust and Business:

The most profound impact has been on our established Consumer relationships. The manipulative practices of the agency in question have led to a loss of trust among our consumers, as they are steered away from ABI Resources. This erosion of trust is deeply concerning, as it undermines the long-standing relationships we have built based on care, integrity, and ethical service provision.

Reputation Damage:

The wider implications of these practices in the industry have led to a tarnished reputation, not just for the agency in question, but for service providers in general, including ABI Resources. Restoring our reputation in the wake of these events is a significant challenge, requiring substantial effort and resources.

The cumulative effect of these impacts on ABI Resources is profound, affecting not just our financial stability but also our reputation and, most importantly, our ability to serve our consumers effectively. It is imperative that these issues are addressed comprehensively to restore the integrity of service provision within the

ABI Waiver Program and to protect agencies like ours that are committed to ethical practices.

Formal Requests Thorough Examination and Compliance Review:

Comprehensive Investigation:

We formally request a complete and thorough examination of the outlined practices. This investigation should encompass all entities involved, including the agency service provider and care management consultants.

Medicaid Compliance Review:

A detailed review of Medicaid compliance is crucial to determine if these practices violate Medicaid regulations and standards.

Review and Revision of Policies and Oversight:

Policy Overhaul:

A comprehensive review and subsequent revision of existing policies within the ABI Waiver Program is necessary. This review should focus on closing loopholes that allow for such unethical practices and ensuring robust safeguards against future violations.

Enhanced Oversight Mechanisms:

We propose the establishment or enhancement of oversight mechanisms within the ABI Waiver Program to ensure ongoing compliance with ethical and legal standards.